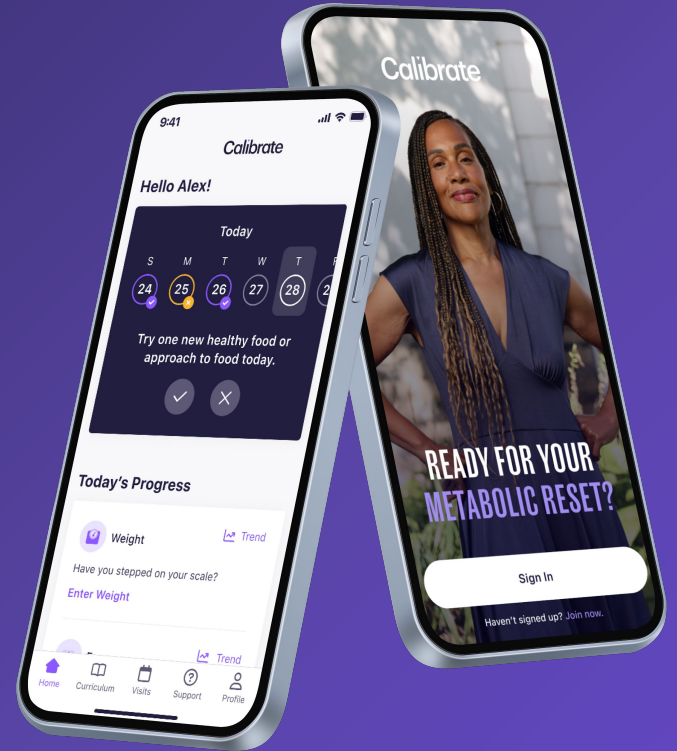


Calibrate

# Maximizing the Clinical and Economic Value of GLP-1 Therapy

2026 Results Report



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# Executive Summary

Employee health benefits managers are no longer debating whether to cover GLP-1s. Employees across industries are actively seeking access, making GLP-1 coverage a meaningful recruiting tool. But coverage alone isn't enough; employers are demanding proof that their investment is working.

In the real world, weight loss success stories are accompanied by equally common accounts of plateaus and regain. Today's market offerings only reinforce the problem, ranging from one-click teleprescribing to diabetes solutions pivoting to weight. These programs fundamentally fail to address a key weight loss conundrum: there is no one-size-fits-all path to success. Calibrate stands out as a purpose-built, integrated solution to adapt to each member as an individual, guiding them into healthier habits that last.

By combining a clinical care plan with live human coaching, a science-based curriculum, and ongoing monitoring, Calibrate members on GLP-1s outperform real-world averages, with weight loss observed across four years of available data. The results are strongest precisely where they matter most: Class II and III Obesity samples, the highest-risk, highest-cost members in any employer's plan.

Calibrate's impact extends well beyond weight loss. Within one year, a majority of members with diabetes and prediabetes improved both their HbA1c and other biomarkers of risk, directly reducing the chronic disease burden that drives healthcare costs.

The Calibrate program delivers consistent results across workforce types, industries and demographics. Calibrate generates additional weight loss for prior GLP-1 utilizers, a metabolically challenging population that has likely failed to reap long-term GLP-1 benefits. Calibrate's lifestyle change infrastructure with 1:1 coaching, active progress tracking, and accountability metrics creates a measurable dose-response effect that drives results over time.

Drawn from what is arguably the largest dataset in lifestyle-assisted clinical weight loss, this Report establishes Calibrate as the clinical and behavioral layer proven to ensure your GLP-1 investment delivers lasting value.



**Linda Anegawa, MD, FACP, Dipl. ABOM**

**Calibrate pairs structured GLP-1 oversight with member-centric lifestyle coaching to deliver weight loss that actually lasts.**

- **Calibrate-employed clinicians** provide structured, responsible GLP-1 oversight
- **Live, human coaches** uncover each member's "why" and build the skills that make change stick
- **A science-based curriculum** rewires biology across all four Calibrate pillars: Food, Exercise, Sleep, and Mindset
- **Ongoing monitoring and check-ins** keep members motivated and outcomes on track

# Beyond Medication: How Calibrate Turns GLP-1 Prescriptions Into Lasting Results

Regarding GLP-1 spend, benefits leaders are increasingly asking "How do we make sure we're actually getting value?" This is the right question: in the real world, GLP-1 medications alone typically deliver only single-digit weight loss at 12 months. These results fall below clinical trial benchmarks, driven by gaps in access, lower persistence, and limited support. Calibrate was built to close these gaps, leading our members to outperform real world GLP-1 weight loss averages at 12 months. Additionally, Calibrate members demonstrate continued weight loss observed for over 4 years.

