Alabama



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 **579,084 people in Alabama**, or 14.5% of the 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, 37.0% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes costs an estimated \$5.5 billion in Alabama each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 29,000 people in Alabama are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$2,921,711 in diabetes-related research projects in Alabama.

The Division of Diabetes
Translation at the CDC spent
\$245,461 on diabetes prevention
and educational programs in
Alabama in 2014.

Since 2005, the American

Diabetes Association has
provided \$5,068,723 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Alabama.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **55,801 people in Alaska**, or 10.5% of the 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.

Diabetes costs an estimated \$700 million in Alaska each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 2,000 people in Alaska are diagnosed with diabetes.

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 **\$500 million** in 2012.
- In addition, another \$200 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 **\$260,074** on diabetes prevention and educational programs in Alaska in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **692,311 people in Arizona**, or 13.5% of the 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.

Diabetes costs an estimated \$6.3 billion in Arizona each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 46,000 people in Arizona are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$4,848,191 in diabetes-related research projects in Arizona.

The **Division of Diabetes Translation** at the CDC spent **\$700,283** on diabetes prevention and educational programs in Arizona in 2014.

Since 2005, the American

Diabetes Association has
provided \$7,596,294 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Arizona.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **327,523 people in Arkansas**, or 13.6% of the 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.

Diabetes costs an estimated \$3.1 billion in Arkansas each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 187,558 people in Arkansas are diagnosed with diabetes.

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 \$800 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$653,109 in diabetes-related research projects in Arkansas.

The **Division of Diabetes Translation** at the CDC spent **\$682,134** on diabetes prevention and educational programs in Arkansas in 2014.

Since 2005, the American

Diabetes Association has
provided \$1,013,979 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Arkansas.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **3,845,278 people in California**, or 13.1% of the 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 costs an estimated \$37.1 billion in California each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 209,000 people in California are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$63,864,451 in diabetes-related research projects in California.

The **Division of Diabetes Translation** at the CDC spent **\$2,673,401** on diabetes
prevention and educational
programs in California in 2014.

Since 2005, the American

Diabetes Association has
provided \$35,534,818 in targeted
diabetes research projects, career
development grants and clinical
scholarships in California.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **410,312 people in Colorado**, or 10.1% of the 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 costs an estimated \$3.6 billion in Colorado each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 331,468 people in Colorado are diagnosed with diabetes.

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 \$800 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$14,287,169 in diabetes-related research projects in Colorado.

The Division of Diabetes
Translation at the CDC spent
\$1,352,183 on diabetes
prevention and educational
programs in Colorado in 2014.

Since 2005, the American
Diabetes Association has
provided \$14,637,931 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Colorado.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **347,350 people in Connecticut**, or 11.5% of the 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.

Diabetes costs an estimated \$4 billion in Connecticut each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Every year an estimated 13,000 people in Connecticut are diagnosed with diabetes.

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 \$1 billion was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$12,177,196 in diabetes-related research projects in Connecticut.

The Division of Diabetes
Translation at the CDC spent
\$473,019 on diabetes prevention
and educational programs in
Connecticut in 2014.

Since 2005, the American

Diabetes Association has
provided \$12,438,689 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Connecticut.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **93,363 people in Delaware**, or 12.2% of the 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.
- Diabetes costs an estimated \$1.1 billion in Delaware each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 4,000 people in Delaware are diagnosed with diabetes.

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 **\$800 million** in 2012.
- In addition, another \$300 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 \$250,894 on diabetes prevention and educational programs in Delaware in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 District Of Columbia.

District Of Columbia's diabetes epidemic:

Approximately **60,242 people in District Of Columbia**, or 12.2% of the population, **have diabetes**.

 Of these, an estimated 17,000 have diabetes but don't know it, greatly increasing their health risk.

diagnosed with diabetes.

- In addition, 172,000 people in District Of Columbia, 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 2,000 people in District Of Columbia are

Diabetes costs an estimated \$600 million in District Of Columbia each year.

The horrific 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 District Of Columbia was estimated at **\$500 million** in 2012.
- In addition, another \$200 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$34,002,867 in diabetes-related research projects in District Of Columbia.

