

Over 40 million Americans live with diabetes and over 115 million have prediabetes, and the epidemic keeps growing. Every 21 seconds, someone in the U.S. is diagnosed with diabetes. With every diagnosis, another American can face terrible complications that include kidney failure, blindness, avoidable amputation, and even death.

The American Diabetes Association® (ADA) is the nation's leading voluntary health organization fighting to end the diabetes epidemic and help people living with diabetes thrive. For over 85 years, the ADA has driven discovery and research to treat, manage, and prevent diabetes while working relentlessly for a cure. We help people with diabetes and related health problems thrive by fighting for their rights and developing programs, advocacy, and education designed to improve their quality of life.

The ADA urges the 119th Congress to make addressing diabetes and obesity priorities.

Support Robust FY 2027 Funding for Federal Research and Prevention Programs

- **\$2.4 billion for the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK):** Investment in the NIDDK is needed to advance efforts to develop new and superior treatments, enhance disease detection and management, improve diabetes prevention, and ultimately discover a cure.
- **\$171 million for the Division of Diabetes Translation (DDT):** DDT's mission is to eliminate the preventable burden of diabetes by translating science into clinical practice. An investment in DDT allows the Centers for Disease Control and Prevention (CDC) to strengthen surveillance efforts and support national, state, and local evidence-based prevention programs.
- **\$39 million for the National Diabetes Prevention Program (National DPP):** The National DPP, an evidence-based intensive lifestyle change program, has been proven to reduce the onset of new diabetes cases in individuals with prediabetes by 58% (71% for those 60 and older).
- **\$57 million for the Division of Nutrition, Physical Activity, and Obesity (DNPAO):** DNPAO funds state and local programs to address obesity through research and education. It also supports nutrition and physical activity programs across the U.S.
- **Reauthorize the Special Diabetes Program (SDP)/Special Diabetes Program for Indians (SDPI) for five years at \$210 million per program each year.** These programs provide critical funding for research toward a cure for type 1 diabetes and funding for type 2 diabetes prevention in Native communities.

Protect Access to Care

- **Access to health care** coverage and affordable medications like insulin are vital for people with diabetes. Medicaid provides critical access to care and medications for disease management. Access to care and coverage are necessary to avoid costly hospitalizations and emergency care. Congress' changes to the Medicaid program last year will cause nearly 500,000 low-income people with diabetes to lose access to health care coverage. Expanded Medicaid work requirements put individuals living with diabetes at risk of losing coverage. We ask CMS to reconsider its proposed implementation guidance to consider these comorbidities and complications that may prevent people with diabetes from being able to meet work and community engagement requirements, and that state Medicaid officials create a broader definition of medical frailty.

Insulin Affordability

- **Support the INSULIN Act (S. 4189/H.R. 10227),** which limits cost-sharing for insulin, so people with commercial insurance do not have to pay more than \$35 per month for the medication they rely on to survive.

Expand Access to Diabetes Technology

- **The Centers for Medicare & Medicaid Services** is changing the way continuous glucose monitors (CGMs) and automated insulin pumps are accessed and paid for through the Medicare program. The ADA is **concerned that this approach would reduce choice and eliminate access** to the systems and diabetes technologies that work best for people's individual needs.

For more information, contact:

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