

November 12, 2021 Admiral Rachel L. Levine, MD Assistant Secretary for Health U. S. Department of Health and Human Services 200 Independence Avenue, S.W. Washington, D.C. 20201

## Dear Assistant Secretary Levine:

The members of the Diabetes Advocacy Alliance (DAA) congratulate you on your appointments as Assistant Secretary for Health and as a four-star Admiral in the U.S. Public Health Service Commissioned Corps. We greatly appreciate your work to address America's health needs in the ongoing COVID-19 pandemic. As you know, this pandemic has taken a disproportionate toll on people with diabetes and obesity, especially people from many racial and ethnic minority groups, and we look forward to working with you and your team to advance diabetes prevention, detection, treatment, and care.

## The National Clinical Care Commission Final Report

We write to you today to offer our support for bringing attention to the recommendations of the National Clinical Care Commission (the Commission) and assisting in their adoption and implementation once the Commission's final report becomes available to the public. DAA members worked hard for many years to advance the legislation that authorized the Commission because we believed such an entity could establish national diabetes priorities and recommend how federal agencies with interests in diabetes could better coordinate their efforts, streamline policies, and reduce redundancies for the benefit of all people with prediabetes and diabetes. Over the past few years, the DAA and its members have provided input to the Commission's deliberations, and we have been very pleased with how open they have been to our input and how transparent the process has been throughout the many public meetings held by the Commission.

## Background on the DAA

The DAA is diverse in scope, with our 28 member organizations representing patient, professional and trade associations, other non-profit organizations, and corporations, all united to change the way diabetes is viewed and treated in America. The DAA works with the Administration, Congress, and other stakeholders to increase awareness of, and action on, the diabetes epidemic. DAA organizational members share a common goal of elevating diabetes on the national agenda so we may ultimately defeat this potentially deadly, but treatable chronic disease. We also believe that, since most adults with prediabetes and type 2 diabetes are people with overweight or obesity, access to the full continuum of care for obesity is another important tool to reduce new cases of type 2 diabetes and to help adults manage their weight over the longer term.

The DAA is committed to advancing person-centered policies, practical models, and legislation that can improve the health and well-being of people with diabetes, prediabetes, and obesity. An essential component to our work is improving health equity and addressing social determinants of health. Our advocacy to policymakers highlights key strategies to prevent, detect and manage diabetes and care for those affected by it. Through our educational outreach, we also highlight the health equity implications of existing or new policies, regulations, and legislation, and provide alternatives to address the drivers of these inequities.

As we anxiously await the release of the report, we respectfully request a meeting with you to discuss how the DAA might bring much needed attention to the Commission's final recommendations and help you translate the Commission's work to the audiences with which we regularly interact.

We thank you and your team for the excellent work you are doing to advance health and wellbeing in the U.S., and we look forward to hearing from you.

Sincerely,

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