The Burden of Diabetes in Alabama

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Alabama.

Alabama's diabetes epidemic:

Approximately **610,458 people in Alabama**, or 15.2% of the adult population, **have diabetes**.

- Of these, an estimated **127,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,334,000 people in Alabama**, 37% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **31,000 people in Alabama are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $5.4 billion in Alabama each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Alabama was estimated at **$4 billion** in 2012.
- In addition, another **$1.4 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$19,742,725** in diabetes-related research projects in Alabama.

The **Division of Diabetes Translation** at the CDC spent **$521,771** on diabetes prevention and educational programs in Alabama in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Alaska

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Alaska.

Alaska's diabetes epidemic:

Approximately **59,186 people in Alaska**, or 10.9% of the adult population, **have diabetes**.

- Of these, an estimated **18,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **194,000 people in Alaska**, 36.7% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **3,000 people in Alaska are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $668 million in Alaska each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Alaska was estimated at **$509 million** in 2012.
- In addition, another **$159 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

The **Division of Diabetes Translation** at the CDC spent **$879,964** on diabetes prevention and educational programs in Alaska in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Arizona

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Arizona.

Arizona's diabetes epidemic:

Approximately **682,071 people in Arizona**, or 12.5% of the adult population, **have diabetes**.

- Of these, an estimated **172,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,796,000 people in Arizona**, 37.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **34,000 people in Arizona are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $6.4 billion in Arizona each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Arizona was estimated at **$4.9 billion** in 2012.
- In addition, another **$1.5 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$10,085,465** in diabetes-related research projects in Arizona.

The **Division of Diabetes Translation** at the CDC spent **$1,941,335** on diabetes prevention and educational programs in Arizona in 2016.

Sources include:

- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Arkansas

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Arkansas.

Arkansas's diabetes epidemic:

Approximately **363,781 people in Arkansas**, or 14.8% of the adult population, **have diabetes**.

- Of these, an estimated **75,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **797,000 people in Arkansas**, 36.4% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **25,000 people in Arkansas are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $3.1 billion in Arkansas each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Arkansas was estimated at **$2.3 billion** in 2012.
- In addition, another **$798 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$1,301,948** in diabetes-related research projects in Arkansas.

The **Division of Diabetes Translation** at the CDC spent **$902,396** on diabetes prevention and educational programs in Arkansas in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures:2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in California

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in California.

California's diabetes epidemic:

Approximately **4,056,373 people in California**, or 13.4% of the adult population, **have diabetes**.

- Of these, an estimated **1,021,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **10,721,000 people in California**, 38.4% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $37.1 billion in California each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in California was estimated at **$27.6 billion** in 2012.
- In addition, another **$9.5 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$190,480,104** in diabetes-related research projects in California.

The **Division of Diabetes Translation** at the CDC spent **$12,631,838** on diabetes prevention and educational programs in California in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Colorado

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Colorado.

Colorado's diabetes epidemic:

Approximately **416,301 people in Colorado**, or 9.8% of the adult population, **have diabetes**.

- Of these, an estimated **118,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,342,000 people in Colorado**, 34.8% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $3.6 billion in Colorado each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Colorado was estimated at **$2.8 billion** in 2012.
- In addition, another **$823 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$29,283,094** in diabetes-related research projects in Colorado.

The **Division of Diabetes Translation** at the CDC spent **$1,144,548** on diabetes prevention and educational programs in Colorado in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Connecticut

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Connecticut.

Connecticut's diabetes epidemic:

Approximately **354,240 people in Connecticut**, or 11.3% of the adult population, **have diabetes**.

- Of these, an estimated **93,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **997,000 people in Connecticut**, 36.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **11,000 people in Connecticut are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $4 billion in Connecticut each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Connecticut was estimated at **$3 billion** in 2012.
- In addition, another **$969 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$40,148,137** in diabetes-related research projects in Connecticut.

The **Division of Diabetes Translation** at the CDC spent **$701,088** on diabetes prevention and educational programs in Connecticut in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Delaware

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Delaware.

Delaware's diabetes epidemic:

Approximately **105,809 people in Delaware**, or 13.2% of the adult population, **have diabetes**.

- Of these, an estimated **25,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **261,000 people in Delaware**, 37.7% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **6,000 people in Delaware are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $1.1 billion in Delaware each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Delaware was estimated at **$818 million** in 2012.
- In addition, another **$293 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$773,556** in diabetes-related research projects in Delaware.