The Division of Diabetes
Translation at the CDC spent
\$1,176,153 on diabetes
prevention and educational
programs in District Of Columbia
in 2014.

Since 2005, the American
Diabetes Association has
provided \$485,342 in targeted
diabetes research projects, career
development grants and clinical
scholarships in District Of
Columbia.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
 - Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **2,313,984 people in Florida**, or 13.6% of the 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.

Diabetes costs an estimated \$24.3 billion in Florida each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 108,000 people in Florida are diagnosed with diabetes.

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 \$5.1 billion was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$36,142,778 in diabetes-related research projects in Florida.

The Division of Diabetes
Translation at the CDC spent
\$824,061 on diabetes prevention
and educational programs in
Florida in 2014.

Since 2005, the American

Diabetes Association has
provided \$11,335,189 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Florida.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **975,815 people in Georgia**, or 12.8% of the 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.

Diabetes costs an estimated \$9.9 billion in Georgia each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 62,000 people in Georgia are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$2,640,938 in diabetes-related research projects in Georgia.

The **Division of Diabetes Translation** at the CDC spent \$1,263,403 on diabetes prevention and educational programs in Georgia in 2014.

Since 2005, the American

Diabetes Association has
provided \$5,794,963 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Georgia.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

Hawaii





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 **129,697 people in Hawaii**, or 11.2% of the 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.
- Diabetes costs an estimated \$1.5 billion in Hawaii each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 5,000 people in Hawaii are diagnosed with diabetes.

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 \$400 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 **\$221,524** on diabetes prevention and educational programs in Hawaii in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **134,680 people in Idaho**, or 10.8% of the 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 costs an estimated \$1.3 billion in Idaho each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 97,938 people in Idaho are diagnosed with diabetes.

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 \$300 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 \$616,973 on diabetes prevention and educational programs in Idaho in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **1,262,093 people in Illinois**, or 12.3% of the 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.

Diabetes costs an estimated \$12.2 billion in Illinois each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 53,000 people in Illinois are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$19,857,557 in diabetes-related research projects in Illinois.

The Division of Diabetes
Translation at the CDC spent
\$1,622,757 on diabetes
prevention and educational
programs in Illinois in 2014.

Since 2005, the American

Diabetes Association has
provided \$7,077,341 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Illinois.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **699,940 people in Indiana**, or 13.3% of the 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.

Diabetes costs an estimated \$6.6 billion in Indiana each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 36,000 people in Indiana are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$8,820,689 in diabetes-related research projects in Indiana.

The **Division of Diabetes Translation** at the CDC spent **\$580,158** on diabetes prevention and educational programs in Indiana in 2014.

Since 2005, the American

Diabetes Association has
provided \$3,066,809 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Indiana.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

lowa



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 **301,597 people in Iowa**, or 11.7% of the 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 lowa, 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.
- Diabetes costs an estimated \$2.7 billion in lowa each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 17,000 people in lowa are diagnosed with diabetes.

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 \$600 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$2,146,854 in diabetes-related research projects in Iowa.

The Division of Diabetes
Translation at the CDC spent
\$561,623 on diabetes prevention
and educational programs in Iowa
in 2014.

Since 2005, the American

Diabetes Association has
provided \$2,893,669 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Iowa.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **272,309 people in Kansas**, or 11.9% of the 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.

Diabetes costs an estimated \$2.6 billion in Kansas each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 17,000 people in Kansas are diagnosed with diabetes.

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 \$600 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$1,029,636 in diabetes-related research projects in Kansas.

The **Division of Diabetes Translation** at the CDC spent **\$703,935** on diabetes prevention and educational programs in Kansas in 2014.

Since 2005, the American

Diabetes Association has
provided \$666,050 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Kansas.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **467,638 people in Kentucky**, or 13.0% of the 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.

Diabetes costs an estimated \$4.8 billion in Kentucky each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 30,000 people in Kentucky are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$1,569,553 in diabetes-related research projects in Kentucky.

The Division of Diabetes
Translation at the CDC spent
\$1,122,780 on diabetes
prevention and educational
programs in Kentucky in 2014.

Since 2005, the American

Diabetes Association has
provided \$8,561,888 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Kentucky.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **551,655 people in Louisiana**, or 15.0% of the 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.

