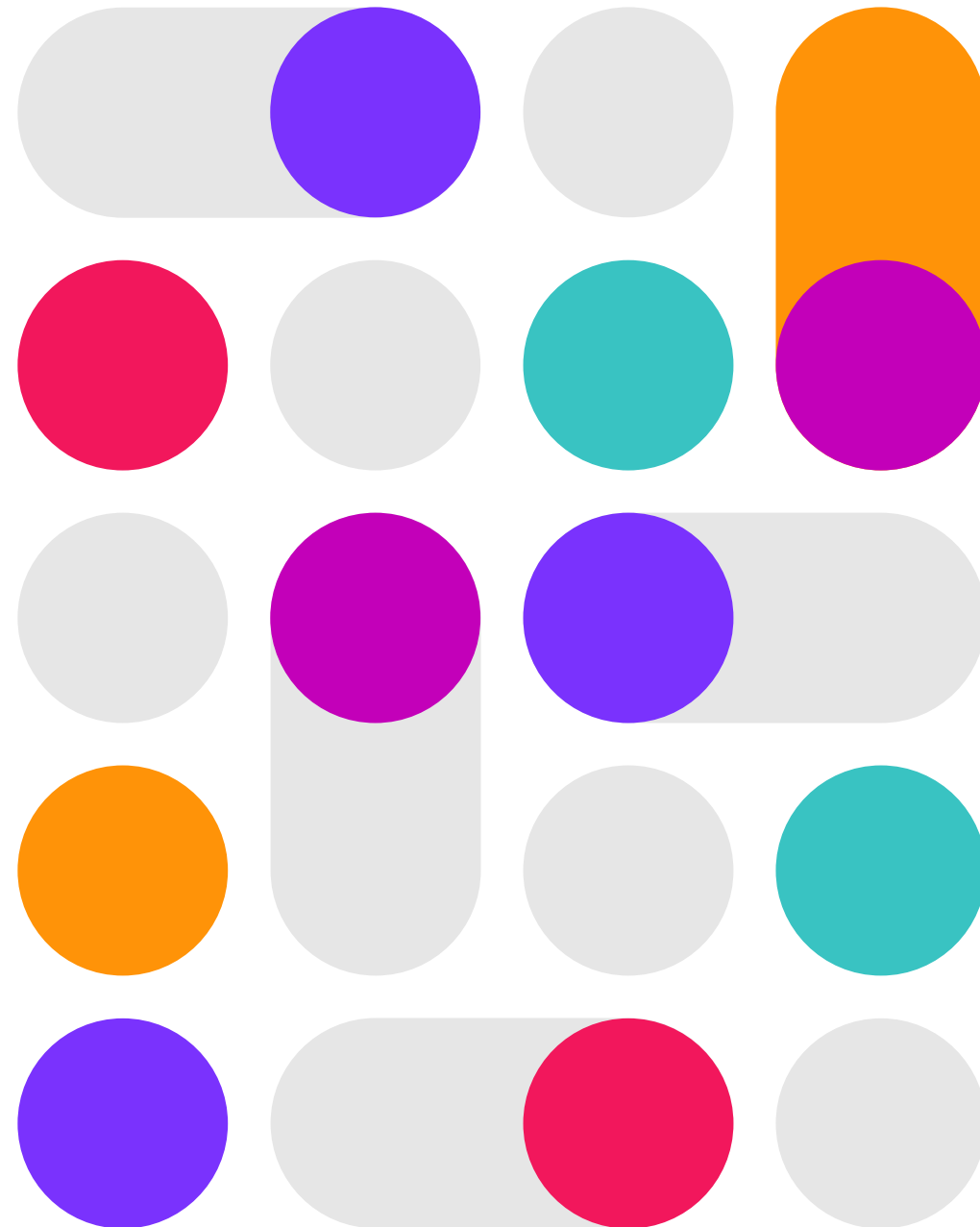


How Baylor Scott & White built a weight management strategy that meets employees where they are

October 1, 2026



Speakers



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VP of Benefits &
Wellness, *Baylor
Scott & White*



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Hughes**

Director of Behavioral
Science, *Baylor Scott
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Agenda



1

Why obesity care needs a new approach

2

The reality of weight management in a diverse workforce

3

Why traditional programs aren't moving the needle

4

Understanding real employee experiences

5

Building a comprehensive strategy



Why obesity care needs a new approach



**Obesity is a
chronic, relapsing,
multifactorial
disease — not
a willpower
problem**



Unique barriers influence an individual's ability to lose weight





The reality of weight management in a diverse workforce

Baylor Scott & White



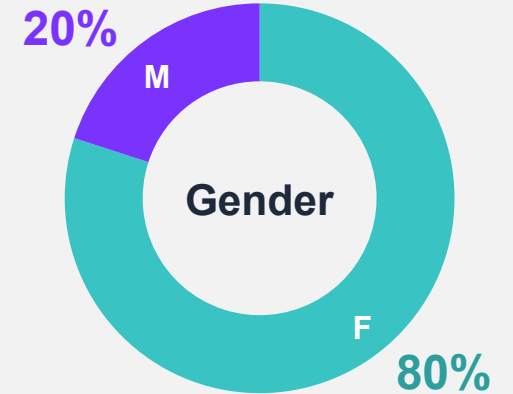
57,000

employee healthcare
organization



80%

non-desk shift
workers

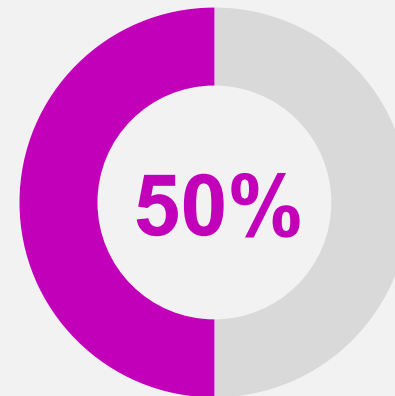


Average age:

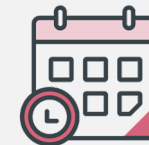
41

Generation:

Spans
Gen Z Baby
Boomers with



Millennials



72%

hourly workers



Caretaker

Comorbidities

Mother

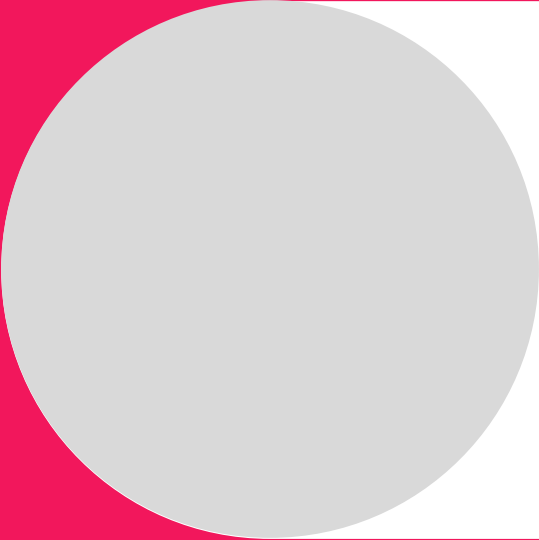
Long hours

**Middle
Income**





Why traditional programs aren't moving the needle



**Motivation is
not the problem**



1 in 5 people with obesity has tried to lose weight 20 or more times unsuccessfully

Source: NORC & ASMBS (2016).

