



Oral Comments in Support of MUC2024-028 Screening for Abnormal Glucose Metabolism in Patients at Risk of Developing Diabetes (Screening).

December 17, 2024

Good afternoon.

My name is Katie Adamson, and I am representing the Diabetes Advocacy Alliance, or the D-A-A. Professionally, I am Vice President, Health Partnerships & Policy for the YMCA of the USA, the National Resource Office to the Nation's 2600 YMCAs.

The DAA is diverse in scope, with our 21 members 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. Since 2010, the DAA has worked with legislators and policymakers to increase awareness of, and action on, the diabetes epidemic.

On behalf of DAA members, I would like to express our support for adopting the MUC2024-028 Screening for Abnormal Glucose Metabolism in Patients at Risk of Developing Diabetes (Screening).

One of the ongoing advocacy priorities of the DAA is increasing access to and use of evidence-based diabetes prevention programs, such as those offered by suppliers in the CMS Medicare Diabetes Prevention Program (MDPP).

To be eligible for the MDPP, Medicare beneficiaries must be able to show a recent blood glucose value from a diabetes screening that shows their blood glucose levels to be in the range for prediabetes. The proposed measure would increase the likelihood of Medicare beneficiaries being screened. It also would help to identify more individuals who have prediabetes but don't know it.

The need is great: The Centers for Disease Control and Prevention estimates that, of the approximately 97.6 million American adults having prediabetes, 27.2 million are adults ages 65 or older, which equals almost half (or 48.8%) of all older adults.¹ Of these 27.2 million older adults, only one in five (or 23%) are aware they have prediabetes.¹

Identification of prediabetes is crucial so that older adults with prediabetes can receive effective interventions, such as the Medicare Diabetes Prevention Program, to decrease the likelihood of progression to type 2 diabetes. What's more, screening older adults at risk of developing diabetes will also identify individuals with formerly undiagnosed type 2 diabetes, who can then be offered appropriate treatment and care.

Furthermore, this measure would address a recommendation from the National Clinical Care Commission (NCCC) to Congress and the Secretary of Health and Human Services (HHS), which called for adopting the Screening measure developed by the American Medical Association as part of a strategy to prevent diabetes among high-risk individuals.²

We believe the measure specifications are feasible to implement by most health care organizations, as most organizations routinely capture the data elements in their electronic health records. Additionally, this measure is both valid and reliable as demonstrated in the testing results.

In conclusion, thank you for providing this opportunity for me to express the DAA's support for adoption of MUC2024-028 "Screening for Abnormal Glucose Metabolism in Patients at Risk of Developing Diabetes (Screening)."

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References:

¹CDC. (2024, July 23). National Diabetes Statistics Report. Retrieved November 15, 2024, from Diabetes website: <https://www.cdc.gov/diabetes/php/data-research/>

²Report to Congress on Leveraging Federal Programs to Prevent and Control Diabetes and Its Complications. National Clinical Care Commission, 2021, <https://health.gov/about-odphp/committees-workgroups/national-clinical-care-commission/report-congress>.