The **Division of Diabetes Translation** at the CDC spent **$842,278** on diabetes prevention and educational programs in Delaware in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in the

District of Columbia

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in the District of Columbia (DC).

DC's diabetes epidemic:

Approximately **62,809 people in DC**, or 12.3% of the adult population, **have diabetes**.

- Of these, an estimated **17,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **172,000 people in DC**, 34.2% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **2,798 people in the District of Columbia are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $619 million in DC each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in DC was estimated at **$457 million** in 2012.
- In addition, another **$162 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$48,452,356** in diabetes-related research projects in DC.

The **Division of Diabetes Translation** at the CDC spent **$3,689,215** on diabetes prevention and educational programs in DC in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Florida

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Florida.

Florida's diabetes epidemic:

Approximately **2,350,321 people in Florida**, or 13.1% of the adult population, **have diabetes**.

- Of these, an estimated **579,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **5,800,000 people in Florida**, 38.7% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **105,000 people in Florida are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $24.3 billion in Florida each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Florida was estimated at **$19.3 billion** in 2012.
- In addition, another **$5 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$82,735,168** in diabetes-related research projects in Florida.

The **Division of Diabetes Translation** at the CDC spent **$2,581,584** on diabetes prevention and educational programs in Florida in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Georgia

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Georgia.

Georgia's diabetes epidemic:

Approximately **1,121,495 people in Georgia**, or 14.2% of the adult population, **have diabetes**.

- Of these, an estimated **241,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **2,599,000 people in Georgia**, 36.1% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **53,000 people in Georgia are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $9.9 billion in Georgia each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Georgia was estimated at **$7.5 billion** in 2012.
- In addition, another **$2.4 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$24,322,996** in diabetes-related research projects in Georgia.

The **Division of Diabetes Translation** at the CDC spent **$12,882,150** on diabetes prevention and educational programs in Georgia in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Hawaii

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Hawaii.

Hawaii's diabetes epidemic:

Approximately **154,365 people in Hawaii**, or 13.1% of the adult population, **have diabetes**.

- Of these, an estimated **46,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **442,000 people in Hawaii**, 41.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **8,000 people in Hawaii are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $1.5 billion in Hawaii each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Hawaii was estimated at **$1.1 billion** in 2012.
- In addition, another **$419 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$1,359,879** in diabetes-related research projects in Hawaii.

The **Division of Diabetes Translation** at the CDC spent **$1,895,855** on diabetes prevention and educational programs in Hawaii in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Idaho

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Idaho.

Idaho's diabetes epidemic:

Approximately **127,799 people in Idaho**, or 10% of the adult population, **have diabetes**.

- Of these, an estimated **36,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **397,000 people in Idaho**, 34. 9% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $1.3 billion in Idaho each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Idaho was estimated at **$1 billion** in 2012.
- In addition, another **$304 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

The **Division of Diabetes Translation** at the CDC spent **$862,404** on diabetes prevention and educational programs in Idaho in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Illinois

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Illinois.

Illinois's diabetes epidemic:

Approximately **1,342,070 people in Illinois**, or 12.8% of the adult population, **have diabetes**.

- Of these, an estimated **341,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **3,591,000 people in Illinois**, 37.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **66,000 people in Illinois are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $12.2 billion in Illinois each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Illinois was estimated at **$9.4 billion** in 2012.
- In addition, another **$2.8 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$60,349,265** in diabetes-related research projects in Illinois.

The **Division of Diabetes Translation** at the CDC spent **$3,911,938** on diabetes prevention and educational programs in Illinois in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Indiana

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Indiana.

Indiana's diabetes epidemic:

Approximately **695,832 people in Indiana**, or 12.9% of the adult population, **have diabetes**.

- Of these, an estimated **160,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,719,000 people in Indiana**, 35.6% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **33,000 people in Indiana are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $6.6 billion in Indiana each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Indiana was estimated at **$5 billion** in 2012.
- In addition, another **$1.6 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$18,315,761** in diabetes-related research projects in Indiana.

The **Division of Diabetes Translation** at the CDC spent **$815,662** on diabetes prevention and educational programs in Indiana in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Iowa

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Iowa.

Iowa's diabetes epidemic:

Approximately **300,365 people in Iowa**, or 11.4% of the adult population, **have diabetes**.