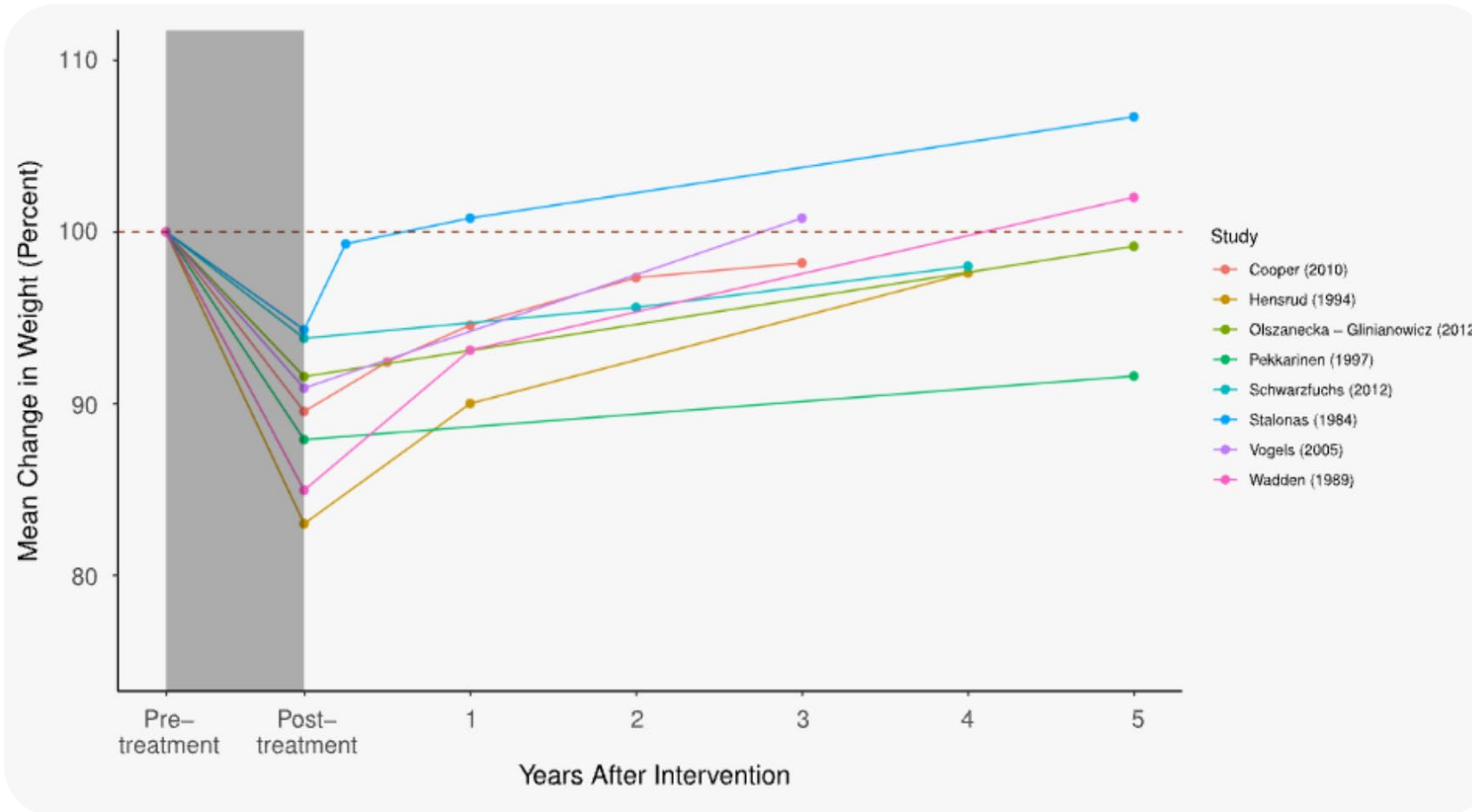


You say, ‘eat better’,
‘move more’ — **you think
I haven’t tried that?**

**I’ve failed so many times
I’ve lost count.** What I
need is your help, not
another lecture.

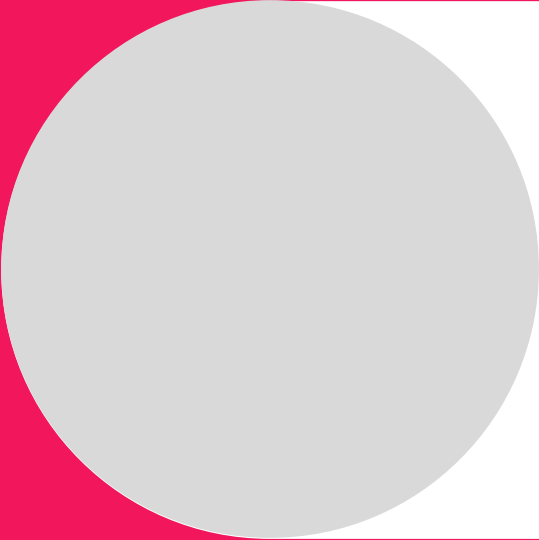


Losing weight — and keeping it off is **not the norm**



Majority of people regressed back to pre-treatment weight within 5 years

Source: Nordmo, M., Danielsen, Y. S., & Nordmo, M. (2020). The challenge of keeping it off, a descriptive systematic review of high-quality, follow-up studies of obesity treatments. *Obesity reviews*, 21(1), e12949.



**Aspirations are not
always real life**

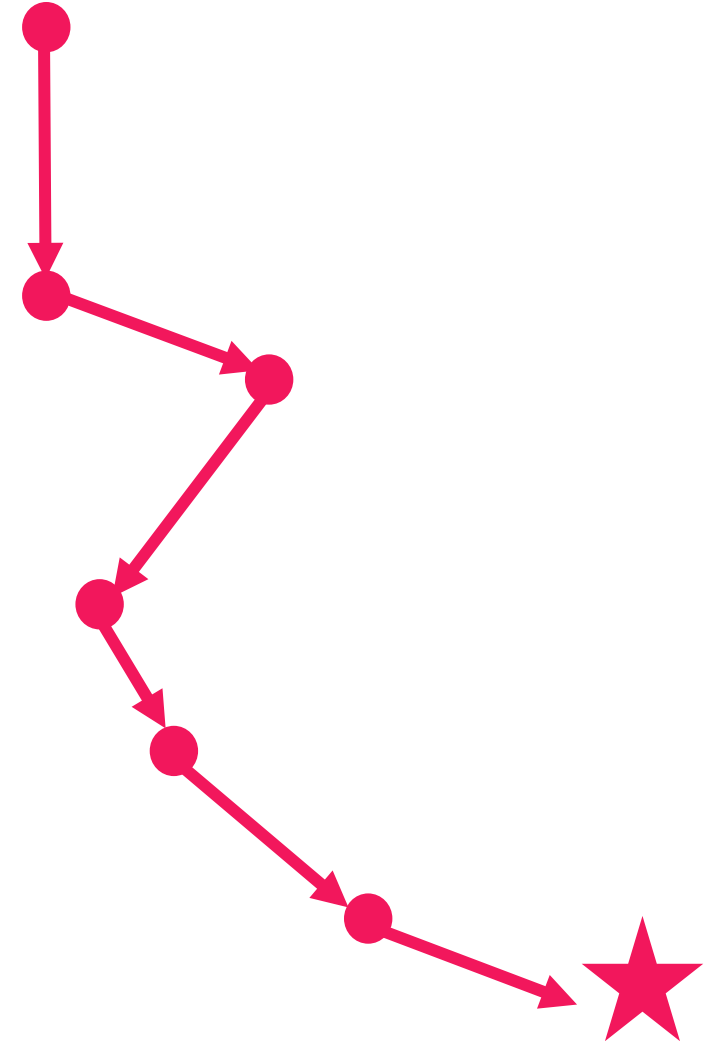


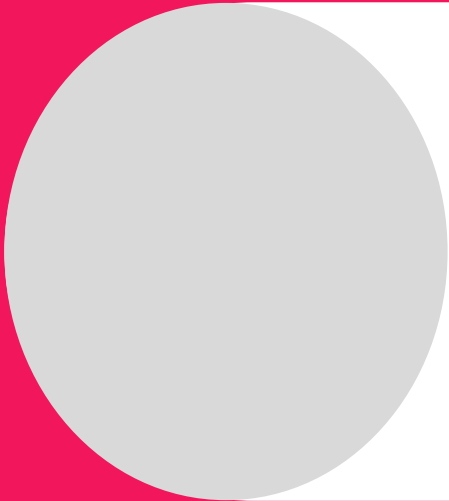
Expectation



THE PLANNING
FALLACY

Reality





**Barriers are different
for everyone**

Age: 42
Gender: Female
Weight: 220



- Single mother
- Tried to lose weight 10 times

Age: 42
Gender: Female
Weight: 220



- Family not supportive of diet changes
- Chronic knee pain
- Difficulty sleeping



