Background

Diabetes is a disease in which the body does not produce or properly use insulin. The cause of diabetes continues to be a mystery, although both genetics and environmental factors such as obesity and lack of exercise appear to play roles. As of 2007, an estimated 23.6 million people in the United States had diabetes. About 1.6 million new cases of diabetes were diagnosed in people aged 20 years or older in 2007. Only 24% of diabetes is undiagnosed, down from 30% in 2005 and from 50% ten years ago (http://www.diabetes.org/diabetes-statistics.jsp).

Approximately one in every 400 to 500 children and adolescents has type 1 diabetes. Although type 2 diabetes is a problem among youth, nationally representative data to monitor diabetes trends among youth are not available. Clinic-based reports and regional studies indicate that type 2 diabetes is becoming more common among children and adolescents, particularly in American Indians, African Americans, and Hispanic/Latinos (http://www.cdc.gov/diabetes/pubs/factsheet07.htm).

National Costs of Diabetes

- The total annual economic cost of diabetes in 2007 was estimated to be $174 billion.
- Medical expenditures totaled $116 billion and were comprised of $27 billion for diabetes care, $58 billion for chronic diabetes-related complications, and $31 billion for excess general medical costs. Indirect costs resulting from increased absenteeism, reduced productivity, disease-related unemployment disability, and loss of productive capacity due to early mortality totaled $58 billion.
- $58.3 billion was spent on inpatient hospital care and $9.9 billion on physician’s office visits directly attributed to diabetes.
- Diabetes-related hospitalizations totaled 24.3 million days in 2007, an increase of 7.4 million from the 16.9 million days in 2002.
- The average cost for a hospital inpatient day due to diabetes is $1,853 and $2,281 due to diabetes-related chronic complications, including neurological, peripheral vascular, cardiovascular, renal, metabolic, and ophthalmic complications.
- People with diagnosed diabetes, on average, have medical expenditures that are approximately 2.3 times higher than those without diabetes (http://www.diabetes.org/diabetes-statistics/cost-of-diabetes-in-us.jsp).

In fiscal year 2008:

- 50,444 Medicaid recipients had paid claims associated with a primary diagnosis of diabetes or 5.55% of the total Medicaid recipient population.
- Total medical expenditures for this population were $539,051,116, accounting for 15.02% of the state Medicaid expenditures.

Diabetes and SC Medicaid Recipients

Prevalence of Diabetes among South Carolina Medicaid Recipients by County (N = 50,444)

<table>
<thead>
<tr>
<th>Diabetes Cases per 1,000 Medicaid Recipients</th>
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<tbody>
<tr>
<td>43.0 - 49.9</td>
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<tr>
<td>50.0 - 59.9</td>
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<tr>
<td>60.0 - 74.9</td>
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<td>75.0 - 108.1</td>
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Data Source: South Carolina Medicaid Information System, FY2008.
Created by the University of South Carolina, Institute for Families in Society, May 2009.