In Type 1 diabetes, the pancreas does not produce insulin, a life-essential hormone used to regulate glucose levels in the blood. Insulin must be infused or injected daily or the amount of glucose in the blood will become too high. Too much insulin will make blood glucose drop too low. Type 1 diabetes is an autoimmune disorder and there is no cure.

Gestational diabetes occurs when the mother cannot produce enough insulin to meet the needs of both her and her unborn baby. After birth, many mothers no longer have diabetes, but they are at a higher risk for developing Type 2 diabetes.

In Type 2 diabetes, the pancreas may not produce enough insulin or the body may not use the insulin efficiently. Treatment options include diet and exercise, oral and injectable medications, and/or insulin. It is a metabolic disorder with risk factors contributing to diagnosis, including genetics and lifestyle. Even with lifestyle changes and/or appropriate medical treatment, there is no cure for Type 2 diabetes.

No matter what type, people with diabetes are at risk for short- and long-term complications, including heart disease, circulatory issues, kidney disease, vision loss, stroke, nerve damage, and sudden death from low or high blood glucose levels. Well-managed diabetes helps to prevent these complications.
Thanks to the 115th Congress

- In February of 2018, the Bipartisan Budget Act of 2018 included language that strengthened the rules surrounding the distribution of diabetes testing supplies to those on Medicare.
- With the support of Members of Congress, CMS reversed a decision in May of 2018 that beneficiaries who use a continuous glucose monitor (CGM) could not view blood glucose data with a smartphone. The reversal meant that seniors could begin using the full safety and monitoring features of the CGM.
- Under the 115th Congress, the National Clinical Care Commission Act was signed into law in October, 2017. This group of experts will evaluate and provide recommendations on the coordination and leveraging of federal programs to help decrease the incidence of diabetes and diabetes complications.

You can move the needle in the 116th Congress by:

- Increasing access to Diabetes Self Management Training, medications, diabetes care, and diagnostic equipment
- Ensuring preexisting condition coverage protection and providing stable avenues to quality, affordable healthcare insurance
- Providing relief through legislative mechanisms to increase affordability of prescription drugs
- Supporting community-focused efforts for diabetes prevention and diagnosis
- Decreasing barriers to diagnosis and treatment for diabetes and related comorbidities in rural/underserved areas and minority populations
- Preventing unnecessary impediments to timely, physician-prescribed treatments
- Directing CMS to prioritize and accelerate rulings on innovative diabetes technology

DID YOU KNOW?

- 30.3 Million Americans have diabetes – and that number is rising.
- 1.5 Million Americans are diagnosed with diabetes every year.

African Americans, Mexican Americans, American Indians, Native Hawaiians, Pacific Islanders and Asian Americans are at higher risk to develop Type 2 diabetes.

Minority populations with diabetes are also more likely to receive lower quality care and have diabetes related complications.

The growth in diabetes medical costs is primarily among the population aged 65 years and older, contributing to a growing economic cost to the Medicare program.

- $327 Billion total costs of diagnosed diabetes in the United States in 2017
- $237 Billion for direct medical costs

In October of 2018, two bills – Know the Lowest Price Act and the Patients’ Right to Know Drug Prices Act – were signed into law, banning pharmacist gag clauses. When these laws take effect, pharmacists will be able to tell their patients when the cash price is below the price paid with insurance.

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Diabetes remains the 7th leading cause of death in the United States

- 25.2% of Americans (12.0 million) aged 65 and older have diabetes (diagnosed and undiagnosed).

Most of the cost for diabetes care in the U.S., 67.3%, is provided by government insurance (including Medicare, Medicaid, and the military).

Health care costs for Americans with diabetes are 2.3x greater than those without diabetes

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These organizations support the efforts of the Congressional Diabetes Caucus to move the needle.

Please contact us for additional insight, information, and expertise on diabetes and its impact on the United States.