Understanding real employee experiences



**What barriers
do employees face?**

The main barriers to weight loss



Weight gain history

Before- and-after turning point

Impact

Weight interfering in participation in life

Aspirations

Defined in explicitly no-weight-centric terms



Emotional Tone

Exhaustion and repeated restarting



Mindset

Trying to recover a former self



What are **employees
looking for and where do
they go for support?**



Over half, come into a weight management program with an interest in GLP-1s

54%

Want to explore weight loss medication as soon as possible

20%

Want to focus on lifestyle and behavior change only or start there first

16%

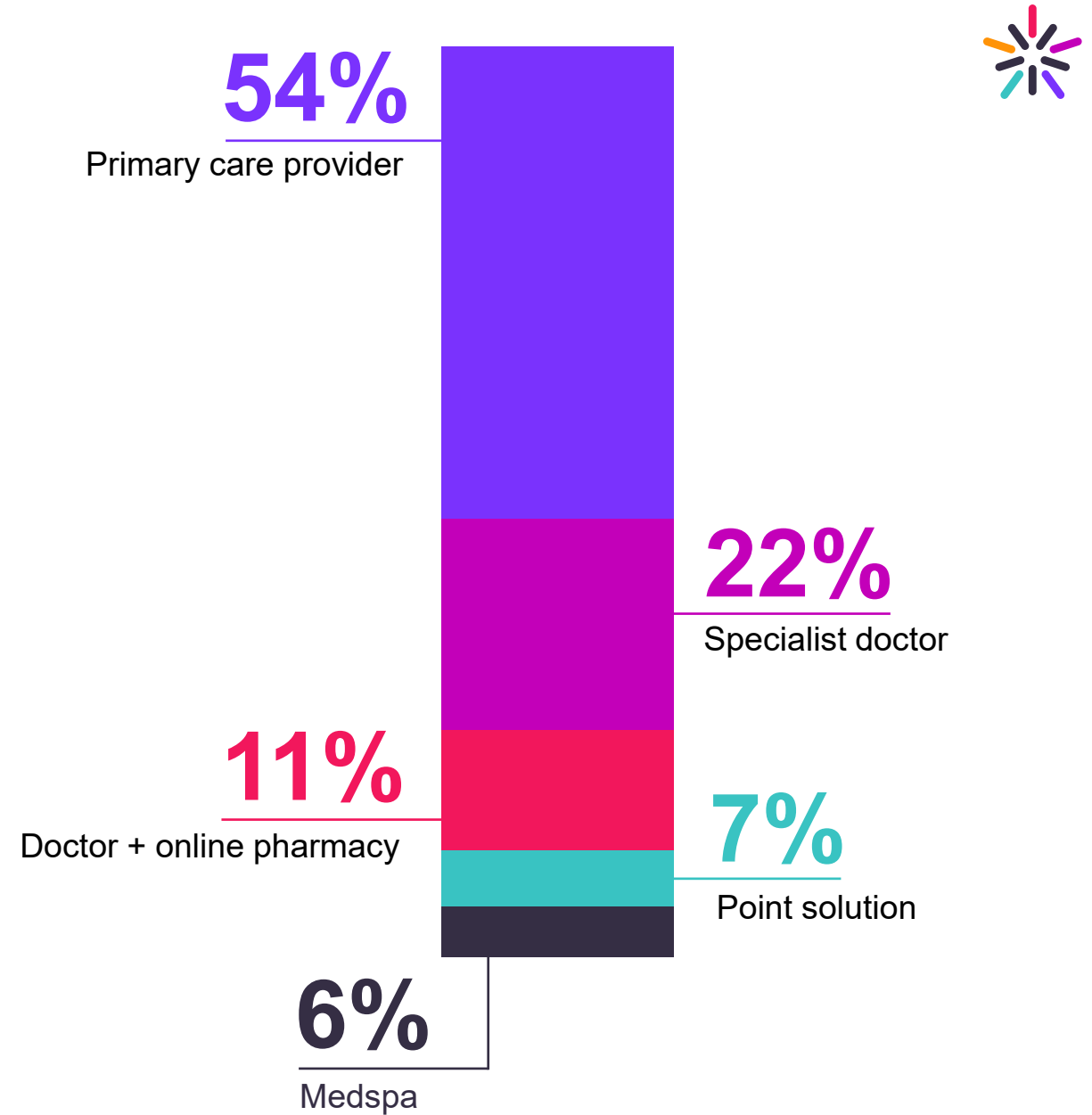
Are open to discussing medication but want to learn more first

10%

Are already taking weight loss medication when they enroll

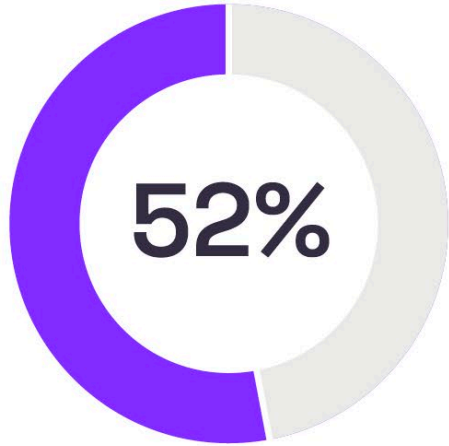
Among individuals who completed Levanto's Healthy Weight onboarding.

Majority of employees get prescriptions from their PCP

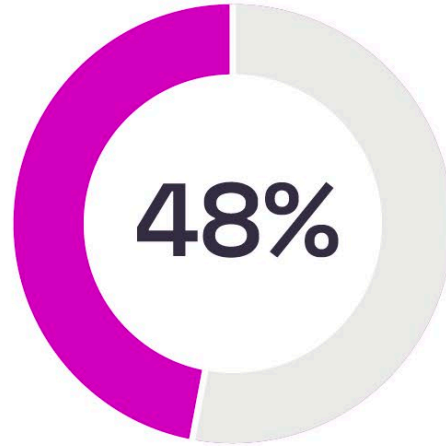




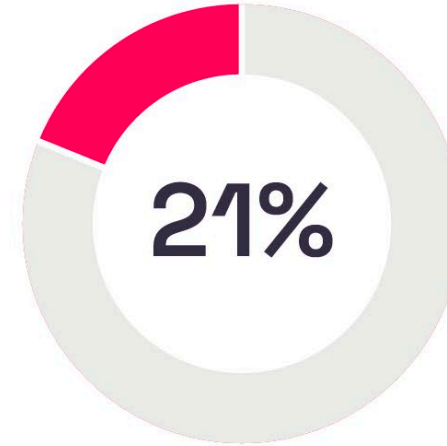
Employees plan to stop taking GLP-1s when they reach their goal