1-Year  
**16%**  
n=37,031

2-Year  
**18%**  
n=11,132

3-Year  
**20%**  
n=2,461

4-Year  
**21%**  
n=620



\*n=37,031

†n=620

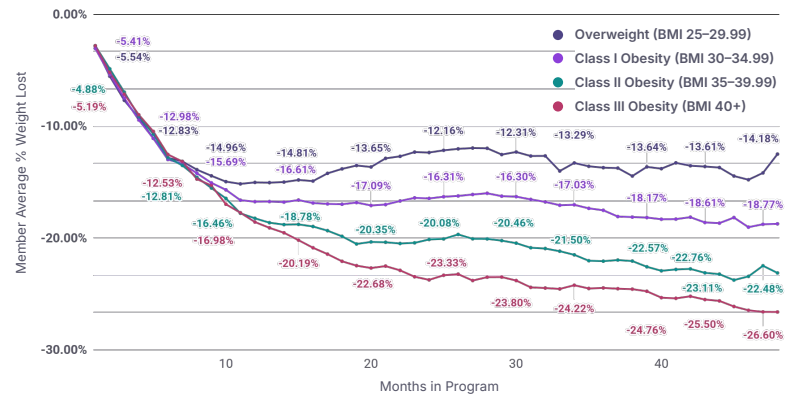
# Where It Matters Most: Outcomes Across The Highest Risk Populations

The employees who need the most help are often the hardest to shift, and the most expensive to ignore. Calibrate delivers its strongest results precisely where they matter most: Class II and III Obesity samples, who represent the highest-risk, highest-cost members in any employer's plan. These members achieve significant weight loss with Calibrate in year 1. Importantly, in years 2, 3 and 4, these highest-risk members continue to lose, in contrast to members with lower BMIs where plateaus are common. For employers, that's potentially a substantial reduction in total healthcare spend.

1-Year Weight Loss by Starting BMI Category\*



4-Year Weight Loss by Starting BMI Category†

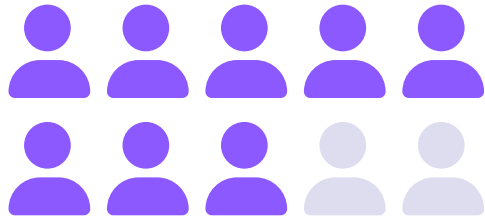


\*n=37,031

†n=620

# Beyond Numbers on the Scale: Metabolic Improvements at Year 1

Weight loss is only part of the story. Within just one year, 80% of Calibrate members with diabetes or prediabetes normalized their HbA1c levels along with other powerful indicators of metabolic risk. For employers, these numbers represent fewer members progressing toward Type 2 diabetes and its associated complications, lower cardiovascular risk, and a measurable reduction in the chronic disease costs that compound year over year.



▼ **80% HBA1C**

Among members who started the program with diabetes or prediabetes, **80% reached normoglycemic status**

n=3,906

▼ **73% Insulin**

Among members who entered the program with elevated insulin, **72% moved from abnormal to normal levels**

n=2,054

▼ **50% C-Reactive Protein**

Among members who entered the program with abnormal hsCRP, **50% moved from abnormal to normal levels**

n=4,693

▼ **79% ALT**

Among members who started the program with abnormal ALT levels, **79% reached normal levels**

