



Independent Model Estimates Up To \$11,142 in Gross Medical Cost Savings Per Member Over Five Years for Omada's GLP-1 Program

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New model demonstrates the clinical and economic value of medication persistence, companion program engagement, and projected disease risk reduction

SAN FRANCISCO, Sept. 09, 2026 (GLOBE NEWSWIRE) -- [Omada Health](#) (Nasdaq: OMDA), the virtual-first, between-visit healthcare provider, announced a new, independent cost savings model that examined the measurable clinical and economic value of Omada's GLP-1 program.¹

[GlobalData](#), a data analytics and consulting company, recently published a report estimating greater disease reduction and higher cumulative cost savings with Omada's GLP-1 solutions compared to standard care. Using their peer-reviewed Markov microsimulation model approach, the model projects disease-onset trajectories and associated total healthcare savings using data from nationally representative datasets as well as clinical data from nearly 25,000 Omada GLP-1 Care Track members.¹

Findings from the simulation model offer a new criteria set for guiding GLP-1 strategy decisions, based on short and long-term value metrics, rather than upfront cost avoidance alone.

- **Medication Persistence:** Members who stayed on their GLP-1 for at least 12 months were estimated to save around 30% more, on average, at year five than those who persisted for at least 6 months (\$11,142 vs. \$8,578).¹
- **Sustained Lifestyle Engagement:** More engaged members (9.5+ engagement actions per week) were estimated to save an additional \$1,891 at year five compared to less engaged members (\$9,739 vs. \$7,848).¹
- **Reduced Disease Risk:** New-onset type 2 diabetes was projected to fall 49% and new-onset hypertension to fall 28% at five years, with cumulative savings estimated to reach \$4,784 at three years and \$8,578 at five years for the 6-month persistence cohort versus standard care.¹
- **Closing Gaps in Chronic Care:** Omada's supportive care program addressing differences in access, health needs, and engagement can help more members benefit from care. Estimated five-year savings were \$10,969 for members 65+, \$9,971 for Black members, \$9,107 for Asian members, and \$8,864 for Hispanic members, compared to \$8,032 for White members.¹

The model projected cost savings and disease onset reduction over 5 years, taking into account actual persistence levels and clinical outcomes from members in Omada's GLP-1 solutions, including 12.4% average weight loss at twelve months.¹

"Obesity and its downstream conditions have cost employers more every year,² and we're reaching a point where employers and members are demanding a care model built for the long run," said Wei-Li Shao, President at Omada Health. "Omada is the program employers look to when they want someone accountable for long-term health outcomes, not just day-one access, and our GLP-1 program is one of the few in the market that can demonstrate the evidence to back that up."

Omada has spent 15 years as a virtual cardiometabolic provider, and its GLP-1 Care Track applies that experience to weight health. Published analyses of the program show improvements in body composition alongside overall weight loss.^{3,4} The wraparound care program combines a human care team, connected devices, and AI-enabled technology to deliver nutrition, exercise, medication education, and ongoing support to help members build better, sustainable habits. Omada's GLP-1 Care Track can be deployed through the nation's three leading pharmacy benefit manager solutions, [direct-to-employer programs](#), and cash-pay options like [GLP-1 Flex Care](#). Learn more about Omada Health's approach to GLP-1 medications and coverage [here](#).

About Omada Health

Omada Health, Inc. (Nasdaq: OMDA) is reverse engineering the way healthcare is delivered in America, putting the space between doctor visits—where health is won or lost—at the center of care. Today's healthcare system poorly serves chronic conditions that require ongoing support outside of the exam room, like obesity, prediabetes and diabetes, hypertension, cholesterol, and musculoskeletal conditions. Omada's virtual-first model combines human-led care teams, connected devices, and AI-enabled technology to deliver personalized care at scale, including support for GLP-1 therapy. Omada has served more than two million members since launch across 2,000+ employers, health plans, pharmacy benefit managers, and health systems. Learn more at [omadahealth.com](#).

Citations:

1. GlobalData Healthcare. *Value of Integrated Virtual Lifestyle Care Plus GLP-1 Therapy: Modeled Clinical and Economic Outcomes in a Commercially Insured Population.*

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<https://www.globaldata.com/health-economics/virtual-care/glp1-solutions-report.pdf>.

2. Telesford I, Schwartz H, Claxton G, Cox C. How have costs associated with obesity changed over time? Peterson-KFF Health System Tracker. Published July 8, 2024. Accessed August 17, 2026. <https://www.healthsystemtracker.org/chart-collection/how-have-costs-associated-with-obesity-changed-over-time/>
3. Stanton LA, Naqvi JB, Devaraj SM, McGuill A, Norwood TA, Linke S. Quality plus quantity: evaluation of a virtual GLP-1 programme with physical activity support to promote healthy body composition change during GLP-1 weight loss. Diabetes Obes Metab. 2026:1-12. doi:10.1111/dom.71152
4. Devaraj S, Chang H, Napoleone J, Linke S. Weight health at one year: Outcomes from Omada's Enhanced GLP-1 Care Track. Omada Health. Published January 8, 2026. Accessed August 26, 2026. <https://www.omadahealth.com/resource-center/weight-health-at-one-year-outcomes-from-omadas-enhanced-glp-1-care-track>

Media Contact

Rose Ramseth

press@omadahealth.com