- Of these, an estimated **75,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **810,000 people in Iowa**, 35.2% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **13,000 people in Iowa are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $2.6 billion in Iowa each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Iowa was estimated at **$2 billion** in 2012.
- In addition, another **$612 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$6,684,766** in diabetes-related research projects in Iowa.

The **Division of Diabetes Translation** at the CDC spent **$901,326** on diabetes prevention and educational programs in Iowa in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Kansas

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Kansas.

Kansas's diabetes epidemic:

Approximately **293,860 people in Kansas**, or 12.6% of the adult population, **have diabetes**.

- Of these, an estimated **69,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **749,000 people in Kansas**, 35.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **15,000 people in Kansas are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $2.6 billion in Kansas each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Kansas was estimated at **$2 billion** in 2012.
- In addition, another **$637 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$9,107,670** in diabetes-related research projects in Kansas.

The **Division of Diabetes Translation** at the CDC spent **$2,770,943** on diabetes prevention and educational programs in Kansas in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Kentucky

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Kentucky.

Kentucky's diabetes epidemic:

Approximately **531,646 people in Kentucky**, or 14.5% of the adult population, **have diabetes**.

- Of these, an estimated **108,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,168,000 people in Kentucky**, 35.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **27,000 people in Kentucky are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $4.8 billion in Kentucky each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Kentucky was estimated at **$3.5 billion** in 2012.
- In addition, another **$1.3 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$10,845,680** in diabetes-related research projects in Kentucky.

The **Division of Diabetes Translation** at the CDC spent **$794,763** on diabetes prevention and educational programs in Kentucky in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Louisiana

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Louisiana.

Louisiana's diabetes epidemic:

Approximately **521,294 people in Louisiana**, or 13.9% of the adult population, **have diabetes**.

- Of these, an estimated **124,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,272,000 people in Louisiana**, 37.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **32,000 people in Louisiana are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $5.4 billion in Louisiana each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Louisiana was estimated at **$4.1 billion** in 2012.
- In addition, another **$1.3 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$9,446,235** in diabetes-related research projects in Louisiana.

The **Division of Diabetes Translation** at the CDC spent **$483,802** on diabetes prevention and educational programs in Louisiana in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Maine

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Maine.

Maine's diabetes epidemic:

Approximately **137,413 people in Maine**, or 11.1% of the adult population, **have diabetes**.

- Of these, an estimated **36,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **386,000 people in Maine**, 37.2% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **9,000 people in Maine are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $1.6 billion in Maine each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Maine was estimated at **$1.2 billion** in 2012.
- In addition, another **$406 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$7,451,131** in diabetes-related research projects in Maine.

The **Division of Diabetes Translation** at the CDC spent **$1,178,807** on diabetes prevention and educational programs in Maine in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Maryland

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Maryland.

Maryland's diabetes epidemic:

Approximately **623,041 people in Maryland**, or 12.6% of the adult population, **have diabetes**.

- Of these, an estimated **156,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,634,000 people in Maryland**, 36.9% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $6.5 billion in Maryland each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Maryland was estimated at **$4.7 billion** in 2012.
- In addition, another **$1.8 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$42,813,148** in diabetes-related research projects in Maryland.

The **Division of Diabetes Translation** at the CDC spent **$2,528,900** on diabetes prevention and educational programs in Maryland in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Massachusetts

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Massachusetts.

Massachusetts's diabetes epidemic:

Approximately **680,771 people in Massachusetts**, or 11.9% of the adult population, **have diabetes**.

- Of these, an estimated **162,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,784,000 people in Massachusetts**, 35% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **28,000 people in Massachusetts are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $8.1 billion in Massachusetts each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Massachusetts was estimated at **$6.1 billion** in 2012.
- In addition, another **$2 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$186,282,652** in diabetes-related research projects in Massachusetts.

The **Division of Diabetes Translation** at the CDC spent **$3,045,632** on diabetes prevention and educational programs in Massachusetts in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Michigan

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Michigan.

Michigan's diabetes epidemic:

Approximately **1,055,253 people in Michigan**, or 12.4% of the adult population, **have diabetes**.

- Of these, an estimated **259,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **2,741,000 people in Michigan**, 37% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **50,000 people in Michigan are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $10.5 billion in Michigan each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Michigan was estimated at **$8 billion** in 2012.
- In addition, another **$2.5 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$71,438,583** in diabetes-related research projects in Michigan.