n=1,604

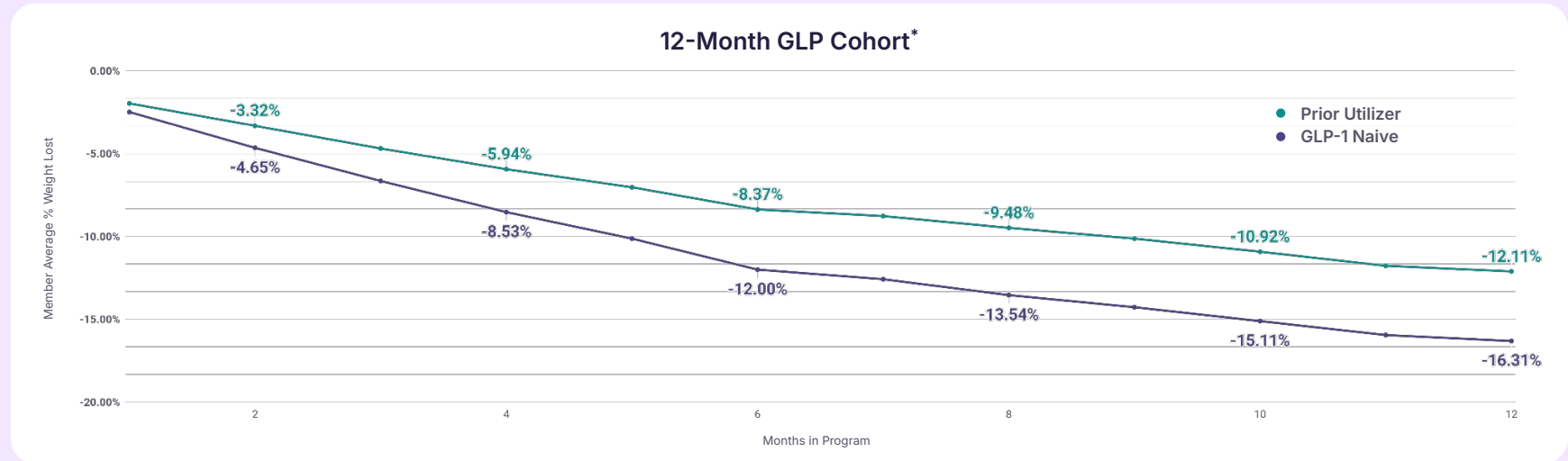
▼ **68% Triglycerides**

Among members who entered the program with elevated triglycerides, **68% moved from abnormal to normal levels**

n=2,750

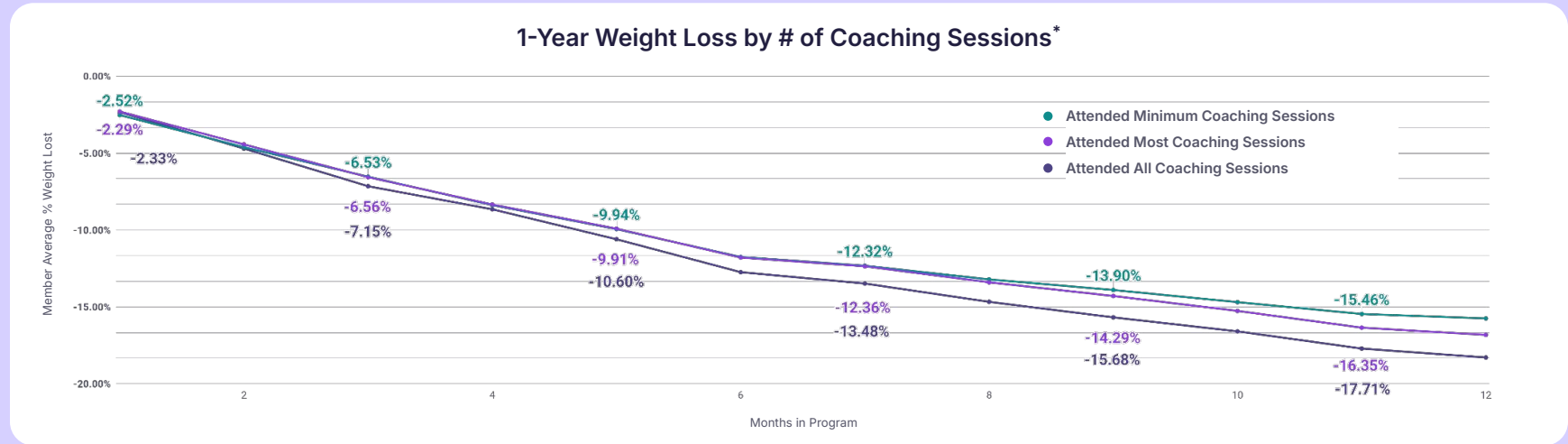
# The Rescue Mission: Calibrate Gets Prior GLP-1 Users Back on Track

