Good morning Chairman Weisz and members of the House Human Services Committee. My name is Janna Pastir, and I am the Director of the Division of Health Promotion for the North Dakota Department of Health. I am here to provide testimony in support of Concurrent Resolution 4002, which urges Congress to address the rising costs and availability of medications and health care for individuals with diabetes and coverage of those costs.

There are two types of diabetes, Type I and Type II. Type I diabetes occurs when a person’s body cannot make enough insulin. It can develop at any age and there are no known ways to prevent it. Type II diabetes is when a body cannot use insulin properly. This type can also occur at any age, although nearly all cases can be prevented through lifestyle modification. Type II diabetes accounts for over 95 percent of all diabetes diagnosis. The prevalence of Type 2 diabetes is rising rapidly, with a shift towards increasingly younger populations.

Diabetes prevention and control efforts in North Dakota focus on guidance provided by the Centers for Disease Control and Prevention (CDC) National Diabetes Prevention Program and Diabetes Self-Management Education (Best Practices). Best Practices provides evidence-based interventions to prevent Type II diabetes and management of the disease upon diagnosis through lifestyle modification. The work of the Diabetes Prevention and Control Program is mainly focused on Type II diabetes due to the federal funding requirements of the grant awarded to the North Dakota Department of Health.

In response to North Dakota Century Code 23-01-40, established in 2013, the North Dakota Department of Health, in collaboration with the North Dakota Department of Human Services, Indian Affairs Commission and Public Employee Retirement System, develops a Diabetes in North Dakota report every two years. This report provides the following information: prevalence of diabetes, financial impact of diabetes as compared to other chronic diseases, status and benefits of current programs, funding sources for current programs, action plans, recommendations to improve diabetes related health outcomes in North Dakota, and collaborative efforts among agencies.

Diabetes is the seventh leading cause of death in the United States and in North Dakota, with American Indian mortality being five times that of their white counterparts. This concurrent resolution would positively impact the longevity and quality of life for all North Dakotans with Type I and Type II diabetes and the nearly 200,000 North Dakota adults living with pre-diabetes.

For these reasons, we ask you to support passage of Concurrent Resolution 4002. This concludes my testimony. I am happy to answer any questions you may have.