The Burden of Diabetes in 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 610,458 people in Alabama, or 15.2% of the adult population, have diabetes.

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $19,742,725 in diabetes-related research projects in Alabama. The Division of Diabetes Translation at the CDC spent $521,771 on diabetes prevention and educational programs in Alabama in 2016.

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Alaska

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

Alaska’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Arizona

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

Arizona’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

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

Arkansas’s diabetes epidemic:
Approximately 363,781 people in Arkansas, or 14.8% of the adult population, have diabetes.
- Of these, an estimated 75,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 797,000 people in Arkansas, 36.4% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 25,000 people in Arkansas are diagnosed with diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Arkansas was estimated at $2.3 billion in 2012.
- In addition, another $798 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $1,301,948 in diabetes-related research projects in Arkansas. The Division of Diabetes Translation at the CDC spent $902,396 on diabetes prevention and educational programs in Arkansas in 2016.

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

**California’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

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

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

Sources include:

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

### Colorado’s diabetes epidemic:

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

- Of these, an estimated **118,000 have diabetes but don’t know it**, greatly increasing their health risk.

- In addition, **1,342,000 people in Colorado**, 34.8% of the adult population, **have prediabetes** with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

### Diabetes is expensive:

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

- Total **direct medical expenses** for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Colorado was estimated at **$2.8 billion** in 2012.

- In addition, another **$823 million** was spent on **indirect costs** from lost productivity due to diabetes.

### Improving lives, preventing diabetes and finding a cure:

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

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

Sources include:

- Cost: Dall et al.
The Burden of Diabetes in Connecticut

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

Connecticut’s diabetes epidemic:
Approximately 354,240 people in Connecticut, or 11.3% of the adult population, have diabetes.
- Of these, an estimated 93,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 997,000 people in Connecticut, 36.5% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 11,000 people in Connecticut are diagnosed with diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Connecticut was estimated at $3 billion in 2012.
- In addition, another $969 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $40,148,137 in diabetes-related research projects in Connecticut.

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

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Delaware

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

Delaware’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

DC’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

**Florida’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

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

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

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

Georgia's diabetes epidemic:
Approximately 1,121,495 people in Georgia, or 14.2% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $24,322,996 in diabetes-related research projects in Georgia.

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

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

**Hawaii’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

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

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

Sources include:

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

Idaho’s diabetes epidemic:
Approximately 127,799 people in Idaho, or 10% of the adult population, have diabetes.
- Of these, an estimated 36,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 397,000 people in Idaho, 34.9% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Idaho was estimated at $1 billion in 2012.
- In addition, another $304 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
The Division of Diabetes Translation at the CDC spent $862,404 on diabetes prevention and educational programs in Idaho in 2016.

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

Illinois’s diabetes epidemic:
Approximately 1,342,070 people in Illinois, or 12.8% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $60,349,265 in diabetes-related research projects in Illinois. The Division of Diabetes Translation at the CDC spent $3,911,938 on diabetes prevention and educational programs in Illinois in 2016.

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

Indiana's diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $18,315,761 in diabetes-related research projects in Indiana. The Division of Diabetes Translation at the CDC spent $815,662 on diabetes prevention and educational programs in Indiana in 2016.

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Iowa

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

Iowa’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

**The Burden of Diabetes in Kansas**

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

**Kansas’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

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

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

**Sources include:**

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

Kentucky’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $10,845,680 in diabetes-related research projects in Kentucky. The Division of Diabetes Translation at the CDC spent $794,763 on diabetes prevention and educational programs in Kentucky in 2016.

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

Louisiana’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

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

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

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

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

**Improving lives, preventing diabetes and finding a cure:**
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $7,451,131 in diabetes-related research projects in Maine. The Division of Diabetes Translation at the CDC spent $1,178,807 on diabetes prevention and educational programs in Maine in 2016.

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

Maryland’s diabetes epidemic:
Approximately 623,041 people in Maryland, or 12.6% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $42,813,148 in diabetes-related research projects in Maryland. The Division of Diabetes Translation at the CDC spent $2,528,900 on diabetes prevention and educational programs in Maryland in 2016.

Sources include:
- Cost: Dall et al.
Diabetes and prediabetes cost an estimated $8.1 billion in Massachusetts each year.

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

Massachusetts’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

**Michigan’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $71,438,583 in diabetes-related research projects in Michigan. The Division of Diabetes Translation at the CDC spent $3,521,367 on diabetes prevention and educational programs in Michigan in 2016.

