

**Congress of the United States**  
**House of Representatives**  
Washington, DC 20515

June 7, 2018

The Honorable Gene Dodaro  
Comptroller General of the United States  
U.S. Government Accountability Office  
441 G Street, NW  
Washington, DC 20548

Dear Mr. Dodaro:

Chronic diseases and conditions—such as heart disease, stroke, cancer, type 2 diabetes, obesity, and arthritis—are among the most common, costly, and preventable health problems. While many factors such as environmental conditions, lifestyle choices and genetics contribute to an individual’s health, a healthy diet plays a key role in preventing these diseases and in extending years of life.

The Centers for Disease Control and Prevention (CDC) have reported that as of 2012, the latest year for which data are available, about half of all adults in the United States—117 million people—had one or more chronic health conditions, and one in four adults had two or more chronic health conditions. During 2011–2014, more than one-third of adults or about 84 million people were obese. Moreover, in 2012, 86 percent of the nation’s \$2.7 trillion annual health care expenditures went to addressing chronic health conditions, including diet-related conditions, such as diabetes. Such conditions can also lead to negative effects on the economy and nation through increased absences from work and decreased productivity, rising business and personal healthcare costs, and impaired military readiness.

Numerous federal agencies play a role in supporting public health in a variety of ways. For example:

- The Department of Health and Human Services (HHS) administers the Medicare and Medicaid programs and the Children’s Health Insurance Program, and various HHS agencies, including CDC and the National Institutes of Health, also conduct research on public health. The Food and Drug Administration provides information to the public on nutrition and is responsible for ensuring that labels for most foods under its jurisdiction contain required nutrition information.

- The U.S. Department of Agriculture (USDA)'s Food and Nutrition Service administers various programs that provide nutrition assistance to low-income individuals, including the Supplemental Nutrition Assistance Program [SNAP]; the Special Supplemental Nutrition Program for Women, Infants, and Children; the Food Insecurity Nutrition Incentive, which incentivizes the purchase of fruits and vegetables by SNAP clients; the National School Lunch Program; the School Breakfast Program; and the Fresh Fruit and Vegetable Program.<sup>1</sup> In addition, USDA helps farmers manage the risk associated with agriculture and incentivizes the production of certain crops through its commodity support and federal crop insurance programs. USDA's Agricultural Research Service and its National Institute for Food and Agriculture also support research on food and nutrition. In collaboration with HHS, USDA produces the Dietary Guidelines for Americans on a 5-year basis.
- The Department of Defense's (DOD) Military Health System provides care to members of the military and their families. In addition, the Defense Logistics Agency, as well as several other DOD organizations, purchase billions of dollars' worth of food annually for service members and their families, and as such, can influence food markets as well as the health of members of the U.S. military and their dependents.

In light of the concerns outlined above, we request GAO's assistance in addressing the following questions:

- (1) What does current scientific research show about the links between diet and chronic health conditions?
- (2) What is known about the costs of health related disease in the United States, and what is the federal government's share of these costs?
- (3) What federal agency food and nutrition-related programs exist that may help reduce the costs and risks of diet-related chronic disease, what strategies, expertise and resources have been dedicated to those programs, and how has progress been measured?
- (4) To what extent, if at all, have selected federal agencies coordinated their efforts with each other and with other government entities (e.g., international, state, local, tribal) and the private sector to reduce the costs and risks of diet-related chronic disease; and how can any unmet opportunities for improved coordination be addressed?
- (5) What challenges do selected federal agencies face in reducing the costs and risks of diet-related chronic disease?

---

<sup>1</sup> For a detailed list of federal nutrition assistance programs within various federal agencies, see GAO, *Domestic Food Assistance: Complex System Benefits Millions, but Additional Efforts Could Address Potential Inefficiency and Overlap among Smaller Programs*, GAO-10-346 (Washington, D.C.: Apr. 15, 2010).

(6) What additional actions, if any, have stakeholders identified that selected federal agencies could take to reduce the costs and risks of diet-related chronic disease?

Thank you for your attention to this important issue. If you have any questions regarding our request, please contact Christian Lovell (Rep. DeLauro) at [christian.lovell@mail.house.gov](mailto:christian.lovell@mail.house.gov) or Anne Sokolov (Rep. Ryan) at [anne.sokolov@mail.house.gov](mailto:anne.sokolov@mail.house.gov).

Sincerely,



**Rosa L. DeLauro**

Ranking Member

Subcommittee on Labor, Health and

Human Services, Education and Related

Agencies

Committee on Appropriations

U.S. House of Representatives



**Tim Ryan**

Member of Congress