

April 17, 2013

Dear Member of Congress:

We, the undersigned organizations representing patient, consumer, health advocacy, public health, and provider organizations, express our strong support for the bipartisan Medicare Diabetes Prevention Act of 2013 (S. 452 / H.R. 962). This legislation, sponsored by Senators Al Franken (D-MN), Susan Collins (R-ME), and Jay Rockefeller (D-WV) and Representative Susan Davis (D-CA), provides coverage for the National Diabetes Prevention Program (National DPP) under the Medicare program. 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. However, with access to appropriate interventions and information, diabetes can 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 diabetes cost \$245 billion, a 41 percent increase in just five years.³ We must take action to reduce these growing costs and spare seniors years of living with diabetes and other serious chronic diseases. The Urban Institute has estimated nationwide expansion of community-based diabetes prevention programs will save \$191 billion in health care costs over ten years. Moreover, because much of the burden of diabetes falls on seniors and low-income Americans, 75 percent of this estimated savings will be recouped by federal programs, like Medicare and Medicaid.⁴

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 Economic costs of diabetes in the U.S. in 2012. Diabetes Care March 2013.

⁴ Berenson RA, Holahan J, Blumberg LJ, Bovbjerg RR, Waidmann T, Cook A, Williams A. How we can pay for health care reform? Urban Institute, 2009. Available online from www.urban.org/health_policy/url.cfm?ID=4119432.

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 2013 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
Alliance for Retired Americans
American Academy of Physician Assistants
American Association of Clinical Endocrinologists
American Association of Diabetes Educators
American College of Preventive Medicine
American Diabetes Association
American Heart Association
American Medical Association
American Public Health Association
Association of State and Territorial Health Officials
Boston Public Health Commission
Center for Medicare Advocacy
Healthcare Leadership Council
Latinos for a Secure Retirement
Medicare Rights Center
Midwest Business Group on Health
National Asian Pacific Center on Aging
National Association of Chronic Disease Directors
National Association of County and City Health Officials
National Association of Social Workers
National Business Coalition on Health
National Coalition on Health Care
National Council of Asian Pacific Islander Physicians
National Council on Aging
National Hispanic Council on Aging
National Hispanic Medical Association
National Patient Advocate Foundation
North Dakota Academy of Nutrition and Dietetics
Partnership to Fight Chronic Disease
Prevent Blindness America
The Endocrine Society
Trust for America's Health
United Spinal Association
Weight Watchers International
YMCA of the USA