

Outcomes across diverse populations

KEY RESULTS FROM 24 PEER-REVIEWED PUBLICATIONS

Check out the highlights to learn how **Omada is proven to work for a variety of populations.**

Validation Against CDC Standards

| PUBLICATION | POPULATION EXAMINED | KEY RESULTS |
|------------------------------------|--|---|
| The Diabetes Educator ¹ | Adults previously diagnosed with prediabetes | Based on participant outcomes that indicate that Omada meets CDC DPRP outcome standards for diabetes prevention programs, online delivery platforms like Omada offer an effective and scalable solution for addressing the obesity and diabetes epidemics. |

Performance Compared to In-Person Programs

| PUBLICATION | POPULATION EXAMINED | KEY RESULTS |
|---|---------------------|--|
| Journal of Medical Internet Research ² | Women veterans | Omada study participants lost an average of 5.24% of baseline weight, which is comparable to the results for in-person programs. And 82% of Omada study participants completed at least 9 of 16 core modules. |

Projection of Reduced Diabetes Incidence

PUBLICATION

Preventing Chronic Disease³

POPULATION EXAMINED

Two at-risk populations: prediabetes and CVD risk factors

KEY RESULTS

Participation in the program is expected to reduce diabetes incidence by 30% to 33% and stroke by 11% to 16% over five years. The program pays for itself within three years, and organizations can save as much as \$9,217 over a 10-year period.

Long Term Benefits

PUBLICATION

Journal of Medical Internet Research⁴

POPULATION EXAMINED

2-year results of Omada's study cohort

KEY RESULTS

Omada study participants experienced significant reductions in body weight and A1C that were maintained for 2 years from their start date in the program.

Success with Seniors Economic Impact

PUBLICATION

PLOS One⁵

POPULATION EXAMINED

Omada participants 65 and older

KEY RESULTS

For study participants with prediabetes and CVD risk factors, medical savings exceed intervention costs after 1-2 yrs. The average estimated 3-year savings is \$1,720-1,770 per participant.

Program Adaptability

PUBLICATION

Journal of Diabetes Research⁶

POPULATION EXAMINED

Underserved, low-literacy adults at risk for diabetes and CVD

KEY RESULTS

Per a series of qualitative interviews, a low literacy version of the Omada program proved acceptable to participants in an underserved community.

Medicare Success

PUBLICATION

Journal of Aging and Health⁷

POPULATION EXAMINED

Medicare Advantage beneficiaries

KEY RESULTS

Outcomes examined at 16 weeks, 6 months, and 12 months showed significant and sustained weight loss, improved blood glucose control and decreased cholesterol among participants with clinical data. Participants also reported improvements in diet, exercise, depression, and quality of life scores.

Efficacy in a Nationwide Workforce

PUBLICATION

Journal of Occupational and Environmental Medicine⁸

POPULATION EXAMINED

Employees across 41 states

KEY RESULTS

Geographically dispersed employees successfully participated in the program, achieving clinically meaningful weight loss and reducing their risk factors for diabetes and heart disease.

Validated 3-Year Outcomes

PUBLICATION

BMJ Open Diabetes Research & Care⁹

POPULATION EXAMINED

3-year results of Omada's study cohort

KEY RESULTS

Three years after completing the Omada health program, participants maintained meaningful reductions in body weight and A1c.

Medicaid Receptiveness

PUBLICATION

Contemporary Clinical Trials Communications¹⁰

POPULATION EXAMINED

Medicaid-insured, diverse population

KEY RESULTS

Successful recruitment of a large and diverse sample reveals that Medicaid-insured participants are willing and able to engage with digital DPPs.

Superior Engagement

PUBLICATION

American Journal of Preventive Medicine¹¹

POPULATION EXAMINED

Participants in Omada, an in-person DPP, and a standard weight-loss program

KEY RESULTS

Omada participants achieved similar weight loss outcomes and were significantly more engaged than an evidence-based, in-person version of the DPP program.

Medicaid Success

PUBLICATION

Preventing Chronic Disease¹²

POPULATION EXAMINED

Medicaid-insured, diverse population

KEY RESULTS

Medicaid-insured populations achieve meaningful engagement and weight loss in an adapted version of Omada's digital Diabetes Prevention Program.

