The Diabetes Epidemic
A look at Diabetes Action Plans to Help Make a Difference!

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What is the American Diabetes Association?

The Association is the nation's largest voluntary health organization leading the fight to Stop Diabetes.

Our Mission:

To prevent and cure diabetes and to improve the lives of all people affected by diabetes.
The Human Toll of Diabetes

25.8 million with diabetes and 79 million with prediabetes

7th leading cause of death in the U.S. (may be under-reported)

Serious complications

• Heart disease & stroke – 2/3 of people with diabetes die from these conditions
• Blindness and eye problems – diabetes is a leading cause of blindness
• Kidney disease – diabetes is the leading cause of kidney failure
• Nervous system damage – contributes to amputations
• Amputations – diabetes is a leading cause of lower limb amputations

Source: CDC and American Diabetes Association
25.8 million with Diabetes

79 million with Prediabetes
# The Financial Toll of Diabetes - 2012

<table>
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<th>United States</th>
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<tbody>
<tr>
<td>Medical cost</td>
<td>$176b</td>
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<tr>
<td>Indirect cost</td>
<td>$ 69b</td>
</tr>
<tr>
<td>Total cost</td>
<td><strong>$245b</strong> (41% increase in 5 years)</td>
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</table>

Point of comparison – property damage from Hurricane Katrina has been estimated at $81b

Source: *Economic Costs of Diabetes in the U.S. in 2012*
So What Do We Do About Diabetes?

Different answers for different people...

General population

People with prediabetes (79 million - mostly undiagnosed)

People with diabetes (18.8 million diagnosed, 7 million not)
The ADA Supports State Legislative Policies To Promote:

– Coordination of care
– Collection of data
– Development of state policy aimed at addressing the burden of diabetes and prediabetes
The Current Landscape for States

States have started to move into a Coordinated Chronic Disease Prevention and Health Promotion Program (CDDP) model established by the Centers for Disease Control and way from the Diabetes Prevention and Control Programs. (DPCP)

Under this new CDC funding strategy of combining previously separate grants into just one designed to prevent and control chronic diseases including diabetes, heart disease, and obesity, it is not certain how states will approach their diabetes strategies.

This heightens the need to highlight diabetes and its impact.
Obesity and Diagnosed Diabetes Among US Adults

(Diabetes has tripled in the last 20 years)

Obesity (BMI $\geq 30 \text{ kg/m}^2$)

<table>
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<th>Year</th>
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<th>&lt;14.0%</th>
<th>14.0%–17.9%</th>
<th>18.0%–21.9%</th>
<th>22.0%–25.9%</th>
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</thead>
<tbody>
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<td>4.5%–5.9%</td>
<td>6.0%–7.4%</td>
<td>7.5%–8.9%</td>
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<tr>
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<td></td>
<td></td>
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<td>2010</td>
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</table>

Source: CDC
What Can My State Do

There is a need to bring attention to the diabetes epidemic and its impact at the state level and to implement coordinated efforts to effectively meet this public health challenge.
Why?

Often State Agencies are not currently tracking or reporting the same information which makes it hard for State Legislators to make effective policy decisions.

Finding a way to increase state agency communication and to use the same “language” with each other around diabetes and prediabetes and chronic disease management will lead to increased clarity, better health outcomes and cost savings.
Why is Collaboration Across Agencies Important? Priority initiatives aren’t always recognized in different silos

When the Hand Doesn’t Talk to the Foot!

For example, a Diabetes Prevention and Control Program may be spending time and money to educate people with diabetes on the importance of routine foot care.

Meanwhile, the state’s Medicaid program may not cover critical podiatric services for people with diabetes, despite the fact they are at great risk for expensive and disabling foot amputations.
One Way To Make A Difference Is:

Diabetes Action Plans

This legislation is intended to foster improvements in a state’s response to the diabetes epidemic within and across agencies/departments.
DAP Goals

The overall goal of this type of legislation is to provide a more balanced and comprehensive means of addressing the costs of diabetes, and influence positive public policy to reduce the impact on people with, and at risk for, diabetes, as well as the social and economic burden of diabetes on the state.
DAP Goals

• To provide states with a mechanism to report to the legislature regarding the burden of diabetes and ensuring legislators hear a plan for addressing the disease are other key benefits of the DAP legislation.

• To raise awareness of the lack of state resources being devoted to diabetes prevention and treatment and the need to develop and implement a plan to take action in light of the growing epidemic.
DAP’s Require
State Departments and Agencies to:

– Plan
– Assess
– Review
– Prioritize

Then provide solutions and ideas in the form of public policy to contain the reach, scope and costs of the epidemic of diabetes and its complications.
Main Points For A DAP Bill:

• Description of the problem
  – (i.e. condition of the disease by type in the state)

• Create collaborations amongst stakeholders in the state
  – (i.e. the right state agencies with the right community partners, providers, industry, etc)

• Make recommendations after one year directly to the legislature including possible policies to be considered/implemented

• Reconvenes the work group every other year in order to update the information and the analysis
Data Collection

Goal: To ensure the data that is collected and reported by state agencies at the state level is done correctly.

- Specifically getting appropriate data on minority populations and the impact of diabetes will help reduce health disparities.
Information Reported

The Data should reflect the real demographics of the populations in the various jurisdictions in order to accurately reflect the varied impact the diseases.

Data to Consider
1. Impacted population
2. Available programs
3. Federal/state funding levels/sources
4. Fiscal impact to the state of the disease
5. Population/fiscal trends
6. Current rates of diabetes
States Who have Passed DAP Legislation

Kentucky
Illinois
Louisiana
New Jersey
North Carolina
North Dakota
Oregon
Texas
DAP legislation did not pass, however due to the discussion on DAP, a Diabetes Prevention budget proviso (from general funds) was passed in special session.

The provision reads: Diabetes Prevention - Staff and funding are provided for the Health Care Authority, the Department of Social and Health Services, and Department of Health to collaborate to identify goals, benchmarks, and plans for preventing and controlling diabetes.

Allocation is: $115,000 appropriation to Department of Health; $162,000 to the Health Care Authority and $154,000 to Department of Social and Health Services.
The ADA Is Here To Help!

We want to partner with state legislators to support efforts like DAP’s!
If You Are Thinking About A DAP In Your State Please Contact Your ADA State Director Of Government Affairs:

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- Delaware
- District of Columbia
- Maryland
- Virginia

**American Diabetes Association.**
The Future?

While some positive steps are being taken, the enormity of the problem suggests we’re not doing enough.

You can make a difference!

The CDC estimates that 1 in 3 people born in 2000 will have diabetes in the course of their lifetime....

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