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Minnesota

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

Minnesota’s diabetes epidemic:
Approximately 466,638 people in Minnesota, or 10.5% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $50,374,668 in diabetes-related research projects in Minnesota. The Division of Diabetes Translation at the CDC spent $3,496,836 on diabetes prevention and educational programs in Minnesota in 2016.

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

Mississippi’s diabetes epidemic:
Approximately 371,662 people in Mississippi, or 15.4% of the adult population, have diabetes.
- Of these, an estimated 79,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 810,000 people in Mississippi, 37.5% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Mississippi was estimated at $2.6 billion in 2012.
- In addition, another $902 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $1,089,631 in diabetes-related research projects in Mississippi.
The Division of Diabetes Translation at the CDC spent $865,354 on diabetes prevention and educational programs in Mississippi in 2016.

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

Missouri’s diabetes epidemic:

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

- Of these, an estimated 152,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 1,625,000 people in Missouri, 35.9% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 32,000 people in Missouri are diagnosed with diabetes.

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

Montana’s diabetes epidemic:
Approximately 96,294 people in Montana, or 10.9% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $296,100 in diabetes-related research projects in Montana.

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

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

Nebraska’s diabetes epidemic:
Approximately 174,627 people in Nebraska, or 11.6% of the adult population, have diabetes.
- Of these, an estimated 45,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 487,000 people in Nebraska, 35.8% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 8,000 people in Nebraska are diagnosed with diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Nebraska was estimated at $1.2 billion in 2012.
- In addition, another $363 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $1,298,688 in diabetes-related research projects in Nebraska.

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

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

**Nevada’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$4,095,159** in diabetes-related research projects in Nevada. The **Division of Diabetes Translation** at the CDC spent **$2,765,530** on diabetes prevention and educational programs in Nevada in 2016.

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

New Hampshire's diabetes epidemic:
Approximately 130,862 people in New Hampshire, or 11% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $1,970,618 in diabetes-related research projects in New Hampshire.

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

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

New Jersey’s diabetes epidemic:
Approximately 904,861 people in New Jersey, or 12% of the adult population, have diabetes.
- Of these, an estimated 235,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 2,483,000 people in New Jersey, 37.1% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 39,000 people in New Jersey are diagnosed with diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in New Jersey was estimated at $7.5 billion in 2012.
- In addition, another $2.8 billion was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $3,172,615 in diabetes-related research projects in New Jersey.

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

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

New Mexico's diabetes epidemic:
Approximately 241,120 people in New Mexico, or 14.1% of the population, have diabetes.
- Of these, an estimated 59,000 have diabetes but don't know it, greatly increasing their health risk.
- In addition, 603,000 people in New Mexico, 39.7% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 12,000 people in New Mexico are diagnosed with diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in New Mexico was estimated at $1.6 billion in 2012.
- In addition, another $424 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $1,122,128 in diabetes-related research projects in New Mexico. The Division of Diabetes Translation at the CDC spent $817,335 on diabetes prevention and educational programs in New Mexico in 2016.

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

New York’s diabetes epidemic:
Approximately 2,071,909 people in New York, or 12.5% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $99,559,248 in diabetes-related research projects in New York. The Division of Diabetes Translation at the CDC spent $5,144,471 on diabetes prevention and educational programs in New York in 2016.

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in 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 1,075,855 people in North Carolina, or 13.1% of the adult population, have diabetes.

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $75,823,340 in diabetes-related research projects in North Carolina. The Division of Diabetes Translation at the CDC spent $3,846,094 on diabetes prevention and educational programs in North Carolina in 2016.

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

North Dakota’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

Ohio’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Oklahoma

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

Oklahoma’s diabetes epidemic:
Approximately 451,888 people in Oklahoma, or 14.3% of the adult population, have diabetes.

- Of these, an estimated 100,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 1,036,000 people in Oklahoma, 36.9% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 19,000 people in Oklahoma are diagnosed with diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $1,298,800 in diabetes-related research projects in Oklahoma. The Division of Diabetes Translation at the CDC spent $3,155,508 on diabetes prevention and educational programs in Oklahoma in 2016.

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Oregon

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

Oregon’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$10,369,906** in diabetes-related research projects in Oregon. The **Division of Diabetes Translation** at the CDC spent **$1,693,003** on diabetes prevention and educational programs in Oregon in 2016.

