

The Preventing Diabetes in Medicare Act (H.R. 3124/S. 1299)

Overview

Diabetes is a tremendously costly illness, both in terms of health outcomes and of our nation's escalating health care costs. In 2015, 30.1 million people or 1 in 10 people in the U.S. had diabetes; an additional 84.1 million people were estimated to have prediabetes.¹ The prevalence of diabetes is even more staggering among those eligible for Medicare. In 2015, over one-quarter of U.S. residents 65 and older (9.9 million) had diabetes and nearly half 65 and older (23.1 million) had prediabetes.¹

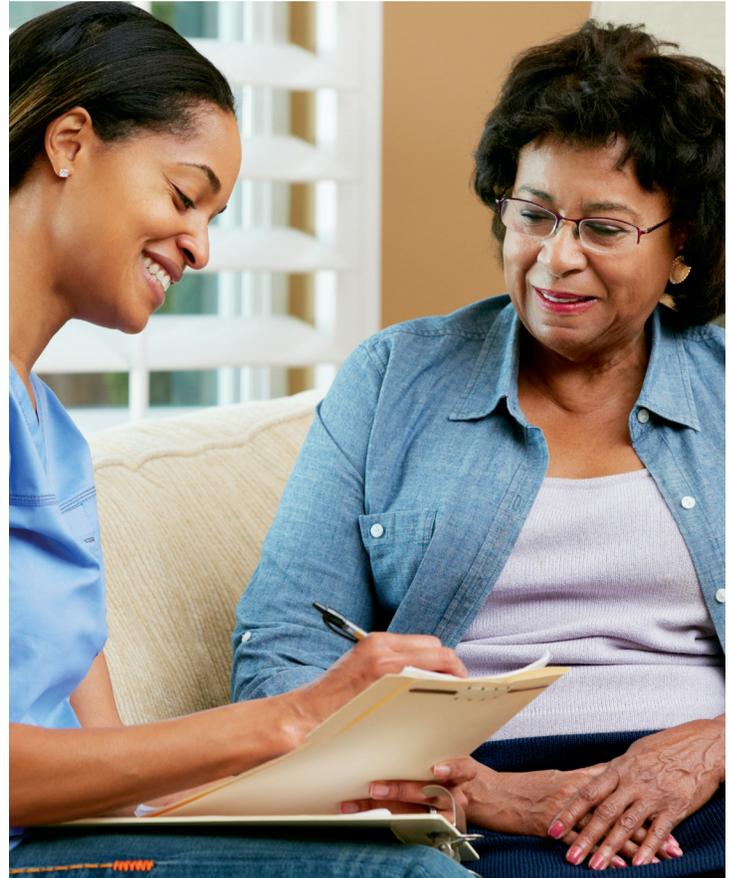
In other words, seven out of 10 people eligible for Medicare are affected by diabetes or prediabetes. For half of these individuals, however, diabetes could be prevented if they had access to a diet and exercise lifestyle intervention.

The Costs of Diabetes

One in four health care dollars is spent treating people with diabetes.² The total cost of prediabetes and diabetes to our health care system in 2017 was estimated to be \$327 billion, including \$237 billion in direct medical expenditures and \$90 billion in reduced national productivity.² Combined, this amounts to an economic burden exceeding \$1,000 for each American in 2017. The average yearly health care costs for a person with diabetes is \$16,750 with \$9,600 due to diabetes alone.²

Role of Medical Nutrition Therapy to Prevent Diabetes

Medical nutrition therapy is a nutritional diagnostic, therapy and counseling service for disease management. When provided by a Registered Dietitian Nutritionist, MNT includes: 1) lifestyle, knowledge and skills assessment, 2) negotiation of individualized nutrition goals, 3) nutrition intervention and 4) evaluation of clinical and behavioral outcomes. To ensure an individualized therapeutic plan, MNT is conducted through one-on-one sessions between an RDN and a client or patient. MNT provided by an RDN is similar to the one-on-one counseling provided during national trials that were found to prevent diabetes; people receiving MNT have shown successful weight loss and improved prediabetes insulin markers.