For employers, prior GLP-1 utilizers often represent a frustrating and costly challenge: employees who have already been on high-cost medications but may have stopped or plateaued, never reaching clinically meaningful results. That spend effectively represents a sunk cost with negative ROI for employers. Calibrate changes that equation, ensuring that the employer's investment in these high-cost drugs actually delivers clinically significant weight loss. Members who join Calibrate with prior GLP-1 exposure still achieve significant weight loss (average = 12% at 12 months), proving that the right clinical and behavioral infrastructure adds value even for members who may have developed metabolic resistance from prior medication use.



# Built to Last: Coaching Drives a Dose-Responsive Impact on Outcomes

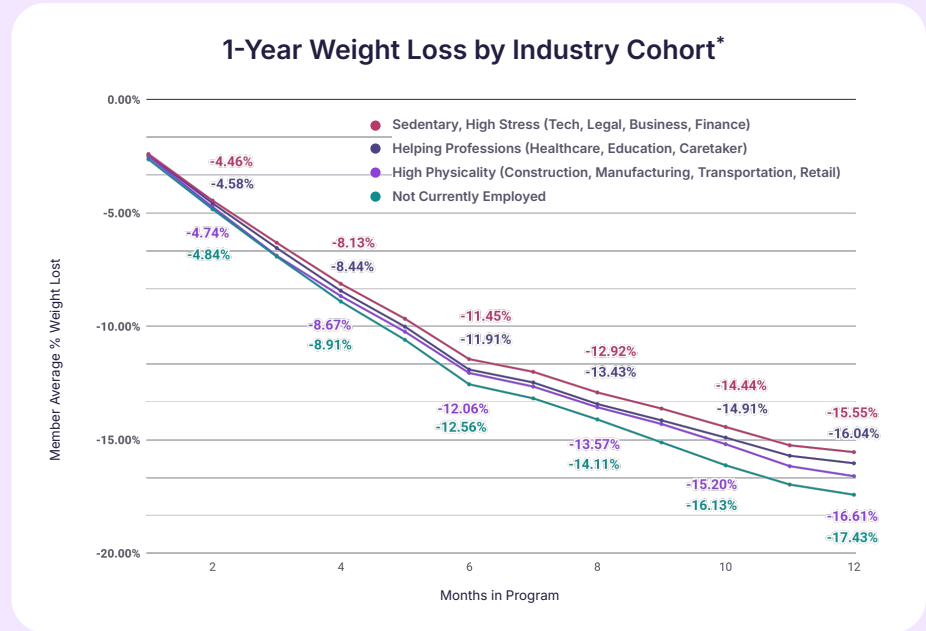
Long-term weight loss happens through consistent support, accountability, and behavior change. Calibrate's data show a clear dose-response relationship between coaching engagement and outcomes, where more coaching and engagement yields better results. Although coaching is required of all our members with a minimum number of sessions required at each stage in the program, there is flexibility in how much members can lean into coaching. The data shows that the more coaching sessions a member attends, the more weight they lose. Members who attended the most coaching sessions achieved 18.3% weight loss compared to 15.7% for those who attended the bare minimum. This reflects the core principle behind Calibrate's model: that medication sets the biological conditions for weight loss, but coaching is what sustains and amplifies it over time.



\*n=37,031

# Industry-Proof: Calibrate Delivers Across Workforce Types

Workforce type shouldn't determine a weight loss program's effectiveness. Calibrate data shows meaningful results across multiple industries. These include the Tech / Finance / Legal industry category where sedentary lifestyles and high stress are common. Also examined were the emotionally demanding Teaching / Healthcare / Caregiving industry group, and the Transportation / Manufacturing group, both characterized by high-physicality roles plus irregular schedules leaving limited time for self-care. Although daily demands, and therefore daily behaviors, vary by industry, Calibrate's integrated, personalized clinical+coaching model adapts to each member's unique history, motivations, and goals, translating their own "why" into habits that last.