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

Pennsylvania’s diabetes epidemic:
Approximately 1,455,813 people in Pennsylvania, or 12.8% of the adult population, have diabetes. 
- Of these, an estimated 325,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 3,505,000 people in Pennsylvania, 35.8% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 71,000 people in Pennsylvania are diagnosed with diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Pennsylvania was estimated at $10.2 billion in 2012.
- In addition, another $3.2 billion was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $111,205,293 in diabetes-related research projects in Pennsylvania. The Division of Diabetes Translation at the CDC spent $2,409,984 on diabetes prevention and educational programs in Pennsylvania in 2016.

Sources include:
- Cost: Dall et al.
**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 **106,210 people in Rhode Island**, or 11.5% of the adult population, **have diabetes**.

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

In 2015, the **National Institute of Diabetes and Digestive and Kidney Diseases** at the National Institutes of Health invested **$4,506,885** in diabetes-related research projects in Rhode Island. The **Division of Diabetes Translation** at the CDC spent **$2,503,752** on diabetes prevention and educational programs in Rhode Island in 2016.

Sources include:

- Cost: Dall et al.
The Burden of Diabetes in 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 576,211 people in South Carolina, or 14.1% of the adult population, have diabetes.

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

**South Dakota’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

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

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Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Tennessee

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

Tennessee’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $43,157,313 in diabetes-related research projects in Tennessee. The Division of Diabetes Translation at the CDC spent $1,313,541 on diabetes prevention and educational programs in Tennessee in 2016.

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

Texas’s diabetes epidemic:
Approximately 2,841,723 people in Texas, or 14.2% of the adult population, have diabetes.

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

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.

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

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $73,512,456 in diabetes-related research projects in Texas.

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

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

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

Utah’s diabetes epidemic:
Approximately 201,025 people in Utah, or 10.4% of the adult population, have diabetes.
- Of these, an estimated 54,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 619,000 people in Utah, 32.7% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.

Diabetes is expensive:
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Utah was estimated at $1.3 billion in 2012.
- In addition, another $384 million was spent on indirect costs from lost productivity due to diabetes.

Improving lives, preventing diabetes and finding a cure:
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $7,210,085 in diabetes-related research projects in Utah.

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

Sources include:
- Cost: Dall et al.
Diabetes and prediabetes cost an estimated $543 million in Vermont each year.

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

**Vermont’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

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

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

**Sources include:**
- Cost: Dall et al.
The Burden of Diabetes in Virginia

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

Virginia’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

**Washington’s diabetes epidemic:**

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

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

**Diabetes is expensive:**

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

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

**Improving lives, preventing diabetes and finding a cure:**

In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $51,800,120 in diabetes-related research projects in Washington. The Division of Diabetes Translation at the CDC spent $2,425,627 on diabetes prevention and educational programs in Washington in 2016.

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

West Virginia’s diabetes epidemic:

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

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

Diabetes is expensive:

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

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

Improving lives, preventing diabetes and finding a cure:

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

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

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

**Wisconsin’s diabetes epidemic:**
Approximately 541,523 people in Wisconsin, or 11.2% of the adult population, have diabetes.
- Of these, an estimated 142,000 have diabetes but don’t know it, greatly increasing their health risk.
- In addition, 1,550,000 people in Wisconsin, 36.1% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes.
- Every year an estimated 21,000 people in Wisconsin are diagnosed with diabetes.

**Diabetes is expensive:**
People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes.
- Total direct medical expenses for diagnosed and undiagnosed diabetes, prediabetes and gestational diabetes in Wisconsin was estimated at $4.6 billion in 2012.
- In addition, another $1.3 billion was spent on indirect costs from lost productivity due to diabetes.

**Improving lives, preventing diabetes and finding a cure:**
In 2015, the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health invested $20,901,590 in diabetes-related research projects in Wisconsin. The Division of Diabetes Translation at the CDC spent $1,381,233 on diabetes prevention and educational programs in Wisconsin in 2016.

Sources include:
- Cost: Dall et al.
The Burden of Diabetes in Wyoming

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

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

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

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

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

Improving lives, preventing diabetes and finding a cure:
The **Division of Diabetes Translation** at the CDC spent **$319,514** on diabetes prevention and educational programs in Wyoming in 2016.

Sources include:
- Cost: Dall et al.