Randomized Controlled Trial Protocol

PUBLICATION

Contemporary Clinical Trials¹³

POPULATION EXAMINED

Adults diagnosed with prediabetes

KEY RESULTS

Omada delivers the largest-ever randomized controlled trial of a digital DPP, investigating the company's industry-leading Prevention program.

Medicare Economic Outcomes

PUBLICATION

Population Health Management¹⁴

POPULATION EXAMINED

Medicare Advantage beneficiaries

KEY RESULTS

The direction of some findings suggest potential cost savings and reduced health care utilization among Medicare Advantage participants after a digital DPP.

Workforce Healthcare Savings

PUBLICATION

Journal of Health Economics and Outcomes Research¹⁵

POPULATION EXAMINED

Workforce population

KEY RESULTS

Within one year, the workforce population saw all-cause healthcare savings of \$1,169 per Omada DPP participant relative to a matched comparison group of non-Omada users.

Reduced Risk in a Workforce

PUBLICATION

Journal of Occupational and Environmental Medicine¹⁶

POPULATION EXAMINED

Workforce population

KEY RESULTS

Annual worksite assessments revealed improvements in chronic disease risk factors for Omada DPP participants. A similarly motivated control group saw no changes during this time.

Meaningful Outcomes for People Living with Diabetes

PUBLICATION

Journal of Medical Internet Research¹⁷

POPULATION EXAMINED

Adults with type 2 diabetes

KEY RESULTS

Omada for Diabetes Program participants achieved meaningful improvements in A1C, medication adherence, diabetes distress, total cholesterol, and weight at four month follow up.

Cost of Implementing Digital DPP

PUBLICATION

Translational Behavioral Medicine¹⁸

POPULATION EXAMINED

Adults diagnosed with prediabetes

KEY RESULTS

Omada shares the cost of recruitment and enrollment for DPP RCT and estimates for real-life implementation of a digital DPP.

Population Health Management Approach

PUBLICATION

Translational Behavioral Medicine¹⁹

POPULATION EXAMINED

Adults diagnosed with prediabetes

KEY RESULTS

Population health management approaches have the potential to engage large numbers of at-risk individuals in a short duration.

Patient-Provider Relationships Drive Meaningful Outcomes in MSK

| PUBLICATION | POPULATION EXAMINED | KEY RESULTS |
|--|--|--|
| Journal of Medical Internet Research ²⁰ | Omada for MSK members, diagnosed with an MSK condition | Timely access and patient-provider connections that encourage patient engagement are strongly connected to meaningful improvements in pain and function. |

Clinical Outcomes Compared to In-Person Care

| PUBLICATION | POPULATION EXAMINED | KEY RESULTS |
|---|---|---|
| American Journal of Preventive Medicine ²¹ | Adults diagnosed with prediabetes randomized to Omada for DPP and standard care | At 1 year, Omada participants achieved more weight loss and A1C reduction than the comparison group. Average weight loss achieved by Omada participants is associated with 50% reduction in the risk of developing type 2 diabetes. |

Blood Pressure Reduction in Hypertension Population

| PUBLICATION | POPULATION EXAMINED | KEY RESULTS |
|--|--------------------------|---|
| Journal of Medical Internet Research ²² | Adults with hypertension | Omada for HTN program proves effective for improving blood pressure among a sample of individuals with uncontrolled hypertension at 3 months. |

Success in Digital Physical Therapy

| PUBLICATION | POPULATION EXAMINED | KEY RESULTS |
|--|--|--|
| Archives of Rehabilitation Research and Clinical Translation ²³ | Omada for MSK members, diagnosed with an MSK condition | Omada for MSK participants significantly improved clinical outcomes after digital PT treatment, with meaningful reductions in pain (-2.69 points) and improvements in function (+2.67 points). |

Impact of a Digital Diabetes Program on Medical Costs and Diabetes Complications

PUBLICATION

The Science of Diabetes Self-Management and Care²⁴

POPULATION EXAMINED

Omada for Type 2 Diabetes Members

KEY RESULTS

Omada for T2DM outcomes can lead to an expected 9% to 16% reduction in the 5-year incidence of diabetes complications, and cumulative gross savings of \$1,160 after year one, \$4,150 after 3 years, \$7,790 after 5 years and \$18,020 after 10 years.

Study References

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