Until I reach a goal weight



As long as it is effective



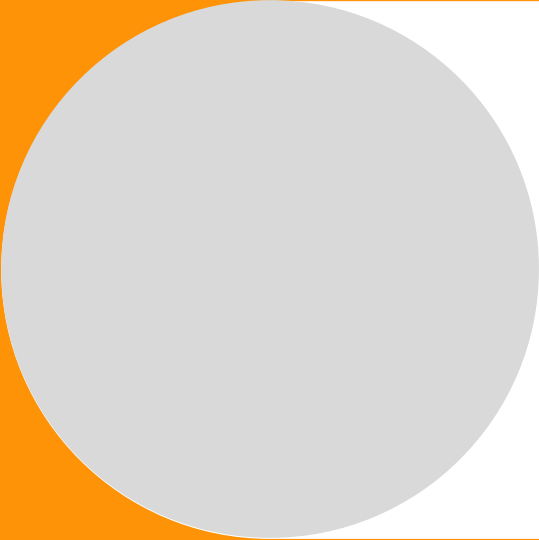
Until I reach a A1C goal



No end point in mind

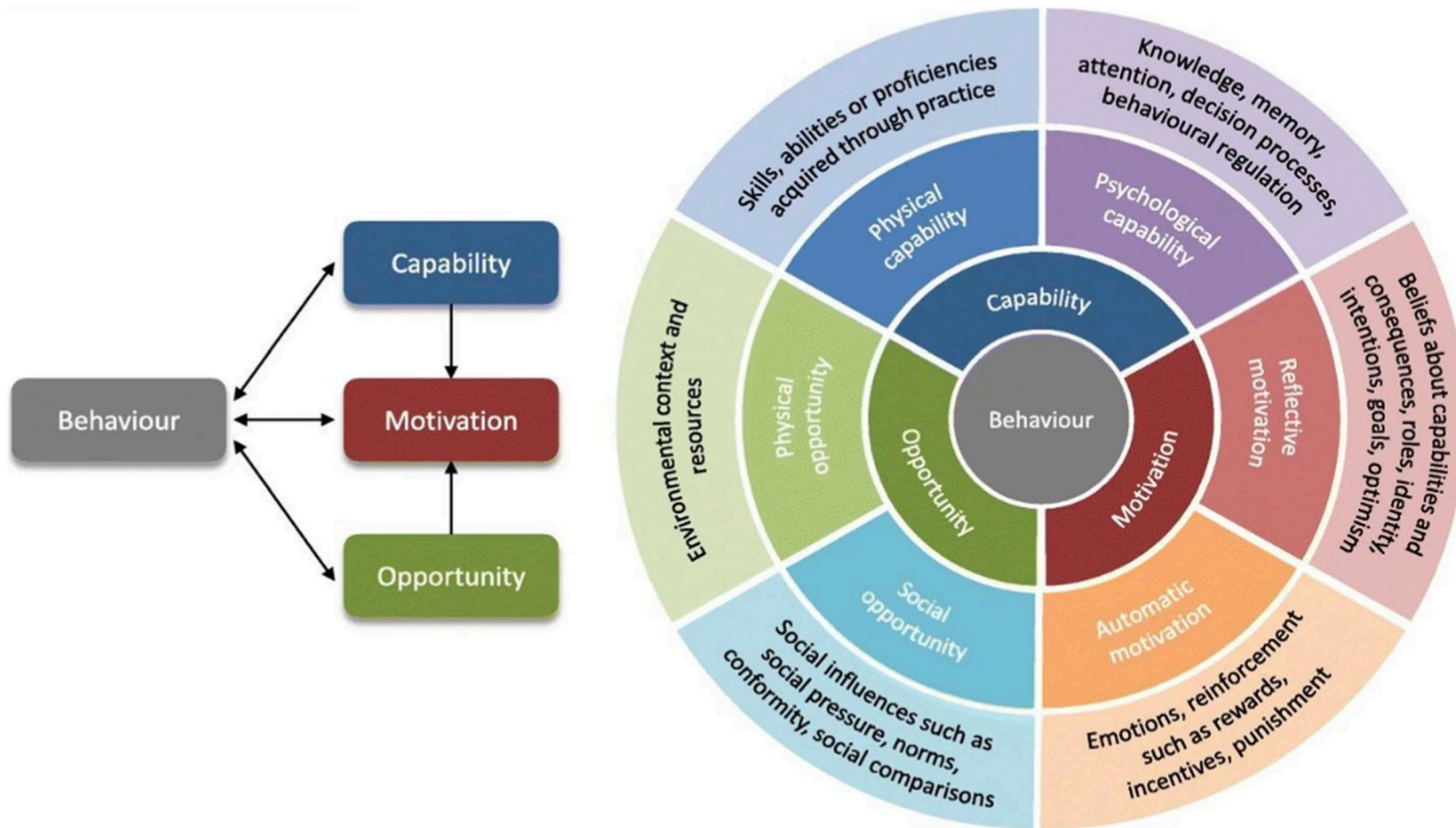