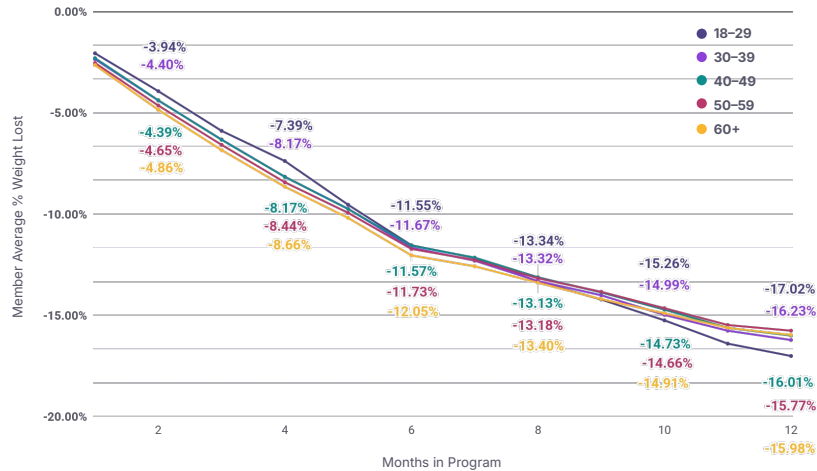


\*n=36,426

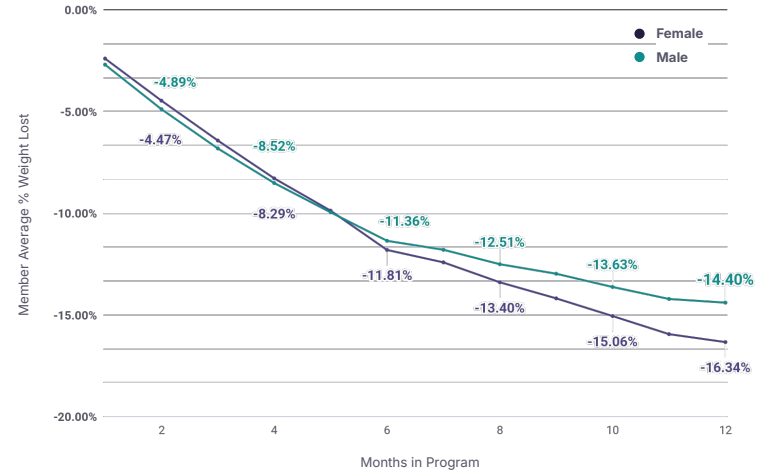
# Demographics-Proof: Calibrate Works Across Populations

Calibrate works irrespective of age or gender. Weight loss results remain consistent across age groups, from younger members in their twenties to those in their sixties and beyond, demonstrating the effectiveness of the integrated clinical and coaching model. Across genders, results tell a similar story, with female members achieving slightly stronger weight loss outcomes than their male counterparts (16.3% vs 14.4%). These results are significant since males typically lose more weight early on compared to females due to biological advantages in body composition, metabolic rate, and hormonal profiles. Despite these biological disadvantages for females, Calibrate is highly effective in the long-term.

1-Year Weight Loss by Age\*



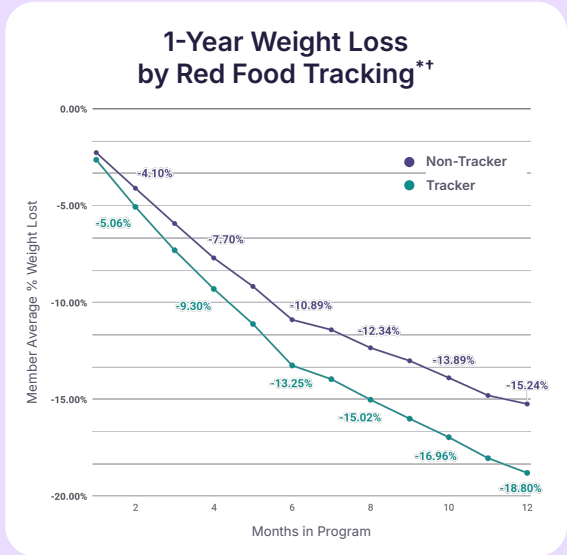
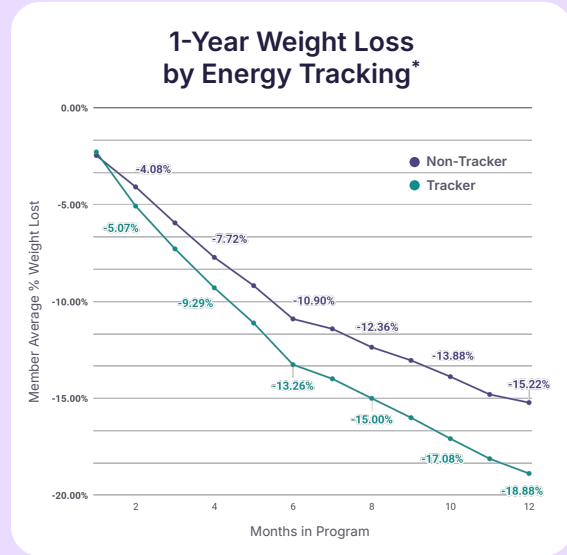
1-Year Weight Loss by Gender\*