The **Division of Diabetes Translation** at the CDC spent **$3,521,367** on diabetes prevention and educational programs in Michigan in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Minnesota

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Minnesota.

Minnesota's diabetes epidemic:

Approximately **466,638 people in Minnesota**, or 10.5% of the adult population, **have diabetes**.

- Of these, an estimated **126,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,407,000 people in Minnesota**, 35.1% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **15,000 people in Minnesota are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $4.4 billion in Minnesota each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Minnesota was estimated at **$3.4 billion** in 2012.
- In addition, another **$1 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$50,374,668** in diabetes-related research projects in Minnesota.

The **Division of Diabetes Translation** at the CDC spent **$3,496,836** on diabetes prevention and educational programs in Minnesota in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Mississippi

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Mississippi.

Mississippi's diabetes epidemic:

Approximately **371,662 people in Mississippi**, or 15.4% of the adult population, **have diabetes**.

- Of these, an estimated **79,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **810,000 people in Mississippi**, 37.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $3.5 billion in Mississippi each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Mississippi was estimated at **$2.6 billion** in 2012.
- In addition, another **$902 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$1,089,631** in diabetes-related research projects in Mississippi.

The **Division of Diabetes Translation** at the CDC spent **$865,354** on diabetes prevention and educational programs in Mississippi in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Missouri

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Missouri.

Missouri's diabetes epidemic:

Approximately **699,992 people in Missouri**, or 13.2% of the adult population, **have diabetes**.

- Of these, an estimated **152,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,625,000 people in Missouri**, 35. 9% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **32,000 people in Missouri are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $5.9 billion in Missouri each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Missouri was estimated at **$4.5 billion** in 2012.
- In addition, another **$1.4 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$45,399,533** in diabetes-related research projects in Missouri.

The **Division of Diabetes Translation** at the CDC spent **$864,870** on diabetes prevention and educational programs in Missouri in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Montana

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Montana.

Montana's diabetes epidemic:

Approximately **96,294 people in Montana**, or 10.9% of the adult population, **have diabetes**.

- Of these, an estimated **26,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **279,000 people in Montana**, 36.4% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **5,000 people in Montana are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $828 million in Montana each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Montana was estimated at **$660 million** in 2012.
- In addition, another **$168 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$296,100** in diabetes-related research projects in Montana.

The **Division of Diabetes Translation** at the CDC spent **$1,219,322** on diabetes prevention and educational programs in Montana in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Nebraska

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Nebraska.

Nebraska's diabetes epidemic:

Approximately **174,627 people in Nebraska**, or 11.6% of the adult population, **have diabetes**.

- Of these, an estimated **45,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **487,000 people in Nebraska**, 35.8% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **8,000 people in Nebraska are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $1.5 billion in Nebraska each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Nebraska was estimated at **$1.2 billion** in 2012.
- In addition, another **$363 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$1,298,688** in diabetes-related research projects in Nebraska.

The **Division of Diabetes Translation** at the CDC spent **$2,726,124** on diabetes prevention and educational programs in Nebraska in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Nevada

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Nevada.

Nevada's diabetes epidemic:

Approximately **281,355 people in Nevada**, or 12.4% of the adult population, **have diabetes**.

- Of these, an estimated **75,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **787,000 people in Nevada**, 38.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **10,000 people in Nevada are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $2.4 billion in Nevada each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Nevada was estimated at **$1.9 billion** in 2012.
- In addition, another **$542 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$4,095,159** in diabetes-related research projects in Nevada.

The **Division of Diabetes Translation** at the CDC spent **$2,765,530** on diabetes prevention and educational programs in Nevada in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in
New Hampshire

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in New Hampshire.

New Hampshire's diabetes epidemic:

Approximately **130,862 people in New Hampshire**, or 11% of the adult population, **have diabetes**.

- Of these, an estimated **34,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **370,000 people in New Hampshire**, 36.2% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $1.4 billion in New Hampshire each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in New Hampshire was estimated at **$1 billion** in 2012.
- In addition, another **$360 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$1,970,618** in diabetes-related research projects in New Hampshire.

The **Division of Diabetes Translation** at the CDC spent **$646,285** on diabetes prevention and educational programs in New Hampshire in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in New Jersey

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in New Jersey.

New Jersey's diabetes epidemic:

Approximately **904,861 people in New Jersey**, or 12% of the adult population, **have diabetes**.

