

April 29, 2015

Dear Member of Congress:

We, the undersigned organizations representing patient, consumer, health advocacy, public health, provider, and business groups, express our strong support for the bipartisan Medicare Diabetes Prevention Act of 2015. This legislation (S. 1131/ H.R. 2102), sponsored by Senator Al Franken (D-MN), Senator Susan Collins (R-ME), Representative Susan Davis (D-CA) and Representative Peter King (R-NY), provides Medicare coverage for the National Diabetes Prevention Program (National DPP) to individuals at high risk of developing the disease. Providing coverage for this proven prevention program for America's seniors will greatly improve their lives as well as our country's fiscal health.

The prevalence of chronic conditions and risk factors for these conditions in the Medicare population is dangerously high and growing. Approximately four out of five seniors are affected by a chronic condition, such as cancer, diabetes, heart disease, hypertension and stroke.¹ Two-thirds of all Medicare beneficiaries have at least two or more chronic conditions.² Nearly 11 million seniors, or 26.9% of the Medicare population, have diabetes and half of all seniors over age 65 have prediabetes. Interventions targeted at preventing or delaying the onset of serious and debilitating illnesses like diabetes must be a national priority.

We know diabetes is a costly and devastating disease that places people at high risk for severe complications and other chronic diseases. For instance, people with diabetes have a higher-than-average risk of having a heart attack or stroke. As many as two out of three adults with diabetes have high blood pressure and people with diabetes are at increased risk for depression.³ However, with access to appropriate interventions and information, diabetes can very often be prevented, even in those at the highest risk, and providing Medicare coverage for the National DPP will help seniors avoid diabetes and other chronic illness.

The National DPP at the Centers for Disease Control and Prevention is a public-private partnership consisting of government agencies, private insurers, and community organizations like the YMCA of the USA, providing low-cost, evidence-based community programs to prevent diabetes. If the increasing number of people at high risk of developing diabetes was not reason enough to act, consider the rapid increase in the cost of diabetes. In 2012 the diabetes epidemic cost our nation \$322 billion, a 48 percent increase in just five years.⁴ We must take action to reduce these growing costs and spare seniors years of living with diabetes and other serious chronic diseases.

¹ Centers for Disease Control and Prevention. Chronic disease prevention and health promotion: healthy aging. 2011.

² Centers for Medicare and Medicaid Services. Chronic conditions among medicare beneficiaries. 2011

³ Centers for Disease Control and Prevention. National Diabetes Statistics Report: Estimates of Diabetes and Its Burden in the United States, 2014. Atlanta, GA: U.S. Department of Health and Human Services; 2014.

⁴ The Economic Burden of Elevated Blood Glucose Levels in 2012: Diagnosed and Undiagnosed Diabetes, Gestational Diabetes Mellitus, and Prediabetes. Diabetes Care December 2014.

Avalere Health estimates the Medicare Diabetes Prevention Act will save the federal government \$1.3 billion over 10 years.⁵ Providing coverage for this proven and cost-effective prevention program is the type of solution Congress must support as our nation seeks to control healthcare spending while improving the health of older Americans. Our organizations strongly support the Medicare Diabetes Prevention Act of 2015 and its potential to change the trajectory of chronic disease in our nation's seniors.

Sincerely,

Academy of Nutrition and Dietetics
Alliance for Aging Research
American Association of Clinical Endocrinologists
American Association of Diabetes Educators
American College of Preventive Medicine
American College of Sports Medicine
American Council on Exercise
American Diabetes Association
American Heart Association/American Stroke Association
American Medical Association
American Public Health Association
Boston Public Health Commission
California Center for Public Health Advocacy
Center for Medicare Advocacy
Diabetes Hands Foundation
Endocrine Society
Families USA
Healthcare Leadership Council
Medicare Rights Center
Midwest Business Group on Health
Missouri Association of Local Public Health Agencies
National Association of Chronic Disease Directors
National Association of County and City Health Officials
National Business Coalition on Health
National Coalition on Health Care
National Committee to Preserve Social Security and Medicare
National Council of Asian Pacific Islander Physicians
National Council on Aging
National Hispanic Council on Aging
National Kidney Foundation
National Patient Advocate Foundation
Novo Nordisk Inc.
Omada Health
Partnership to Fight Chronic Disease
Prevent Blindness
SC Alliance of YMCAs

⁵ Estimated Federal Impact of H.R. 962/S. 452 "The Medicare Diabetes Prevention Act". Avalere Health February 2014.

Third Way
Trust for America's Health
United Spinal Association
Viridian Health Management
Weight Watchers International
YMCA of the USA