Diabetes costs an estimated \$5.4 billion in Louisiana each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 33,000 people in Louisiana are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$4,896,703 in diabetes-related research projects in Louisiana.

The Division of Diabetes
Translation at the CDC spent
\$312,618 on diabetes prevention
and educational programs in
Louisiana in 2014.

Since 2005, the American

Diabetes Association has
provided \$6,092,887 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Louisiana.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **138,107 people in Maine**, or 11.5% of the 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.

Diabetes costs an estimated \$1.7 billion in Maine each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 8,000 people in Maine are diagnosed with diabetes.

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 \$400 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$3,252,771 in diabetes-related research projects in Maine.

The **Division of Diabetes Translation** at the CDC spent **\$531,681** on diabetes prevention and educational programs in Maine in 2014.

Since 2005, the American

Diabetes Association has
provided \$345,000 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Maine.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

Maryland





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 **618,156 people in Maryland**, or 12.8% of the 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 costs an estimated \$6.6 billion in Maryland each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 42,000 people in Maryland are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$10,387,387 in diabetes-related research projects in Maryland.

The Division of Diabetes
Translation at the CDC spent
\$566,444 on diabetes prevention
and educational programs in
Maryland in 2014.

Since 2005, the American

Diabetes Association has
provided \$7,948,368 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Maryland.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **596,798 people in Massachusetts**, or 10.8% of the 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, 35.0% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Diabetes costs an estimated \$8.1 billion in Massachusetts each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 25,000 people in Massachusetts are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$81,971,847 in diabetes-related research projects in Massachusetts.

The **Division of Diabetes Translation** at the CDC spent **\$1,180,575** on diabetes
prevention and educational
programs in Massachusetts in
2014.

Since 2005, the American

Diabetes Association has
provided \$46,508,824 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Massachusetts.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **1,052,143 people in Michigan**, or 12.8% of the 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, 37.0% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes costs an estimated \$10.5 billion in Michigan each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 70,000 people in Michigan are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$20,896,487 in diabetes-related research projects in Michigan.

The Division of Diabetes
Translation at the CDC spent
\$1,259,048 on diabetes
prevention and educational
programs in Michigan in 2014.

Since 2005, the American
Diabetes Association has
provided \$21,099,752 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Michigan.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **425,848 people in Minnesota**, or 9.8% of the 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.

Diabetes costs an estimated \$4.4 billion in Minnesota each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 16,000 people in Minnesota are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$11,369,586 in diabetes-related research projects in Minnesota.

The Division of Diabetes
Translation at the CDC spent
\$1,207,604 on diabetes
prevention and educational
programs in Minnesota in 2014.

Since 2005, the American

Diabetes Association has
provided \$8,602,259 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Minnesota.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

The Burden of Diabetes in Mississippi



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 **358,510 people in Mississippi**, or 15.2% of the 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 costs an estimated \$3.5 billion in Mississippi each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 185,750 people in Mississippi are diagnosed with diabetes.

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 \$900 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$188,149 in diabetes-related research projects in Mississippi.

The **Division of Diabetes Translation** at the CDC spent **\$560,656** on diabetes prevention and educational programs in Mississippi in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

Missouri



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 **644,124 people in Missouri**, or 12.8% of the 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.

Diabetes costs an estimated \$5.9 billion in Missouri each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 386,796 people in Missouri are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$8,672,794 in diabetes-related research projects in Missouri.

The Division of Diabetes
Translation at the CDC spent
\$691,757 on diabetes prevention
and educational programs in
Missouri in 2014.

Since 2005, the American

Diabetes Association has
provided \$11,003,997 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Missouri.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **82,314 people in Montana**, or 9.5% of the 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.

Diabetes costs an estimated \$900 million in Montana each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 4,000 people in Montana are diagnosed with diabetes.

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 **\$700 million** in 2012.
- In addition, another \$200 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 \$599,133 on diabetes prevention and educational programs in Montana in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **157,405 people in Nebraska**, or 10.6% of the 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.

Diabetes costs an estimated \$1.5 billion in Nebraska each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 8,000 people in Nebraska are diagnosed with diabetes.