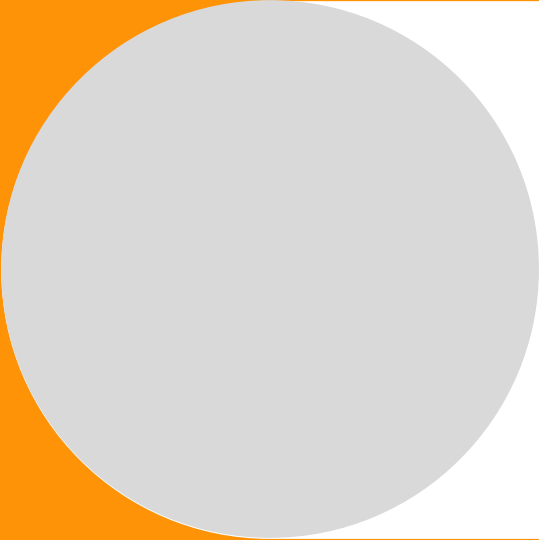
What employees need from obesity care



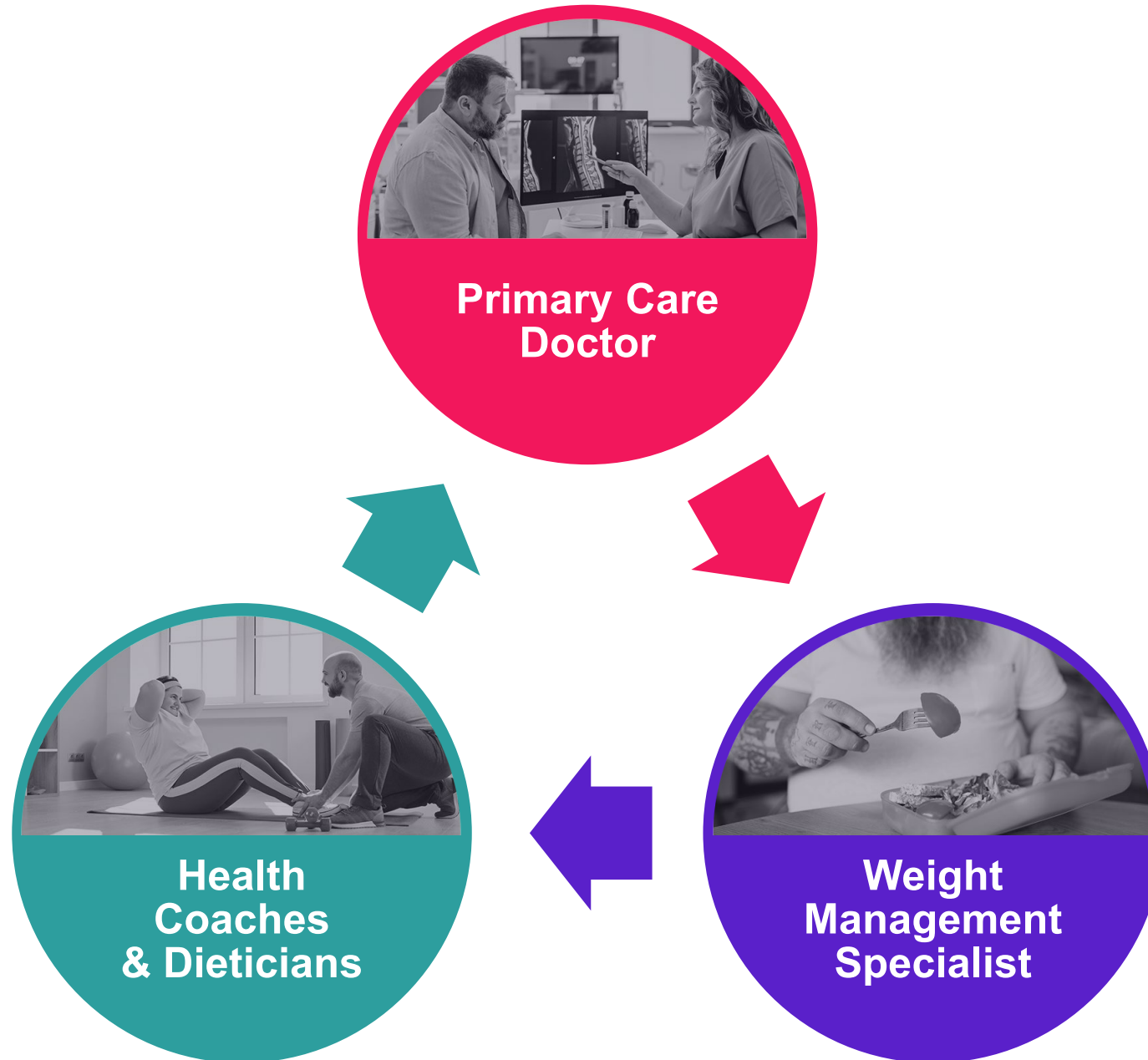
**Understand barriers
across multiple
dimensions**

