

Care and Medication Access

Diabetes is the most expensive chronic disease in the U.S. Currently, 1 out of every 4 of U.S. health care dollars is spent on caring for people living with diabetes. People with diabetes often face economic challenges associated with the cost of medications, technology, and treatments they need to remain healthy, and 2 in 3 households paid more for insulin in 2026 than in 2025. Without proper management, diabetes can lead to severe complications including heart disease, kidney failure, amputation, and even death, yet 41% of households skipped or rationed insulin in 2026. Access to health care coverage and affordable treatments allows individuals living with prediabetes or diabetes to more effectively manage their care and ultimately leads to lower health care spending and improved quality of life.

The American Diabetes Association® (ADA) urges Congress to ensure people have access to diabetes care and treatment.

Affordable Insulin

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- The high cost of insulin has led to 41% of households skipping or rationing doses; with 59% of uninsured households rationing insulin.¹
 - Spending on insulin has tripled in the past 10 years, increasing from \$8 billion in 2012 to \$22.3 billion in 2022.² One in six Americans with diabetes reports rationing their insulin to pay for other life essentials like rent, utilities, day care, and food.
 - Since 2019, important bipartisan, nationwide progress has been made toward insulin affordability.
 - Twenty-nine states and D.C. have passed cost-sharing limits for state-regulated health plans.
 - A successful Medicare pilot program resulted in Congress setting a cost-sharing limit for insulin at \$35 for Medicare beneficiaries.
 - The ADA supports the INSULIN Act (S. 4189/H.R. 10227), which extends a \$35 cost-sharing limit to commercial insurance plans.
 - We urge Congress to consider uninsured patients as part of this approach, as they would not benefit from a commercial cost-sharing limit for insulin.
 - With Medicaid eligibility and cost-sharing changes passed by Congress as part of H.R. 1, ensuring insulin access for people without insurance is even more important.

Insurance Access

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- Access to health care coverage is vital for people living with diabetes.
 - Research shows that health care coverage is essential for well-controlled blood glucose and cholesterol.
 - People with well-managed diabetes avoid unnecessary hospitalizations and emergency room visits more often than those without care.
 - The changes Congress made to the Medicaid program last year mean nearly 500,000 low-income people with diabetes could lose access to health care coverage by 2034.³
 - Expanded Medicaid work requirements will put individuals living with diabetes, particularly those with comorbidities and complications, at significant risk of losing coverage.
 - We ask Centers for Medicare and Medicaid Services to reconsider its proposed implementation guidance, to consider these comorbidities and complications that may prevent people with diabetes from being able to meet new work and community engagement requirements, and that state

1. The ADA's National 2026 Access and Affordability Survey. <https://diabetes.org/newsroom/press-releases/american-diabetes-associations-2026-national-access-and-affordability>

2. The ADA's Economic Costs of Diabetes in the US in 2022. <https://diabetes.org/newsroom/press-releases/new-american-diabetes-association-report-finds-annual-costs-diabetes-be>

3. Impact of Recent Medicaid and Affordable Care Act Policy Changes on Health Insurance Coverage and Cost-Sharing for Americans with Diabetes. <https://diabetes.org/sites/default/files/202607/Affordable%20Care%20White%20Paper%20FINAL.pdf>