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 \$400 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$288,567 in diabetes-related research projects in Nebraska.

The Division of Diabetes
Translation at the CDC spent
\$529,839 on diabetes prevention
and educational programs in
Nebraska in 2014.

Since 2005, the American

Diabetes Association has
provided \$1,260,129 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Nebraska.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **258,472 people in Nevada**, or 12.1% of the 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.

Diabetes costs an estimated \$2.5 billion in Nevada each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 16,000 people in Nevada are diagnosed with diabetes.

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 \$500 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$165,831 in diabetes-related research projects in Nevada.

The **Division of Diabetes Translation** at the CDC spent **\$234,796** on diabetes prevention and educational programs in Nevada in 2014.

Since 2005, the American

Diabetes Association has
provided \$708,000 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Nevada.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

New Hampshire



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 **129,040 people in New Hampshire**, or 11.0% of the 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 costs an estimated \$1.4 billion in New Hampshire each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 6,000 people in New Hampshire are diagnosed with diabetes.

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 \$400 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$200,705 in diabetes-related research projects in New Hampshire.

The **Division of Diabetes Translation** at the CDC spent **\$228,331** on diabetes prevention and educational programs in New Hampshire in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **868,620 people in New Jersey**, or 11.8% of the 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.
- Diabetes costs an estimated \$10.2 billion in New Jersey each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 54,000 people in New Jersey are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$1,050,070 in diabetes-related research projects in New Jersey.

The Division of Diabetes
Translation at the CDC spent
\$813,166 on diabetes prevention
and educational programs in New
Jersey in 2014.

Since 2005, the American

Diabetes Association has
provided \$1,934,000 in targeted
diabetes research projects, career
development grants and clinical
scholarships in New Jersey.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

New Mexico



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 **221,239 people in New Mexico**, or 13.1% 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.

Diabetes costs an estimated \$2 billion in New Mexico each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 11,000 people in New Mexico are diagnosed with diabetes.

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 \$400 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 **\$392,479** on diabetes prevention and educational programs in New Mexico in 2014.

Since 2005, the American Diabetes Association has provided \$1,093,938 in targeted diabetes research projects, career development grants and clinical scholarships in New Mexico.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **2,000,588 people in New York**, or 12.3% of the 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 costs an estimated \$21.6 billion in New York each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 66,000 people in New York are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$24,942,514 in diabetes-related research projects in New York.

The Division of Diabetes
Translation at the CDC spent
\$1,352,907 on diabetes
prevention and educational
programs in New York in 2014.

Since 2005, the American

Diabetes Association has
provided \$29,833,118 in targeted
diabetes research projects, career
development grants and clinical
scholarships in New York.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

North Carolina



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 **1,025,716 people in North Carolina**, or 13.0% of the 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.

Diabetes costs an estimated \$10.8 billion in North Carolina each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 58,000 people in North Carolina are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$20,531,683 in diabetes-related research projects in North Carolina.

The **Division of Diabetes Translation** at the CDC spent **\$1,279,196** on diabetes
prevention and educational
programs in North Carolina in
2014.

Since 2005, the American

Diabetes Association has
provided \$5,401,002 in targeted
diabetes research projects, career
development grants and clinical
scholarships in North Carolina.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

The Burden of Diabetes in North Dakota



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 **64,468 people in North Dakota**, or 11.0% of the 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.
- Diabetes costs an estimated \$600 million in North Dakota each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 3,000 people in North Dakota are diagnosed with diabetes.

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 **\$500 million** in 2012.
- In addition, another \$100 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$457,040 in diabetes-related research projects in North Dakota.

The **Division of Diabetes Translation** at the CDC spent **\$205,338** on diabetes prevention and educational programs in North Dakota in 2014.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **1,316,234 people in Ohio**, or 13.7% of the 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.

Diabetes costs an estimated \$12 billion in Ohio each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated **74,000 people in Ohio are diagnosed with** diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$14,089,837 in diabetes-related research projects in Ohio.

The Division of Diabetes
Translation at the CDC spent
\$1,266,710 on diabetes
prevention and educational
programs in Ohio in 2014.