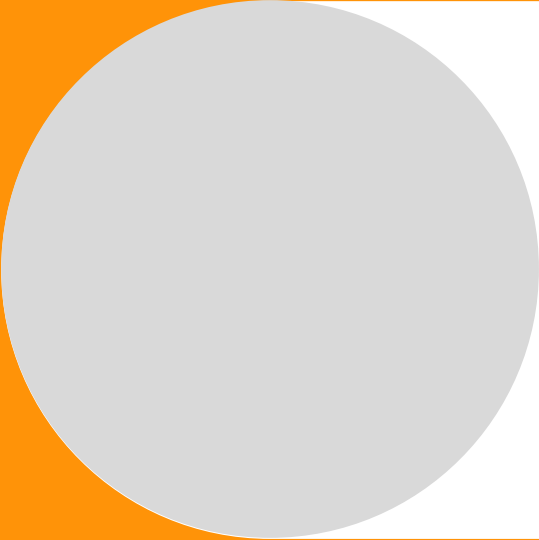
COM-B Model for behavior change



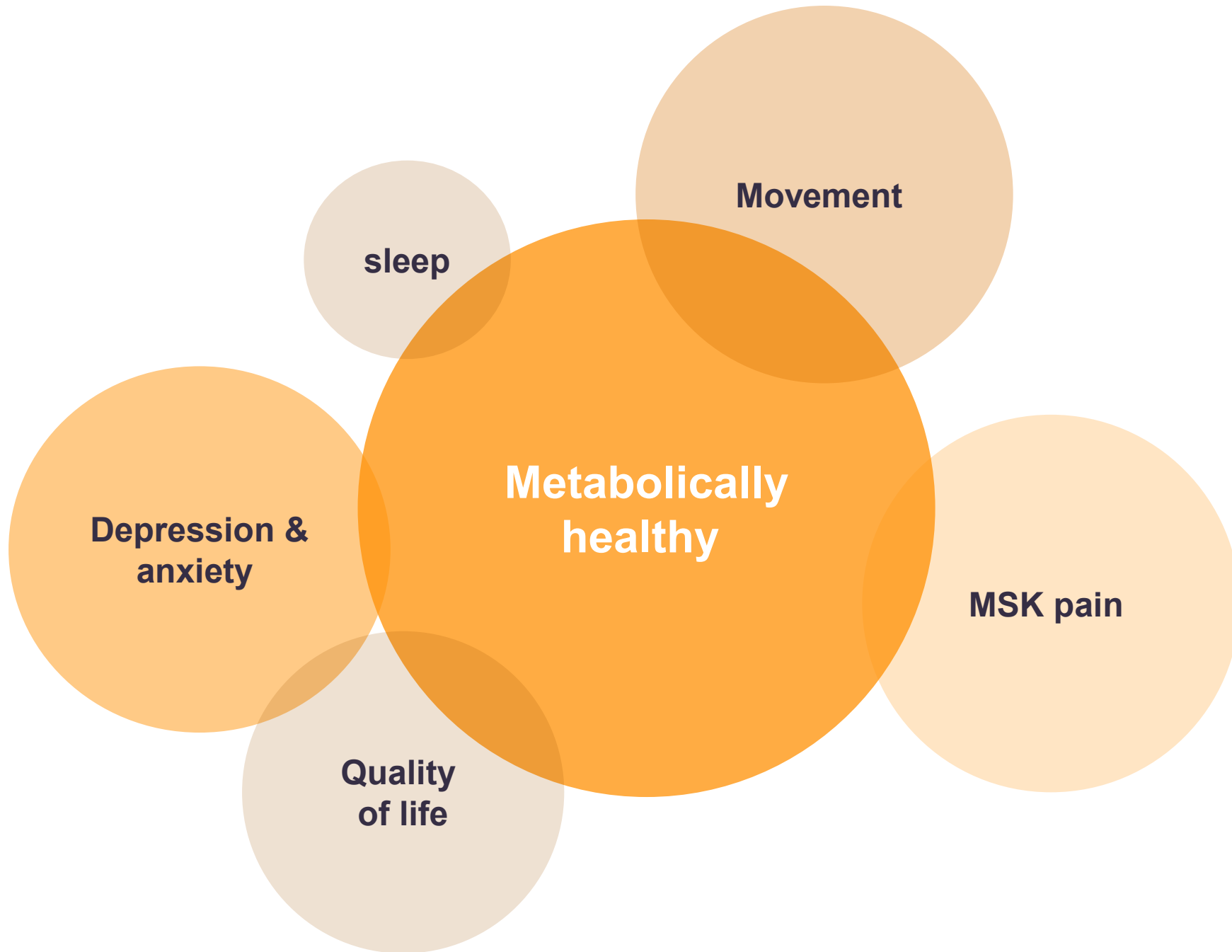


Integrate **care teams**





**Treat metabolic
health as a
connected system**





Baylor Scott & White's strategy

Benefit Philosophy



1

Data driven

2

Simplistic

3

Awareness

4

Measurement



JAN 2026

Levanto launched



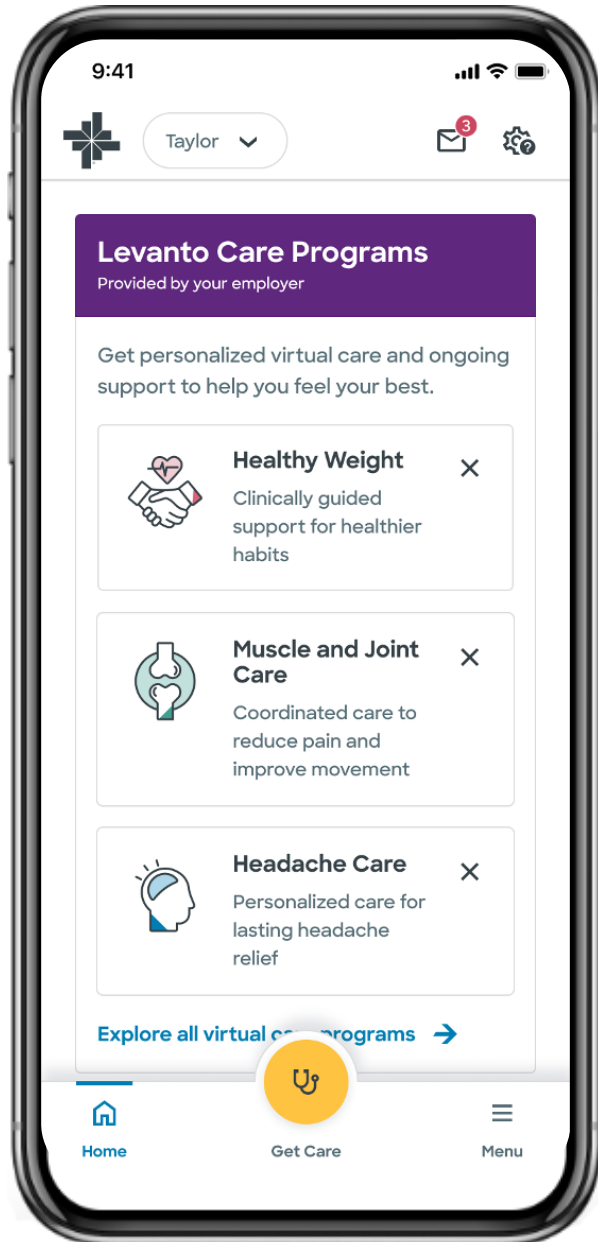
Activated employees

22%

Of marketable
population activated in seven
months

14%

Of activated population
in multiple programs



Demand signaled the need



Highest adoption with
3x higher adoption than
the next-highest program



**Strongest adoption
among dependents**
compared to other
programs

