



July 26, 2023

The Honorable Martin Heinrich  
Chairman  
Joint Economic Committee  
G-01 Dirksen Senate Office Building  
Washington, DC, 20510

The Honorable David Schweikert  
Vice Chairman  
Joint Economic Committee  
G-01 Dirksen Senate Office Building  
Washington, DC, 20510

Dear Chairman Heinrich and Vice Chairman Schweikert:

The National Hispanic Medical Association (“NHMA”) respectfully submits these comment in response to the Joint Economic Committee’s (“Committee”) bipartisan hearing titled “The Economic Impact of Diabetes.” This bipartisan hearing aims to explore the individual and shared economic impact of diabetes and diabetes-related health complications. Imperative topics of your discussion include the economic costs of the disease, the role of health and nutrition programs in diabetes prevention, and the role of pharmaceutical interventions, among others.

NHMA is a non-profit association representing 50,000 licensed Hispanic physicians in the United States. We are dedicated to empowering Hispanic physicians to be leaders who will help eliminate health disparities and improve the health of Hispanics in the United States. The problems that NHMA is addressing are the chronic diseases that affect our communities, outdated policies that restrict access to care, increasing the number of Hispanics in the health care workforce, and strengthening our health care system to ensure a full continuum of care for chronic diseases.

We commend the efforts of the committee to research and address the economic impacts including access to health care. We applaud the committee’s decision to address the economic impact of diabetes, one of the most insidious chronic diseases, with about \$237 billion on health care costs in the U.S. Diabetes is confronting more than 37.3 million Americans, about 1 in 10 of the U.S. population, and among those, 8.5 million people are undiagnosed, according to the Centers for Disease Control and Prevention (CDC). Diabetes is more common among American Indian or Alaska Native, Black, Hispanic, and Asian people than non-Hispanic White people. Approximately 11.8 percent of Hispanic adults are diagnosed with diabetes. Weight loss can help prevent and even reverse diabetes and most importantly leads to better health for those with or at risk for diabetes.

We urge the committee to review risk factors for diabetes-related complications, especially the chronic disease of obesity. Obesity is a complex and treatable chronic disease affecting nearly 42 percent of U.S. adults. Among U.S. adults aged 18 years or older with diagnosed diabetes, 89.8 percent were overweight or had obesity, defined as a body mass index (BMI) of 25 kg/m<sup>2</sup> or higher. Specifically: 27.7 percent were overweight (BMI of 25.0 to 29.9 kg/m<sup>2</sup>), 45.8 percent had obesity (BMI of 30.0 to 39.9 kg/m<sup>2</sup>), and 16.2 percent had extreme obesity (BMI of 40.0 kg/m<sup>2</sup> or higher). Alarming data considering Hispanics have higher rates of obesity than non-Hispanic whites.

The disease of obesity is associated with over 200 conditions and is a driver of health care costs and poor health outcomes for patients with diabetes, heart disease, Alzheimer's, cancer, and many other diseases. The CDC cites diseases associated with obesity as leading causes of preventable deaths in the U.S. Racial and ethnic minorities experience higher rates of chronic diseases, including obesity, which impacts 44.8 percent of Hispanics in the U.S.

On July 20, 2023, Senators Tom Carper (D-Del.) and Bill Cassidy (R-La.) and Representatives Raul Ruiz (D-Calif.) and Brad Wenstrup (R-Ohio) reintroduced the *Treat and Reduce Obesity Act* to combat the obesity crisis in the U.S. This bipartisan and bicameral legislation would work to directly prevent comorbidities through expanded coverage of chronic weight management medications for Medicare recipients. It will also work to mitigate the obesity epidemic by providing regular screenings and access to new health care specialists.

Of note, the U.S. Office of Personnel Management (OPM) outlined specific guidance for health insurance carriers that administer Federal Employee Health Benefit (FEHB) plans to include coverage of FDA approved anti-obesity medications, and the Veterans Health Administration also provides coverage of anti-obesity medications for veterans.

Access to quality health care remains an unresolved, increasingly complex issue affecting Hispanics, resulting from a variety of longstanding barriers and inequities. Significant disparities subject Hispanics and other underserved communities to a lower standard of care and preventable health complications.

Obesity and type 2 diabetes are serious chronic diseases that can substantially decrease life expectancy, diminish quality of life and increase healthcare costs. Obesity affects more than 100 million Americans, including adults, adolescents and children. The economic impacts associated with obesity is over \$170 billion in excess medical costs per year (in 2021 dollars), with the highest costs occurring for adults in the 60-70 years of age range. Given the data, we feel it is imperative that the committee fully consider the costs of obesity when performing economic studies on diabetes or any other comorbidities directly associated with obesity.

Thank you again for the opportunity to provide comments on this matter. I am happy to answer any questions and welcome the opportunity to discuss our expertise and perspective further with you and your staff. I can be reached at [nhma@nhmamd.org](mailto:nhma@nhmamd.org).

Sincerely,



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President & CEO  
National Hispanic Medical Association