Since 2005, the American

Diabetes Association has
provided \$8,934,415 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Ohio.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **430,033 people in Oklahoma**, or 14.0% of the 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.

Diabetes costs an estimated \$3.7 billion in Oklahoma each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 240,830 people in Oklahoma are diagnosed with diabetes.

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 \$900 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$688,145 in diabetes-related research projects in Oklahoma.

The Division of Diabetes
Translation at the CDC spent
\$624,656 on diabetes prevention
and educational programs in
Oklahoma in 2014.

Since 2005, the American

Diabetes Association has
provided \$5,639,300 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Oklahoma.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **398,554 people in Oregon**, or 12.3% of the 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.

Diabetes costs an estimated \$4 billion in Oregon each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 24,000 people in Oregon are diagnosed with diabetes.

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 \$1 billion was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$8,217,734 in diabetes-related research projects in Oregon.

The **Division of Diabetes Translation** at the CDC spent **\$862,456** on diabetes prevention
and educational programs in
Oregon in 2014.

Since 2005, the American

Diabetes Association has
provided \$3,187,206 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Oregon.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

Pennsylvania



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 **1,348,305 people in Pennsylvania**, or 12.1% of the 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.
- Diabetes costs an estimated \$13.4 billion in Pennsylvania each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 78,000 people in Pennsylvania are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$36,492,005 in diabetes-related research projects in Pennsylvania.

The Division of Diabetes
Translation at the CDC spent
\$766,657 on diabetes prevention
and educational programs in
Pennsylvania in 2014.

Since 2005, the American

Diabetes Association has
provided \$27,732,618 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Pennsylvania.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

The Burden of Diabetes in Rhode Island



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 **108,053 people in Rhode Island**, or 12.1% of the 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 costs an estimated \$1.1 billion in Rhode Island each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 69,311 people in Rhode Island are diagnosed with diabetes.

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 \$800 million in 2012.
- In addition, another \$300 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$709,311 in diabetes-related research projects in Rhode Island.

The Division of Diabetes
Translation at the CDC spent
\$657,075 on diabetes prevention
and educational programs in
Rhode Island in 2014.

Since 2005, the American

Diabetes Association has
provided \$540,682 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Rhode Island.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

South Carolina



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 **547,612 people in South Carolina**, or 14.0% of the 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.
- Diabetes costs an estimated \$5.4 billion in South Carolina each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 35,000 people in South Carolina are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$2,593,055 in diabetes-related research projects in South Carolina.

The **Division of Diabetes Translation** at the CDC spent **\$838,875** on diabetes prevention and educational programs in
South Carolina in 2014.

Since 2005, the American

Diabetes Association has
provided \$1,934,630 in targeted
diabetes research projects, career
development grants and clinical
scholarships in South Carolina.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

The Burden of Diabetes in South Dakota



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 **69,659 people in South Dakota**, or 10.2% of the 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 costs an estimated \$800 million in South Dakota each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 52,415 people in South Dakota are diagnosed with diabetes.

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 \$600 million in 2012.
- In addition, another \$200 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 **\$218,385** on diabetes prevention and educational programs in South Dakota in 2014.

Since 2005, the American Diabetes Association has provided \$984,732 in targeted diabetes research projects, career development grants and clinical scholarships in South Dakota.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **750,696 people in Tennessee**, or 14.1% of the 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.

Diabetes costs an estimated \$6.6 billion in Tennessee each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 46,000 people in Tennessee are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$18,220,573 in diabetes-related research projects in Tennessee.

The Division of Diabetes
Translation at the CDC spent
\$689,385 on diabetes prevention
and educational programs in
Tennessee in 2014.

Since 2005, the American

Diabetes Association has
provided \$7,129,186 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Tennessee.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **2,695,739 people in Texas**, or 14.0% of the 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.

Diabetes costs an estimated \$23.7 billion in Texas each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 132,000 people in Texas are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$18,667,655 in diabetes-related research projects in Texas.

The Division of Diabetes
Translation at the CDC spent
\$442,417 on diabetes prevention
and educational programs in
Texas in 2014.

Since 2005, the American

Diabetes Association has
provided \$25,529,974 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Texas.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **196,297 people in Utah**, or 10.6% of the 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 costs an estimated \$1.7 billion in Utah each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 11,000 people in Utah are diagnosed with diabetes.

