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United States Senate

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November 3, 2005

COMMITTEES:

FINANCE

BANKING, HOUSING, AND URBAN AFFAIRS

AGRICULTURE, NUTRITION AND FORESTRY

RULES AND ADMINISTRATION

SPECIAL COMMITTEE ON AGING

Mr. Paul Tubiana
PO Box 21832
Lehigh Valley, Pennsylvania 18002-1832

Dear Mr. Tubiana:

Thank you for contacting me regarding diabetes. I appreciate hearing from you and having the benefit of your views.

Sadly, diabetes currently affects more than 18 million Americans and is extremely costly, in terms of both healthcare dollars and in human suffering. I firmly believe the federal government has a strong and active role to play in helping to combat the devastating effects of diabetes on its population. I am proud to be an original member of the bipartisan Senate Diabetes Caucus, formed to lend a congressional hand in the fight against this devastating disease. I have also served as an honorary co-chair for the Juvenile Diabetes Foundation International Children's Congress.

As your letter mentions, legislation related to diabetes education (S. 626) was introduced by Senator Ben Nelson of Nebraska on March 15, 2005. S. 626, the Diabetes Self Management Training Act of 2005, would seek to improve access to diabetes self-management training by providing for certified diabetes educators to be recognized as Medicare providers for purposes of diabetes outpatient self-management training services. Additionally, this legislation would direct the Comptroller General to study and report to Congress on the barriers that exist for individuals with diabetes in accessing diabetes self-management training. You may be interested to learn that identical legislation (H.R. 3612) was introduced in the House of Representatives by Representative Curt Weldon of Pennsylvania in July 2005.

S. 626 has been referred to the Senate Committee on Finance, of which I am a member. I look forward to working with my colleagues on the Committee to evaluate ways to strengthen and improve Medicare. As the Committee considers diabetes self-management training, I will be sure to keep your views in mind.

I am greatly concerned about the numerous debilitating diseases that affect millions of Americans each year and cost our country dearly in the way of human suffering. I believe biomedical research is our strongest tool in the prevention and treatment of diabetes. I recognize the vital role the NIH plays in supporting biomedical research and development at leading research institutions nationwide—a public/private research partnership that has allowed the United States to maintain its position as the world leader in medical technology while improving the quality of life for millions of patients. Specific to your concerns, the National Institute of

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Diabetes and Digestive and Kidney Diseases (NIDDK) is the Institute within the NIH charged with conducting and supporting nationwide research on diabetes, among other disorders.

Throughout my tenure in Congress, I have strongly supported increases in federal funding for the NIH. Most recently, during the Fiscal Year (FY) 2006 budget debates, I voted for an amendment introduced by Senator Arlen Specter, which would increase funding for the NIH by \$1.5 billion. This amendment passed with my support that same day by a vote of 63 to 37.

As you may be aware, the appropriations process follows the budget process, at which time the funding levels proposed in the budget are ironed out between the House and Senate. The NIH is funded through the annual Labor, Health and Human Services, and Education appropriations bill. You may be interested to learn that on June 21, 2005, Representative Ralph Regula of Ohio introduced H.R. 3010, the FY 2006 Departments of Labor, Health and Human Services, and Education Appropriations Act. **Specific to your concerns, this measure would provide \$28.5 billion for the NIH for FY 2006, including \$1.7 billion for the NIDDK for FY 2006.** On June 24, 2005, the House passed this measure by a vote of 250 to 151. You may be interested to learn that the Senate version of this legislation recommends \$29 billion for the NIH for FY 2006, **including \$1.8 billion for the NIDDK for FY 2006.** Rest assured, as the FY 2006 appropriations process continues, I will be sure to keep your views in mind.

Although Congress has increased research funding and expanded Medicare benefits for diabetes patients, I believe we can do more. To that end, I am particularly pleased that the Medicare Modernization Act of 2003 (P.L. 108-173), which I am proud to have played a role in helping to pass, includes comprehensive improvements to the Medicare program. I am particularly excited that the new Medicare statute includes new prevention-oriented care initiatives. **All new Medicare beneficiaries will be eligible for a "Welcome to Medicare Physical" within the first six months of enrollment in Medicare Part B.** This comprehensive examination will consist of a **screening for diabetes**, as well as cardiovascular disease, mammograms, pap tests, prostate screening, flu shots, and pneumonia shots. Physicians will be able to diagnose problems early, when treatment is more effective. Examinations will also allow physicians and office staff to provide education, counseling, and referral to other preventive services covered by Medicare. **The new preventive measures will play a critical role in helping beneficiaries with diseases like diabetes to identify and manage their conditions, whereby their overall health will be improved.**

I am pleased to learn of our mutual interest in improving the quality of life for individuals living with or at risk for diabetes. If I can be of further assistance with this or any other matter, please feel free to call on me again.

Sincerely,

A handwritten signature in black ink that reads "Rick Santorum". The signature is written in a cursive style with a large, prominent "R" at the beginning.

Rick Santorum
United States Senate

RJS: etc