- Of these, an estimated **235,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **2,483,000 people in New Jersey**, 37.1% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **39,000 people in New Jersey are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $10.3 billion in New Jersey each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in New Jersey was estimated at **$7.5 billion** in 2012.
- In addition, another **$2.8 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$3,172,615** in diabetes-related research projects in New Jersey.

The **Division of Diabetes Translation** at the CDC spent **$1,401,014** on diabetes prevention and educational programs in New Jersey in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in New Mexico

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in New Mexico.

New Mexico's diabetes epidemic:

Approximately **241,120 people in New Mexico**, or 14.1% of the population, **have diabetes**.

- Of these, an estimated **59,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **603,000 people in New Mexico**, 39.7% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **12,000 people in New Mexico are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $2 billion in New Mexico each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in New Mexico was estimated at **$1.6 billion** in 2012.
- In addition, another **$424 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$1,122,128** in diabetes-related research projects in New Mexico.

The **Division of Diabetes Translation** at the CDC spent **$817,335** on diabetes prevention and educational programs in New Mexico in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in New York

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in New York.

New York's diabetes epidemic:

Approximately **2,071,909 people in New York**, or 12.5% of the adult population, **have diabetes**.

- Of these, an estimated **517,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **5,412,000 people in New York**, 36.2% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $21.6 billion in New York each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in New York was estimated at **$15.8 billion** in 2012.
- In addition, another **$5.8 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$99,559,248** in diabetes-related research projects in New York.

The **Division of Diabetes Translation** at the CDC spent **$5,144,471** on diabetes prevention and educational programs in New York in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in North Carolina

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in North Carolina.

North Carolina's diabetes epidemic:

Approximately **1,075,855 people in North Carolina**, or 13.1% of the adult population, **have diabetes**.

- Of these, an estimated **247,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **2,624,000 people in North Carolina**, 36.1% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **53,000 people in North Carolina are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $10.9 billion in North Carolina each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in North Carolina was estimated at **$8.4 billion** in 2012.
- In addition, another **$2.5 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$75,823,340** in diabetes-related research projects in North Carolina.

The **Division of Diabetes Translation** at the CDC spent **$3,846,094** on diabetes prevention and educational programs in North Carolina in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in North Dakota

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in North Dakota.

North Dakota's diabetes epidemic:

Approximately **68,097 people in North Dakota**, or 11.2% of the adult population, **have diabetes**.

- Of these, an estimated **18,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **188,000 people in North Dakota**, 35.4% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **3,000 people in North Dakota are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $596 million in North Dakota each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in North Dakota was estimated at **$455 million** in 2012.
- In addition, another **$141 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$429,646** in diabetes-related research projects in North Dakota.

The **Division of Diabetes Translation** at the CDC spent **$412,281** on diabetes prevention and educational programs in North Dakota in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Ohio

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Ohio.

Ohio's diabetes epidemic:

Approximately **1,334,918 people in Ohio**, or 13.5% of the adult population, **have diabetes**.

- Of these, an estimated **286,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **3,071,000 people in Ohio**, 35.3% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **70,000 people in Ohio are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $12 billion in Ohio each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Ohio was estimated at **$9.1 billion** in 2012.
- In addition, another **$2.9 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$57,701,462** in diabetes-related research projects in Ohio.

The **Division of Diabetes Translation** at the CDC spent **$3,641,467** on diabetes prevention and educational programs in Ohio in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Oklahoma

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Oklahoma.

Oklahoma's diabetes epidemic:

Approximately **451,888 people in Oklahoma**, or 14.3% of the adult population, **have diabetes**.

- Of these, an estimated **100,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,036,000 people in Oklahoma**, 36. 9% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **19,000 people in Oklahoma are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $3.7 billion in Oklahoma each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Oklahoma was estimated at **$2.9 billion** in 2012.
- In addition, another **$873 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$1,298,800** in diabetes-related research projects in Oklahoma.

The **Division of Diabetes Translation** at the CDC spent **$3,155,508** on diabetes prevention and educational programs in Oklahoma in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Oregon

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Oregon.

Oregon's diabetes epidemic:

Approximately **375,847 people in Oregon**, or 11.2% of the adult population, **have diabetes**.

- Of these, an estimated **98,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,071,000 people in Oregon**, 36.1% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **19,000 people in Oregon are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $4 billion in Oregon each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Oregon was estimated at **$3.1 billion** in 2012.
- In addition, another **$951 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$10,369,906** in diabetes-related research projects in Oregon.