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 \$400 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$7,253,019 in diabetes-related research projects in Utah.

The Division of Diabetes
Translation at the CDC spent
\$613,580 on diabetes prevention
and educational programs in Utah
in 2014.

Since 2005, the American

Diabetes Association has
provided \$4,580,332 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Utah.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **52,420 people in Vermont**, or 9.5% of the 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 costs an estimated \$500 million in Vermont each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 2,000 people in Vermont are diagnosed with diabetes.

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 \$400 million in 2012.
- In addition, another \$100 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 **\$214,356** on diabetes prevention and educational programs in Vermont in 2014.

Since 2005, the American Diabetes Association has provided \$622,000 in targeted diabetes research projects, career development grants and clinical scholarships in Vermont.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **873,634 people in Virginia**, or 13.0% of the 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, 36.0% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes costs an estimated \$8.2 billion in Virginia each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 49,000 people in Virginia are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$6,164,319 in diabetes-related research projects in Virginia.

The **Division of Diabetes Translation** at the CDC spent **\$541,247** on diabetes prevention and educational programs in Virginia in 2014.

Since 2005, the American

Diabetes Association has
provided \$10,366,529 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Virginia.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

Washington



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 **640,540 people in Washington**, or 11.4% of the 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 costs an estimated \$6.9 billion in Washington each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 446,315 people in Washington are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$17,371,205 in diabetes-related research projects in Washington.

The Division of Diabetes
Translation at the CDC spent
\$1,404,561 on diabetes
prevention and educational
programs in Washington in 2014.

Since 2005, the American

Diabetes Association has
provided \$6,906,086 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Washington.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **239,129 people in West Virginia**, or 14.4% of the 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.

Diabetes costs an estimated \$2.5 billion in West Virginia each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

Every year an estimated 13,000 people in West Virginia are diagnosed with diabetes.

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 \$600 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:

In 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$321,900 in diabetes-related research projects in West Virginia.

The Division of Diabetes
Translation at the CDC spent
\$409,812 on diabetes prevention
and educational programs in West
Virginia in 2014.

Since 2005, the American
Diabetes Association has
provided \$658,147 in targeted
diabetes research projects, career
development grants and clinical
scholarships in West Virginia.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

Wisconsin



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 **507,026 people in Wisconsin**, or 10.7% of the 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.

Diabetes costs an estimated \$5.9 billion in Wisconsin each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

• Every year an estimated 29,000 people in Wisconsin are diagnosed with diabetes.

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 2014, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested \$5,807,249 in diabetes-related research projects in Wisconsin.

The **Division of Diabetes Translation** at the CDC spent **\$701,668** on diabetes prevention and educational programs in Wisconsin in 2014.

Since 2005, the American

Diabetes Association has
provided \$4,314,962 in targeted
diabetes research projects, career
development grants and clinical
scholarships in Wisconsin.

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.
- Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.

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 **53,326 people in Wyoming**, or 11.5% of the 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 costs an estimated \$500 million in Wyoming each year.

The horrific complications include heart disease, stroke, amputation, end-stage kidney disease, blindness – and death.

 Every year an estimated 3,000 people in Wyoming are diagnosed with diabetes.

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 \$400 million in 2012.
- In addition, another \$100 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 **\$139,011** on diabetes prevention and educational programs in Wyoming in 2014.

Since 2005, the American Diabetes Association has provided \$741,861 in targeted diabetes research projects, career development grants and clinical scholarships in Wyoming.

Sources include:

- 2012 diagnosed and 2010 new cases of diabetes estimates are per the Centers for Disease Control (CDC) Diabetes Atlas National Surveillance System.
- Estimates for 2012 undiagnosed diabetes, prediabetes and costs of diabetes are per Dall, Timothy M., et al., "The Economic Burden of Elevated Blood Glucose Levels in 2012", Diabetes Care, December 2014, vol. 37.

Funding sources include NIH/NIDDK Research Portfolio Online Report Tool, U.S. Department of Health & Human Services; CDC Funding Data and Profile, Grant Funding by State; and the American Diabetes Association Funded Research History, 2005 to Present.