



## Please Support Governor Cuomo's Budget Proposal to Establish Medicaid Coverage for the Diabetes Prevention Program

(Aid to Localities Bills – A.2003/S.1503)

In our state of nearly 20 million people, New York has more than **2 million people living with diabetes and more than 5 million people living with prediabetes.** People with prediabetes have elevated glucose levels that have not yet met the threshold for the diagnosis of type 2 diabetes; however, 15-30% of people with prediabetes will go on to develop diabetes within 3-5 years.

Given the prevalence of type 2 diabetes is higher among lower income populations, rural residents, and people of color, the Medicaid population is greatly impacted by diabetes. New York State Comptroller Thomas DiNapoli's 2015 report on diabetes in New York referenced 460,000 Medicaid recipients with diabetes and noted the Department of Health had referenced diabetes as "reaching epidemic proportions in New York State."

The full cost of diabetes in our state has been estimated at \$21.6 billion annually - split between \$15.8 billion in medical costs and \$5.8 billion in indirect costs from lost productivity due to diabetes. The cost of diabetes is clearly not just financial - there is also a human cost. Disability and death take a terrible toll on families due to the complications of diabetes, including heart attack, stroke, blindness, kidney failure, and lower limb amputation.

Recently, a comprehensive review was prepared for New York's Department of Health regarding the National Diabetes Prevention Program (National DPP). The National DPP is a lifestyle modification program focusing on diet, exercise, and success strategies to reduce one's weight. The review found the National DPP had a high level of evidence for decreasing diabetes risk and was cost effective.

Regarding other payers, Medicare coverage for the National DPP took effect across the country in April 2018, following a Medicare pilot that found \$2,650 in savings per participant over a 15-month period. Medicaid coverage exists in Minnesota and Montana, and Medicaid programs are implementing or piloting coverage in California, Delaware, Maryland, New Jersey, Oregon, and Pennsylvania. New York's own 2012 Medicaid redesign report recommended coverage for prediabetes group counseling. And in recent years, the U.S. Centers for Disease Control and Prevention, the New York State Health Foundation, and the New York State Department of Health have worked to develop the program infrastructure for implementation of the National DPP in New York.

**The time to move forward on prevention is now.** Prevalence of diabetes continues to remain high in our state, yet there is an effective, evidence-based program to decrease the risk for type 2 diabetes that we have yet to broadly implement. With nearly a half million Medicaid enrollees already living with diabetes, New York must move forward to prevent or delay the development of type 2 diabetes and push back against the diabetes epidemic that is hurting so many New Yorkers.

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