



March 19, 2025

Hon. Robert Aderholt
Chair
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
U.S. House of Representatives
Washington, DC. 20515

Hon. Rosa DeLauro
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
U.S. House of Representatives
Washington, DC. 20515

Hon. Shelley Moore Capito
Chair
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC. 20510

Hon. Tammy Baldwin
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC. 20510

Dear Congressman Alderholt, Senator Capito, Congresswoman DeLauro, and Senator Baldwin,

As Co-Chairs of the Diabetes Advocacy Alliance (DAA), we are pleased that Secretary Kennedy is interested in addressing the prevention of chronic disease and wants the Department of Health and Human Services (HHS) to make such prevention a priority. Given that there is clear evidence that type 2 diabetes can be prevented or delayed in onset through an evidence-based behavioral health intervention, we urge your committees to prioritize support and funding for the [National Diabetes Prevention Program](#) (National DPP) and the Diabetes Prevention and Control Programs offered in all 50 states, which are funded and supported by the Division of Diabetes Translation (DDT) at the Centers for Disease Control and Prevention (CDC). These programs are integral to holistic, comprehensive care, as they combine prevention and early intervention strategies to reduce the burden of type 2 diabetes, empower individuals, and improve health outcomes across communities.

Through the National DPP, the CDC has a well-established and respected mechanism in place for entities in the private sector (for-profit and not for profit) and public arenas that apply to become recognized providers of quality, evidence-based diabetes prevention programs. These programs must be faithful to the protocols established in the HHS-funded landmark research study that demonstrated that adults with prediabetes, who lost relatively modest amounts of weight (5-7%) and increased their physical activity to 30 minutes, on average, on five days of the week, could reduce their risk of developing type 2 diabetes by 58%, compared with no intervention (placebo).¹

These recognized programs, currently numbering in the thousands, are designed for adults with prediabetes who are interested in taking charge of their health and are delivered through a variety of

convenient in-person, distance learning, and fully online methods. The need for these programs is great. The latest national data show that about 98 million adults ages 18 and older in America have blood glucose values that fall in the range for prediabetes,² meaning they are at increased risk of developing type 2 diabetes, one of the costliest chronic diseases with potentially devastating health consequences.

Additionally, funding for the CDC's DDT supports efforts in all 50 states and the District of Columbia through Diabetes Prevention and Control Programs to better identify adults with prediabetes, prevent type 2 diabetes, prevent diabetes complications, and improve the health of all people living with diabetes.

In conclusion, we appreciate the opportunity to share our overall support for diabetes prevention and control programs and urge you to maintain funding at the CDC for the National DPP and state-funded Diabetes Prevention and Control Programs. The National DPP is providing the structure that allows private, non-profit, and public entities to deliver evidence-based diabetes prevention programs that can help reduce the burden of type 2 diabetes in America, and it works with states to better scale diabetes prevention programs and reach more of the 98 million adult Americans living with prediabetes.²

If you have any questions, please contact Katie Adamson (katie.adamson@ymca.net) or Laura Friedman (lfriedman@diabetes.org).

Sincerely,



Katie Adamson
Co-Chair, Diabetes Advocacy Alliance
Vice President, Health Partnerships and Policy
YMCA of the USA



Laura Friedman
Co-Chair, Diabetes Advocacy Alliance
Vice President, Regulatory Affairs
American Diabetes Association

¹Diabetes Prevention Program Research Group. N Engl J Med 2002;346:393-403. DOI: 10.1056/NEJMoa012512. VOL. 346 NO. 6. <https://www.nejm.org/doi/full/10.1056/NEJMoa012512>

²Centers for Disease Control and Prevention. National Diabetes Statistics Report. May 15, 2024. Available at <https://www.cdc.gov/diabetes/php/data-research/index.html>.