\*n=37,031

# Designed for Engagement: Active Trackers Experience Greater Weight Loss

Calibrate is an engine of transformation that delivers quality clinical care and accountability. While members are required to track behaviors that contribute to weight health such as food intake, sleep patterns and energy levels, the program is designed with multiple levers to foster more active engagement. And it matters: those who consistently track see a 17–24% relative improvement in weight loss compared to those who don't. This demonstrates that active participation is itself a driver of clinical outcomes.



\*n=37,031

\*\*Red foods are highly processed foods that are made up of fast-digesting carbs

# Methods and Cohort Demographics

This report presents a retrospective analysis of outcomes data from Calibrate members who completed the program with a full dataset available for analysis. Data were collected through four integrated tracking methods: annual labs for metabolic health, a connected scale (Withings) for weight and body composition tracking, device integration for sleep tracking, and active member self-reporting for energy levels and food intake. Only members with complete datasets were included, ensuring the integrity of the outcomes presented.

The analysis spans four cohorts defined by program duration, representing one of the largest real-world longitudinal datasets in employer-sponsored obesity treatment to date:

	Duration	Members (n)
Cohort 1	1-Year	37,031
Cohort 2	2-Year	11,132
Cohort 3	3-Year	2,461
Cohort 4	4-Year	620

The 4-year cohort is particularly noteworthy; these are members who have sustained engagement with the Calibrate program for four consecutive years, providing rare insight into the long-term durability of outcomes beyond what is typically available in clinical or employer-sponsored settings.

## Cohort Demographics

The following table summarizes the baseline characteristics of the member population included in this analysis.

Characteristic	Value
Average Age	50 Years
Gender	80% Female 20% Male
Average Starting BMI	36.7
Average Starting Weight	229 lbs
Geographic Distribution	23% North 22% South 26% East 29% West

# Conclusion

The availability of GLP-1 medications has the potential to transform population health. However, without strong wraparound support in place, two distinct challenges emerge. First, individuals begin medication without fully understanding how to optimize their response, experience side effects without guidance, and struggle with persistence on medication over time. Second, without the lifestyle infrastructure to support lasting change, weight plateaus and regain are common, eroding the clinical and economic value of the program. This is particularly true for individuals who discontinue or lose access to medication.

The data presented in this report shows how, with strong support in place, comprehensive treatment delivers lasting results. Across more than 50,000 members and through four years of follow-up, Calibrate's integrated approach combining physician-led care with an evidence-based lifestyle intervention produces weight loss that lasts, not just at 12 months, but at 24, 36, and 48 months. These longitudinal results showcase the power of Calibrate's program at scale, clearly setting it apart in the dynamic, evolving obesity care landscape.

This report underscores a few critical insights for employers:



A high percentage of US employees suffer the myriad consequences of obesity and are candidates for GLP-1 agonist medications; therefore, it is critical to get treatment right.



The long-term value of GLP-1 therapy is shaped by the quality of support surrounding it.



Engagement via live, 1:1 human coaching delivers meaningfully better outcomes than medication alone.



Sustained weight loss enhances member health and well-being, delivering an immediate return on investment, while driving lower downstream costs.