



CONGRESS AT HOME



What Do I Talk About?

Constituent meetings give Advocates a chance to educate members of Congress and ask for their support for people affected by diabetes by advocating for funding for diabetes research and programs and insulin affordability. Use these talking points and fact sheets to guide your discussions with your members of Congress.

Leave Behind Fact Sheets - Print and provide to your members of Congress:

- Costs of Diabetes
- NIDDK
- Insulin Affordability
- CDC
- SDP
- Your State

Start the meeting by explaining your personal connection to diabetes. If multiple advocates attend the meeting, each can briefly share their story. Make sure that a person without a connection to diabetes can easily understand (explain diabetes acronyms like hbA1C, CGM, etc. if you use them).

Explain that diabetes is serious, costly, and a threat to our nation's health care system and economy. Statistics to share:

- 30.3 million Americans have diabetes and 84.1 million more have prediabetes.
- About 1.25 million American kids and adults have type 1 diabetes.
- <See your State Fact Sheet for impact of diabetes in your state.>
- The total cost of diagnosed diabetes in the U.S. was \$327 billion in 2017.
- This foretells an unacceptable future that our country can avoid, if we act now!

Share how your legislator can act to support people affected by diabetes by making specific requests for their support. (See next pages for background. Use the talking points and make the "ask" for each topic.)

Special Diabetes Program

STATUS: *The Special Diabetes Program (SDP) is funded until September 30, 2019. SDP has the support of 378 Members of Congress and 65 Senators who signed a letter urging its renewal.*

- SDP type 1 research funding has led to breakthroughs in finding the genetic causes of type 1 diabetes, new devices to manage blood glucose, improved treatment to prevent complications, and made progress toward finding a cure. More research is needed to continue improving treatments and ultimately cure type 1.
- SDP for Indians funds diabetes research and type 2 diabetes prevention and treatment programs for American Indians and Alaska Natives, currently funded at \$150 million per program per year. At 15%, Native Americans have the highest rate of diabetes in the U.S. of any ethnic group, but their rate of diabetes has leveled. Until recently, Native Americans had the highest rate of kidney failure. Kidney failure from diabetes dropped by 54% in Native communities between 1996-2013 in large part due to SDP.

✓ **ASK:** Will you support a 5-year renewal of the Special Diabetes Program at \$200 million per program per year?



CONGRESS AT HOME



Federal Funding for Diabetes Research & Programs

We call on Congress to continue to invest in effective diabetes research and prevention programs at the National Institutes of Health (NIH) and Centers for Disease Control and Prevention (CDC):

- Provide \$2.165 billion in FY 2020 funding for the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) at NIH to support discoveries of better treatments and eventually a cure to end this epidemic.
- Provide \$185 million in FY 2020 funding for the Division of Diabetes Translation (DDT) at CDC to help individuals prevent and manage diabetes and its terrible complications, and to support CDC's surveillance and outcomes-based studies.
- Provide \$30 million in FY 2020 funding for the National Diabetes Prevention Program (National DPP) to expand evidence-based community prevention of type 2 diabetes.

✓ **ASK: Will you support the Association's federal funding priorities for NIDDK, DDT, and the National DPP?**

Insulin Affordability

- For millions of Americans with diabetes, including everyone with type 1 diabetes, access to insulin is a matter of life and death. There is no medication that can be substituted for insulin.
- The average price of insulin has skyrocketed in recent years—nearly tripling between 2002 and 2013.
- In May 2018, the American Diabetes Association's expert Insulin Access and Affordability Working Group released a white paper with conclusions and recommendations:
 - There is a lack of transparency throughout the insulin supply chain.
 - The current pricing and rebate system encourages high prices for insulin.
 - People with diabetes are hurt by high list prices and high out-of-pocket costs.
- The ADA has released a Public Policy Statement laying out what Congress could do to make insulin more affordable, including:
 - Increase price transparency through the supply chain.
 - Lower or remove patient cost-sharing.
 - Increase access to health care coverage for all people with diabetes.
- The American Diabetes Association is calling for immediate action and urging Congress to consider the ADA's recommendations, and to continue to hold hearings with all entities in the insulin supply chain to better understand the reasons for the dramatic increases in insulin prices.

✓ **ASK: Will you support ADA's efforts to address the rising costs of lifesaving insulin?**