¹ Centers for Disease Control and Prevention. *National Diabetes Statistics Report: Estimates of Diabetes and its Burden in the US*, 2017. Atlanta, GA: U.S. Department of Health and Human Services; 2017.

² American Diabetes Association. Economic Costs of Diabetes in the U.S. in 2017. *Diabetes Care*. 2018;41(5):917-928.

MNT is a part of successful diet and exercise lifestyle modification. Research shows MNT provided by a registered dietitian nutritionist is an effective, evidence-based practice that can result in weight loss, obesity prevention and improved prediabetes insulin markers, which are the same essential outcomes of other diabetes prevention programs.³⁻⁵

Cost-Effectiveness of Diabetes Prevention

Diet and exercise lifestyle modification programs have consistently been shown to be cost-effective and even cost-saving methods for preventing and treating diabetes in participants, meaning that compared to other treatment options, such as medication, diet and exercise lifestyle modification programs gives the payer (Medicare) the best return on investment.^{6,7}

Bottom line: Research shows diet and exercise lifestyle interventions are cost-effective or even cost-saving treatments for people with prediabetes.

Benefits of the Preventing Diabetes in Medicare Act (H.R. 3124/S. 1299)

The Preventing Diabetes in Medicare Act will help to prevent cases of diabetes in the Medicare population by allowing medical nutrition therapy to be provided by a registered dietitian nutritionist *for individuals with prediabetes or with risk factors for diabetes*. Currently, Medicare covers screening for Type 2 diabetes and medical nutrition therapy for diabetes, but not for prediabetes.

H.R. 3124/S.1299 is a bipartisan bill that was introduced in the 115th Congress by Reps. Diana DeGette (Colo.) and Lynn Jenkins (Kan.) and Sens. Shelley Moore Capito (W.Va.) and Gary Peters (Mich.).

Key Takeaways

- Over one-quarter of the Medicare-eligible population (9.9 million over age 65) has diabetes.
- The total cost of diabetes to our health care system in 2017 was estimated to be \$327 billion.
- Research shows diabetes is preventable in people exposed to diet and exercise lifestyle modification programs, particularly among people over 60.
- Medical nutrition therapy provided by a registered dietitian nutritionist is an effective, evidence-based program that can result in weight loss, obesity prevention and improved prediabetes insulin markers.
- The Preventing Diabetes in Medicare Act (H.R. 3124/S. 1299) will allow Medicare to reimburse registered dietitian nutritionists to provide medical nutrition therapy to patients at risk of prediabetes, in addition to other covered categories.

Estimated Diabetes Costs in the United States, 2017

Total (Direct and Indirect)
\$327 billion

Direct Medical Costs
\$237 billion

After adjusting for population age and sex differences, average medical expenditures among people with diagnosed diabetes were 2.3 times higher than people without diabetes.

Indirect Costs
\$90 billion

Disability, work loss, premature death.

³ Raynor HA, Davidson PG, Burns H, Hall Hadelson MD, Mesznik S, Uhley V, Moloney L. Medical nutrition therapy and weight loss questions for the Evidence Analysis Library Prevention of Type 2 Diabetes project: Systematic reviews. *J Acad Nutr Diet*. 2017;117(10): 1578-1611.

⁴ Barry E, Roberts S, Oke J, Vijayaraghavan S, Normansell R, Greenhalgh T. Efficacy and effectiveness of screen and treat policies in prevention of type 2 diabetes: Systematic review and meta-analysis of screening tests and interventions. *BMJ*. 2017; 356:i6538.

⁵ Parker AR, Byham-Gray L, Denmark R, Winkle PJ. The effect of medical nutrition therapy by a registered dietitian nutritionist in patients with prediabetes participating in a randomized controlled clinical research trial. *J Acad Nutr Diet*. 2014 Nov;114(11):1739-48.

⁶ Anderson JM. Achievable cost saving and cost-effective thresholds for diabetes prevention lifestyle interventions in people aged 65 years and older: a single-payer perspective. *J Acad Nutr Diet*. 2012;112(11):1747-54.

⁷ Certification of Medicare Diabetes Prevention Prog.pdf. <https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/ActuarialStudies/Downloads/Diabetes-Prevention-Certification-2016-03-14.pdf>. Accessed June 7, 2018.