The **Division of Diabetes Translation** at the CDC spent **$1,693,003** on diabetes prevention and educational programs in Oregon in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Pennsylvania

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Pennsylvania.

Pennsylvania's diabetes epidemic:

Approximately **1,455,813 people in Pennsylvania**, or 12.8% of the adult population, **have diabetes**.

- Of these, an estimated **325,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **3,505,000 people in Pennsylvania**, 35.8% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **71,000 people in Pennsylvania are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $13.4 billion in Pennsylvania each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Pennsylvania was estimated at **$10.2 billion** in 2012.
- In addition, another **$3.2 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$111,205,293** in diabetes-related research projects in Pennsylvania.

The **Division of Diabetes Translation** at the CDC spent **$2,409,984** on diabetes prevention and educational programs in Pennsylvania in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Rhode Island

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Rhode Island.

Rhode Island's diabetes epidemic:

Approximately **106,210 people in Rhode Island**, or 11.5% of the adult population, **have diabetes**.

- Of these, an estimated **27,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **294,000 people in Rhode Island**, 36.4% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $1.1 billion in Rhode Island each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Rhode Island was estimated at **$841 million** in 2012.
- In addition, another **$287 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$4,506,885** in diabetes-related research projects in Rhode Island.

The **Division of Diabetes Translation** at the CDC spent **$2,503,752** on diabetes prevention and educational programs in Rhode Island in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in South Carolina

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in South Carolina.

South Carolina's diabetes epidemic:

Approximately 576,211 **people in South Carolina**, or 14.1% of the adult population, **have diabetes**.

- Of these, an estimated **127,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,315,000 people in South Carolina**, 37.2% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **28,000 people in South Carolina are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $5.4 billion in South Carolina each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in South Carolina was estimated at **$4.1 billion** in 2012.
- In addition, another **$1.3 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$10,369,811** in diabetes-related research projects in South Carolina.

The **Division of Diabetes Translation** at the CDC spent **$3,173,941** on diabetes prevention and educational programs in South Carolina in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in South Dakota

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in South Dakota.

South Dakota's diabetes epidemic:

Approximately **80,282 people in South Dakota**, or 11.4% of the adult population, **have diabetes**.

- Of these, an estimated **21,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **218,000 people in South Dakota**, 35.5% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $751 million in South Dakota each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in South Dakota was estimated at **$588 million** in 2012.
- In addition, another **$163 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

The **Division of Diabetes Translation** at the CDC spent **$1,270,508** on diabetes prevention and educational programs in South Dakota in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Tennessee

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Tennessee.

Tennessee's diabetes epidemic:

Approximately **817,852 people in Tennessee**, or 14.9% of the adult population, **have diabetes**.

- Of these, an estimated **161,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,733,000 people in Tennessee**, 35.8% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **38,000 people in Tennessee are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $6.6 billion in Tennessee each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Tennessee was estimated at **$4.9 billion** in 2012.
- In addition, another **$1.7 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$43,157,313** in diabetes-related research projects in Tennessee.

The **Division of Diabetes Translation** at the CDC spent **$1,313,541** on diabetes prevention and educational programs in Tennessee in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Texas

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Texas.

Texas's diabetes epidemic:

Approximately **2,841,723 people in Texas**, or 14.2% of the adult population, **have diabetes**.

- Of these, an estimated **663,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **6,884,000 people in Texas**, 37.2% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **182,000 people in Texas are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $23.7 billion in Texas each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Texas was estimated at **$18.2 billion** in 2012.
- In addition, another **$5.5 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$73,512,456** in diabetes-related research projects in Texas.

The **Division of Diabetes Translation** at the CDC spent **$497,646** on diabetes prevention and educational programs in Texas in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Utah

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Utah.

Utah's diabetes epidemic:

Approximately **201,025 people in Utah**, or 10.4% of the adult population, **have diabetes**.

- Of these, an estimated **54,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **619,000 people in Utah**, 32.7% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $1.7 billion in Utah each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Utah was estimated at **$1.3 billion** in 2012.
- In addition, another **$384 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$7,210,085** in diabetes-related research projects in Utah.

The **Division of Diabetes Translation** at the CDC spent **$2,509,808** on diabetes prevention and educational programs in Utah in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Vermont

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Vermont.

Vermont's diabetes epidemic:

Approximately **55,780 people in Vermont**, or 10% of the adult population, **have diabetes**.

