



**DIABETES PREVENTION AND CONTROL PROGRAM
FY 2015 APPROPRIATIONS FACT SHEET
CENTERS FOR DISEASE CONTROL AND PREVENTION**

FY 2014	President's FY 2015 Budget	FY 2015 Suggested
\$140,129,000	\$140,306,000	\$140,306,000

Historically all states have been grossly underfunded to address the epidemic of diabetes through prevention and control. The increase in the 2014 Omnibus should continue in 2015 to assure maximum impact of evidence-based strategies.

Basic Facts about Diabetes

- Diabetes is now the seventh leading cause of death. Overall, the risk for death among people with diabetes is about twice that of people of similar age but without diabetes.
- 25.8 million Americans have diabetes, and 7 million of them don't know that they have the disease. An estimated 79 million U.S. adults aged 20 or older are estimated to have pre-diabetes (elevated blood sugar levels but not high enough to be classified as having diabetes), which places them at increased risk of developing diabetes.
- Type 2 diabetes, once believed to affect only adults, is now being diagnosed among children and adolescents.
- Compared to non-Hispanic white adults, the risk of diagnosed diabetes was 18% higher among Asian Americans, 66% higher among Hispanics, and 77% higher among non-Hispanic blacks.
- The increasing prevalence of obesity has and will continue to have a profound effect on the number of people who develop diabetes in the future.
- About 1.9 million new cases of diabetes were diagnosed in people aged 20 years or older in 2010.
- Diabetes is the leading cause of kidney failure and new cases of blindness in adults. More than 60% of leg and foot amputations unrelated to injury occur in people with diabetes.

Cost of Diabetes to the American Health Care System

- Each year, diabetes costs \$116 billion in direct medical costs and \$58 billion in indirect costs. People with diagnosed diabetes, on average, have medical expenditures that are 2.3 times higher than what expenditures would be in the absence of diabetes.

Diabetes is Preventable and Controllable

- Research has shown that targeted interventions for modest lifestyle changes in people at highest risk can prevent or delay the onset of type 2 diabetes. Lifestyle intervention to lose weight and increase physical activity reduced the development of type 2 diabetes by 58%, and by 71% among adults aged 60 years or older.
- Studies have found that better blood sugar control reduces the risk for eye disease, kidney disease and nerve disease by 40% in people with type 1 or type 2 diabetes.
- Blood pressure control reduces the risk of heart disease and stroke among people with diabetes by 33-50%. Detecting and treating early diabetic kidney disease by lowering blood pressure can reduce the decline in kidney function by 30-70%.

- Improved control of blood cholesterol levels can reduce cardiovascular complications by 20-50%.

CDC's Diabetes Program

The backbone of the CDC Program is basic support to all 50 states and Washington, D.C. through the State Public Health Approaches to Chronic Disease Prevention program (SPHA). The SPHA includes state programming for diabetes, obesity, heart disease and stroke, and school health. Also through SPHA, thirty-two states successfully competed to receive enhanced funding to expand the reach of evidence-based diabetes interventions and conduct more comprehensive evaluation. States work with health departments, hospitals, health clinics, and providers to reach individuals with, and at risk for diabetes.

The CDC-led National Diabetes Prevention Program (National DPP) is a public-private partnership of community organizations, private insurers, employers, health care organizations and government agencies working to deliver the diabetes prevention lifestyle change program. Additionally, CDC sets quality standards for ongoing monitoring of this investment and recognizes organizations that meet these standards. Currently, over 500 organizations have applied for CDC recognition. The inaugural partners of the National Diabetes Prevention Program were the Y (also known as YMCA of the USA) and UnitedHealth Group. CDC awarded a grant to the Y that initiated some of the first community-based sites to carry out the diabetes prevention lifestyle change program. The National DPP has delivered the lifestyle change program to approximately 15,000 people at high risk for type 2 diabetes in 38 states and the District of Columbia and has trained 2,370 lifestyle coaches.

States are in a unique position to reach state employees and citizens at risk for developing type 2 diabetes. Areas for impact may include: increasing access to the lifestyle change program; educating employers and insurers about the benefits of the lifestyle change program; implementing systems to increase provider referrals of people at high risk; and supporting health communication initiatives or coalition work that specifically addresses type 2 diabetes prevention.

States are beginning to engage in this work. Two examples of states in action include:

Washington State developed a statewide referral system in partnership with the state 211 Call Center (www.win211.org) to drive traffic to local sites delivering the CDC recognized lifestyle change program. An estimated 1.6 million adults with prediabetes reside in the area covered by the Call Center; 9,142 promotional materials were distributed by WIN 211 staff in the past year.

The Colorado Department of Public Health worked with the State Wellness Coordinator and representatives from key health plans to offer a National DPP demonstration project for state employees. This helped policymakers better understand the effectiveness of the program first-hand and resulted in the program becoming a covered benefit for public employees with fully insured United Healthcare plans on March 1, 2013 and for all 34,321 state employees on Sept. 1, 2013.

With the additional investment of \$73,000,000 in the FY 2014 Omnibus appropriations bill, states look forward to maximize impact and return on investment by expanding evidenced-based strategies into many more communities.

*For more information visit www.cdc.gov/diabetes

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