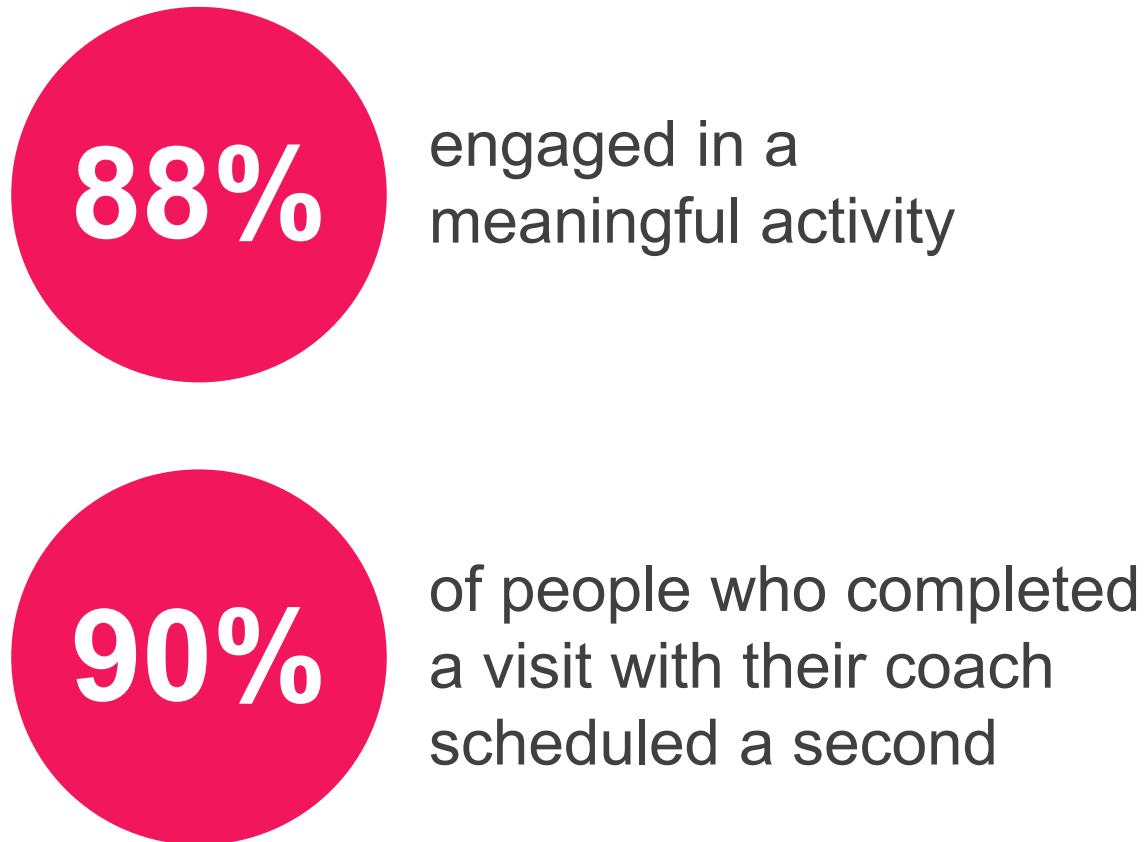


**Healthy Weight-led
messages produced the
strongest response,**
and communications on
other conditions drove
enrollment to Healthy Weight

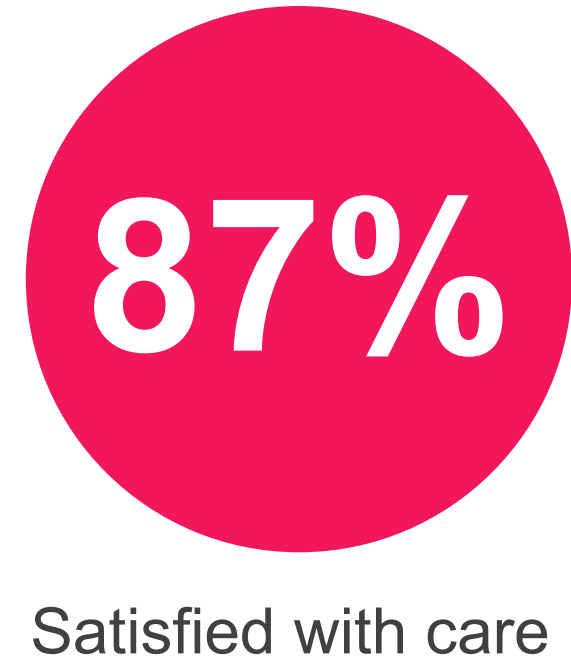
Early outcomes & impact



Strong employee engagement



Highly satisfied



Early outcomes & impact



5.1% ↓
reduction in
weight in 60 days

”

"There was no judgment. She listened to me and my situation, and took all of it into consideration."

A framework for action



1

**Access population needs
from multiple dimensions**

2

**Personalize interventions,
including support beyond
access to medication**

3

Integrate care teams

4

Measure outcomes beyond weight