- Of these, an estimated **16,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **174,000 people in Vermont**, 35.7% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $543 million in Vermont each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Vermont was estimated at **$409 million** in 2012.
- In addition, another **$134 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$2,656,373** in diabetes-related research projects in Vermont.

The **Division of Diabetes Translation** at the CDC spent **$640,624** on diabetes prevention and educational programs in Vermont in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Virginia

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Virginia.

Virginia's diabetes epidemic:

Approximately **837,137 people in Virginia**, or 12.2% of the adult population, **have diabetes**.

- Of these, an estimated **207,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **2,213,000 people in Virginia**, 36% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **37,000 people in Virginia are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $8.2 billion in Virginia each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Virginia was estimated at **$6.2 billion** in 2012.
- In addition, another **$2 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$26,668,278** in diabetes-related research projects in Virginia.

The **Division of Diabetes Translation** at the CDC spent **$2,193,943** on diabetes prevention and educational programs in Virginia in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Washington

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Washington.

Washington's diabetes epidemic:

Approximately **658,603 people in Washington**, or 11.4% of the adult population, **have diabetes**.

- Of these, an estimated **173,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,874,000 people in Washington**, 36.1% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $7 billion in Washington each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Washington was estimated at **$5.4 billion** in 2012.
- In addition, another **$1.6 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$51,800,120** in diabetes-related research projects in Washington.

The **Division of Diabetes Translation** at the CDC spent **$2,425,627** on diabetes prevention and educational programs in Washington in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in West Virginia

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in West Virginia.

West Virginia's diabetes epidemic:

Approximately **255,695 people in West Virginia**, or 15.3% of the adult population, **have diabetes**.

- Of these, an estimated **48,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **518,000 people in West Virginia**, 35.9% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **13,000 people in West Virginia are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $2.5 billion in West Virginia each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in West Virginia was estimated at **$1.9 billion** in 2012.
- In addition, another **$627 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$607,688** in diabetes-related research projects in West Virginia.

The **Division of Diabetes Translation** at the CDC spent **$430,866** on diabetes prevention and educational programs in West Virginia in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Wisconsin

American Diabetes Association®

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Wisconsin.

Wisconsin's diabetes epidemic:

Approximately **541,523 people in Wisconsin**, or 11.2% of the adult population, **have diabetes**.

- Of these, an estimated **142,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **1,550,000 people in Wisconsin**, 36.1% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- **Every year** an estimated **21,000 people in Wisconsin are diagnosed with diabetes.**

Diabetes and prediabetes cost an estimated $5.9 billion in Wisconsin each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Wisconsin was estimated at **$4.6 billion** in 2012.
- In addition, another **$1.3 billion** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$20,901,590** in diabetes-related research projects in Wisconsin.

The **Division of Diabetes Translation** at the CDC spent **$1,381,233** on diabetes prevention and educational programs in Wisconsin in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles

The Burden of Diabetes in Wyoming

Diabetes is growing at an epidemic rate in the United States. According to the Centers for Disease Control and Prevention (CDC), nearly 30 million Americans have diabetes and face its devastating consequences. What's true nationwide is also true in Wyoming.

Wyoming's diabetes epidemic:

Approximately **51,916 people in Wyoming**, or 10.9% of the adult population, **have diabetes**.

- Of these, an estimated **14,000 have diabetes but don't know it**, greatly increasing their health risk.
- In addition, **153,000 people in Wyoming**, 35.7% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes and prediabetes cost an estimated $507 million in Wyoming each year.
The serious complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Diabetes is expensive:

People with diabetes have **medical expenses approximately 2.3 times higher** than those who do not have diabetes.

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Wyoming was estimated at **$388 million** in 2012.
- In addition, another **$119 million** was spent on **indirect costs** from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

The **Division of Diabetes Translation** at the CDC spent **$319,514** on diabetes prevention and educational programs in Wyoming in 2016.

Sources include:
- Diabetes Prevalence: 2014 state diagnosed diabetes prevalence, cdc.gov/diabetes/data; 2012 state undiagnosed diabetes prevalence, Dall et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", *Diabetes Care*, December 2014, vol. 37.
- Diabetes Incidence: 2014 state diabetes incidence rates, cdc.gov/diabetes/data
- Cost: Dall et al.
- Research expenditures: 2015 NIDDK funding, projectreporter.nih.gov; 2016 CDC diabetes funding, www.cdc.gov/fundingprofiles