

July 15, 2022

The Honorable Joseph R. Biden  
President of the United States  
The White House  
1600 Pennsylvania Avenue NW  
Washington, DC 20500  
*Submitted electronically via [WHHungerHealth@hhs.gov](mailto:WHHungerHealth@hhs.gov)*

Dear President Biden:

On behalf of the Endocrine Society, thank you for the opportunity to provide comments and recommendations for the White House Conference on Hunger, Nutrition, and Health. The Endocrine Society represents approximately 18,000 physicians and scientists engaged in all research and clinical aspects of hormone health.

Endocrinologists are on the front lines in treating diabetes and obesity -- two of the most common chronic illnesses in the United States and two health conditions inextricably linked to nutrition. The increased prevalence of diabetes and obesity is a public health crisis affecting millions of Americans in every state. The latest (2022) [estimates](#) from the Centers for Disease Control and Prevention (CDC) are that more than 130 million adults are living with diabetes or prediabetes. Roughly 1 out of every 10 Americans has diabetes while 1 out of every 3 adults has prediabetes. This has resulted in overwhelming increased costs for our healthcare system. Medical costs for people with diabetes are more than twice as high as for people without diabetes. The total cost of diabetes and prediabetes is estimated to be \$327 billion in the United States. Meanwhile, the CDC [estimates](#) that approximately 42.4% of adults and 19.3% of children are considered obese in the United States. One [study](#) found that obesity accounted for \$370 billion in direct costs for medical treatment.

We are pleased that you have prioritized the issues of nutrition and health and will conduct this conference to develop a national strategy to end hunger and increase healthy eating and physical activity, so that fewer Americans experience the related diseases that our members treat. Given our members' expertise on these issues, we would like to share the following recommendations as you develop this national strategy:

***[CDC's National Center for Chronic Disease Prevention and Health Promotion:](#)***

Most chronic diseases, including type 2 diabetes and obesity, can be prevented with supportive, evidence-based programs that facilitate eating well and being physically active. The CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) funds science-based



programs that prevent chronic diseases. The Endocrine Society strongly supports the work being done at the Chronic Care Center (NCCDPHP) to address chronic diseases and, specifically, to prevent the onset of diabetes and obesity. The National Diabetes Prevention Program (DPP) is one program at the Center which has shown tremendous success in delaying the onset of type 2 diabetes. The DPP is an evidence-based lifestyle intervention program which has demonstrated that a 5-7 percent weight loss could reduce the risk of developing diabetes by 58 percent. Also, the CDC's Division of Nutrition, Physical Activity, and Obesity (DNPAO) aims to improve the overall health and well-being of people by providing grant funds to states and local governments to address obesity in their local communities. The Society supports these programs because of the work they are doing to prevent and better understand diabetes and obesity.

We strongly believe that any efforts to address hunger, nutrition, and health must also include efforts to prevent chronic disease, address health disparities, and ultimately, improve underlying health and wellness for all. A significant investment in NCCDPHP is essential to that goal—one we cannot afford to set aside if we are to preserve Americans' health, well-being, productivity, and longevity. **We urge you to include increased funding for the NCCDPHP and these important programs as part of your national strategy to end hunger and improve nutrition and physical activity.**

#### *Special Diabetes Program:*

The Special Diabetes Program (SDP) is another critically important program addressing diabetes prevention and research. SDP is made up of two programs – the Special Diabetes Program for Type 1 Diabetes and the Special Diabetes Program for Indians (SDPI). SDP was created to advance research for type 1 diabetes and to provide treatment and education programs for type 2 diabetes amongst American Indians and Alaska Natives (AI/AN). AI/AN have the highest incidence of diabetes with more than 50% of adults who have been diagnosed. SDPI is a critically important program for rural, Tribal, and unserved communities. The program has more than 400 treatment and education programs on type 2 diabetes, which have been implemented in AI/AN communities, and has successfully reduced A1c levels, cardiovascular disease, and promoted healthy lifestyle behaviors. Current funding for SDP is scheduled to expire on September 30, 2023. The Endocrine Society will be asking Congress for a full reauthorization and 5-year expansion of SDP. This would result in stability for the important prevention and education programs in SDPI and ensure sufficient research authority for SDP. **We urge you to include the Special Diabetes Program as part of your national strategy, and we ask for your support of a full reauthorization and 5-year expansion before the program expires in 2023.**

#### *National Clinical Care Commission:*

We also would like to call your attention to the National Clinical Care Commission (NCCC) report to Congress entitled [Leveraging Federal Programs to Prevent and Control Diabetes and its](#)



**Complications.** The NCCC is a [congressionally mandated Commission](#) tasked with evaluating and making recommendations to improve federal programs related to diabetes care. The Commission included several Endocrine Society members including Dr. William H. Herman who served as the chair. The Commission's report contains detailed recommendations to address the ongoing diabetes epidemic. This report aligns with many of the Endocrine Society's policy priorities and the programs mentioned above. For example, the report recommends investing more funding into diabetes research and prevention programs including the Special Diabetes Program, the Diabetes Prevention Program at the CDC, and research funding at the National Institutes of Health (NIH). **We encourage you to incorporate these NCCC recommendations into your national strategy.**

#### ***Coverage of Obesity Treatment and Care:***

As you know, there is a strong correlation between obesity and the risk of developing prediabetes and type 2 diabetes. Unfortunately, access to obesity care is limited due to outdated Medicare rules that do not consider the latest scientific evidence on obesity treatment. Currently, Medicare Part D is unable to provide coverage for several new obesity medications. There is also limited access to intensive behavioral therapy (IBT). IBT is treatment for obesity that includes dietary and nutrition assessment to promote weight loss, which has been recommended by the United States Preventative Services Task Force (USPSTF). CMS has limited coverage of IBT to mostly primary care providers in the primary care setting. The Endocrine Society supports the Treat and Reduce Obesity Act (TROA) which would expand Medicare coverage of IBT by allowing additional qualified healthcare providers such as endocrinologists to offer IBT services. The bill would also allow for coverage of FDA-approved weight loss medications that can be offered in conjunction with IBT. **As part of your national strategy, we urge you to support Medicare coverage of the full range of obesity treatment options including intensive behavioral therapy (IBT) and anti-obesity medications.**

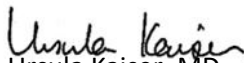
#### ***Obesity Playbook:***

We also want to share a resource with you published last year by the Society to highlight the obesity epidemic and ways policymakers can address this ongoing public health crisis of obesity. The Endocrine Society's "[Obesity Playbook](#)" is an educational resource for policymakers on obesity and health. The playbook includes information about obesity, including obesity prevalence data, journal articles on the state of the science of obesity, policy options, and a contact list of Endocrine Society members who are experts on this issue. **As you develop your national strategy to end hunger and improve nutrition, please use this resource as guide to inform you on this topic.** Also, please utilize the expertise of our members as you work to develop the national strategy. You can find the [Playbook here on our website](#). We will release an updated version of the Playbook in early 2023, which we will share with you.



Thank you again for the opportunity to share our ideas and recommendations for the White House Conference on Hunger, Nutrition, and Health. We look forward to continuing to work with you as you develop this national strategy to end hunger and increase healthy eating and physical activity. If you have any questions or require additional information, please have your staff contact Rob Goldsmith, Director of Advocacy and Policy, at [rgoldsmith@endocrine.org](mailto:rgoldsmith@endocrine.org).

Sincerely,

  
Ursula Kaiser, MD  
President  
Endocrine Society

Cc: The Honorable Xavier Becerra, Secretary of Health and Human Services (HHS)