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# The Cost of Diabetes



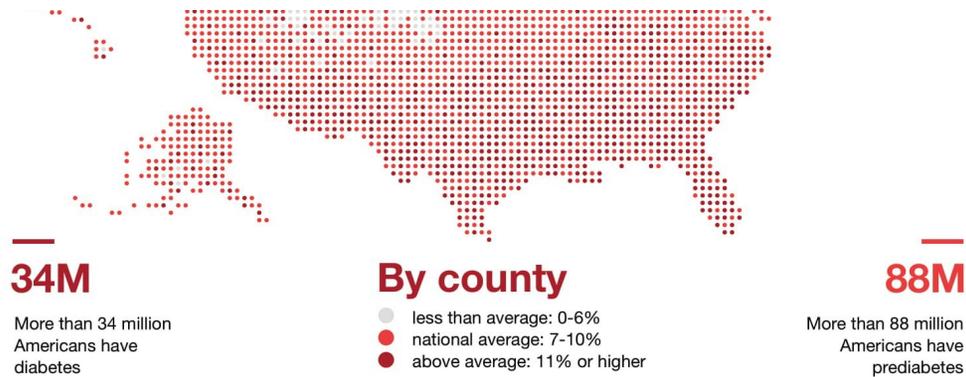
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## The Staggering Costs of **Diabetes**

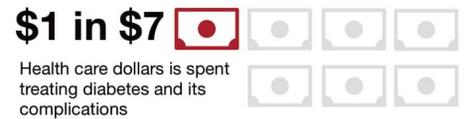
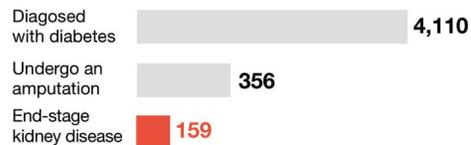
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## Today in America



Learn how to fight this costly disease at [diabetes.org/advocacy](https://diabetes.org/advocacy)

Learn more at [diabetes.org](https://diabetes.org) | 1-800-DIABETES (1-800-342-2383)

02/2020

The Staggering Costs of Diabetes | American Diabetes Association®

The American Diabetes Association released new research on March 22, 2018 estimating the total costs of diagnosed diabetes have risen to \$327 billion in 2017 from \$245 billion in 2012, when the cost was last examined.

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breakdown of costs along gender, racial, and ethnic lines, and also includes a breakdown of costs on a state-by-state basis.

## Results

The total estimated 2017 cost of diagnosed diabetes of \$327 billion includes \$237 billion in direct medical costs and \$90 billion in reduced productivity.

The largest components of medical expenditures are:

- hospital inpatient care (30% of the total medical cost),
- prescription medications to treat complications of diabetes (30%),
- anti-diabetic agents and diabetes supplies (15%), and
- physician office visits (13%).

People with diagnosed diabetes incur average medical expenditures of \$16,752 per year, of which about \$9,601 is attributed to diabetes.

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than half of that expenditure is directly attributable to diabetes.

Indirect costs include:

- increased absenteeism (\$3.3 billion),
- reduced productivity while at work (\$26.9 billion) for the employed population,
- reduced productivity for those not in the labor force (\$2.3 billion),
- inability to work as a result of disease-related disability (\$37.5 billion), and
- lost productive capacity due to early mortality (\$19.9 billion).

## Diabetes costs in specific populations

- Most of the cost for diabetes care in the U.S., 67.3%, is provided by government insurance (including Medicare,

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coverage—but they also have 168% more emergency department visits than people who have insurance.

- Total per-capita healthcare expenditures are higher among men than women (\$10,060 vs. \$9,110).
- Total per-capita healthcare expenditures are lower among Hispanics (\$8,050) and higher among non-Hispanic blacks (\$10,470) and among non-Hispanic whites (\$9,800).
- Compared to non-Hispanic whites, per capita hospital inpatient costs are 23% higher among non-Hispanic blacks and 29% lower among Hispanics. Non-Hispanic blacks also have 65% more emergency department visits than the population with diabetes as a whole.
- Among states, California has the largest population with diabetes and thus the highest costs, at \$39.47 billion. Texas (\$25.60 billion), Florida (\$24.80 billion), and

New York (\$21.23 billion) round out the top four states in terms of total annual cost.

\$627 billion, a 20% increase from our previous estimate of \$521 billion (in 2012 dollars).

This estimate highlights the substantial burden that diabetes imposes on society. Additional components of societal burden omitted from our study include intangibles from pain and suffering, resources from care provided by non-paid caregivers, and the burden associated with undiagnosed diabetes.

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