RPM Healthcare Releases White Paper on Medicare GLP-1 Bridge for Eligible Beneficiaries

New report urges GLP-1 monitoring protocols as older adults face risks tied to discontinuation, dehydration, nutrition, BP and muscle loss

NEWARK, NJ, UNITED STATES, July 3, 2026 /EINPresswire.com/ -- RPM Healthcare, a comprehensive remote patient monitoring solutions provider serving health systems, large physician groups and specialty clinics, today announced the release of its latest white paper, The Medicare GLP-1 Bridge: Why Monitoring Matters as Much as Access, examining what the new Medicare GLP-1 Bridge means for providers, patients and health system partners as eligible Medicare Part D beneficiaries gain access to certain GLP-1 medications for weight management beginning July 1.

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>
> *Sarah Roberts, DNP, VP of Clinical Innovation at RPMHealthcare*

The report comes at a pivotal moment for obesity care, chronic disease management and Medicare innovation. The Medicare GLP-1 Bridge will provide eligible Medicare Part D beneficiaries with a $50 monthly copay for select GLP-1 medications for weight management through December 31, 2027. The policy creates an immediate access opportunity for older adults who may have previously faced financial barriers to therapy, while raising a critical clinical question: once access expands, who is monitoring what happens next?

“Medicare’s GLP-1 Bridge is an important step forward for access, but access alone does not protect patients,” said Sarah Roberts, DNP, MSN, MBA, RN, NE-BC, VP of Clinical Innovation at RPM Healthcare. “For older adults, the first months of therapy can be the difference between sustainable progress and preventable setbacks. Patients need support with symptoms, hydration, blood pressure trends, nutrition and muscle preservation. A prescription may start the journey, but monitoring is what helps keep patients safe, engaged and moving toward better outcomes.”

The white paper highlights why older adults may need closer monitoring than younger populations on GLP-1 therapy. Many Medicare patients begin treatment while managing multiple chronic conditions, complex medication regimens and age-related risks, including frailty,

hypotension, dehydration and muscle loss. The report also points to real-world adherence concerns, noting that discontinuation is common among older adults and can lead to weight regain, care disruption and loss of clinical momentum.

RPM Healthcare's analysis argues that health systems and practices should prepare now for a higher volume of GLP-1 starts by building a clinical monitoring layer around medication access. That layer includes RN care coach outreach, symptom triage, connected weight and blood pressure monitoring, nutrition guidance, protein intake support and reporting back to referring physicians.

"Health systems are being asked to absorb a major shift in obesity care at the exact moment patients need more guidance, not less," Roberts added. "The organizations that succeed will be the ones that treat GLP-1 therapy as an ongoing care model rather than a one-time prescription. Monitoring gives clinicians the visibility to intervene earlier, support adherence and help patients preserve the function and independence that matter most."

RPM Healthcare's white paper also includes internal outcomes from a combined cohort of 622 weight management patients. Across the cohort, 76.5% of patients remained in active monitoring at 12 weeks, and those still engaged lost an average of 4.8 pounds. By 24 weeks, average weight loss among the 329 patients still monitoring reached 12.1 pounds. The cohort includes patients on GLP-1 therapy as well as patients managing weight through coaching alone.

The paper concludes that the next 18 months will be critical for providers, payers and health system partners. As CMS collects utilization data through the Bridge demonstration, organizations that can show sustained engagement, early symptom response, measurable weight trends and safer care coordination will be better positioned to shape the long-term future of GLP-1 care for Medicare populations.

The full white paper, The Medicare GLP-1 Bridge: Why Monitoring Matters as Much as Access, is available on RPM Healthcare's website: https://rpmhealthcare.com/glp-1-bridge/

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