TYPE 2 DIABETES REPORT™
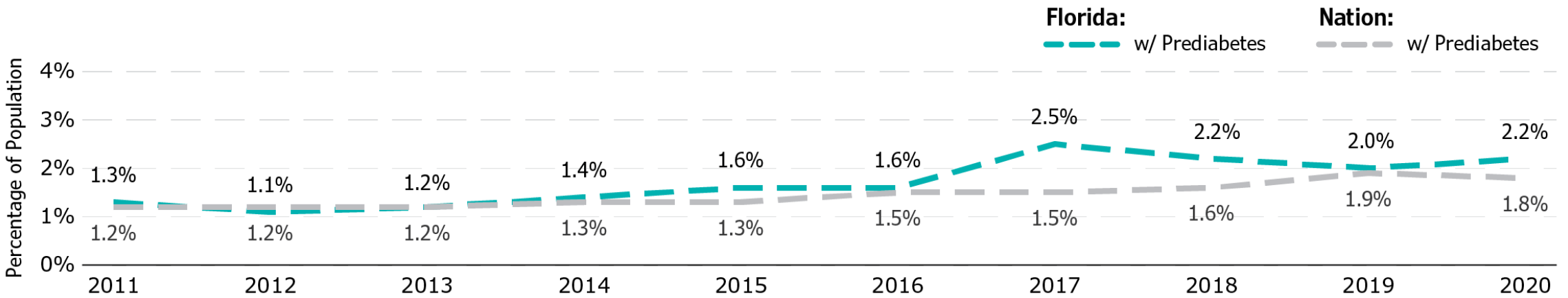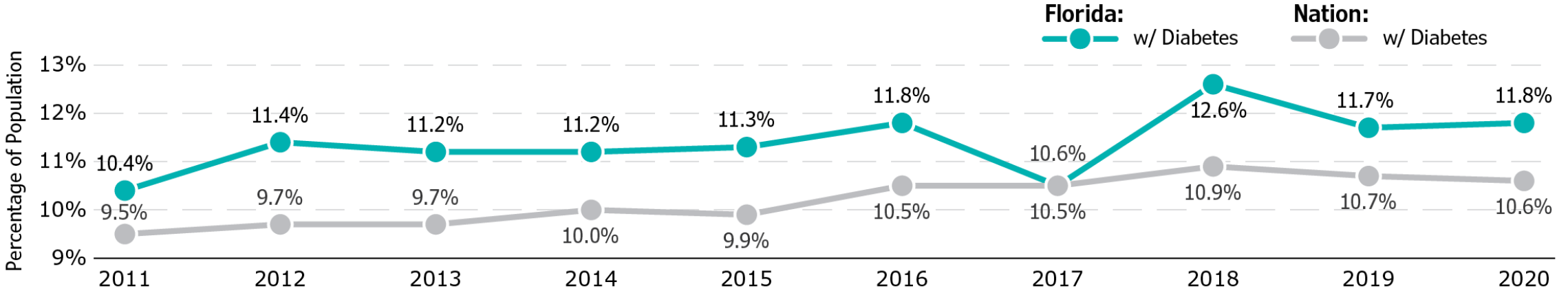
Florida Alliance For Healthcare Value

With a Focus on High-Risk Coexisting Conditions

Intended for use with payers, formulary committees, or other similar entities for purposes of population-based drug selection, coverage, and/or reimbursement decision making, pursuant to FD&C Act Section 502(a).

MAT-US-2308077-v1.0-09/2023

Percentage of Adults Self-Reporting Diabetes or Prediabetes, 2011–2020[1]

Florida: w/ Diabetes   **Nation:** w/ Diabetes

Florida w/ Diabetes: 10.4% (2011), 11.4% (2012), 11.2% (2013), 11.2% (2014), 11.3% (2015), 11.8% (2016), 10.6% (2017), 12.6% (2018), 11.7% (2019), 11.8% (2020)

Nation w/ Diabetes: 9.5% (2011), 9.7% (2012), 9.7% (2013), 10.0% (2014), 9.9% (2015), 10.5% (2016), 10.5% (2017), 10.9% (2018), 10.7% (2019), 10.6% (2020)

Florida: w/ Prediabetes   **Nation:** w/ Prediabetes

Florida w/ Prediabetes: 1.3% (2011), 1.1% (2012), 1.2% (2013), 1.4% (2014), 1.6% (2015), 1.6% (2016), 2.5% (2017), 2.2% (2018), 2.0% (2019), 2.2% (2020)

Nation w/ Prediabetes: 1.2% (2011), 1.2% (2012), 1.2% (2013), 1.3% (2014), 1.3% (2015), 1.5% (2016), 1.5% (2017), 1.6% (2018), 1.9% (2019), 1.8% (2020)

Reference: 1. Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System © 2022

NOTE: Behavioral Risk Factor Surveillance System (BRFSS) data on diabetes and prediabetes are based on responses to the survey question, "Have you ever been told by a doctor that you have diabetes?"

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Percentage of Florida Population Self-Reporting Diabetes, by Gender, 2012–2020[1]
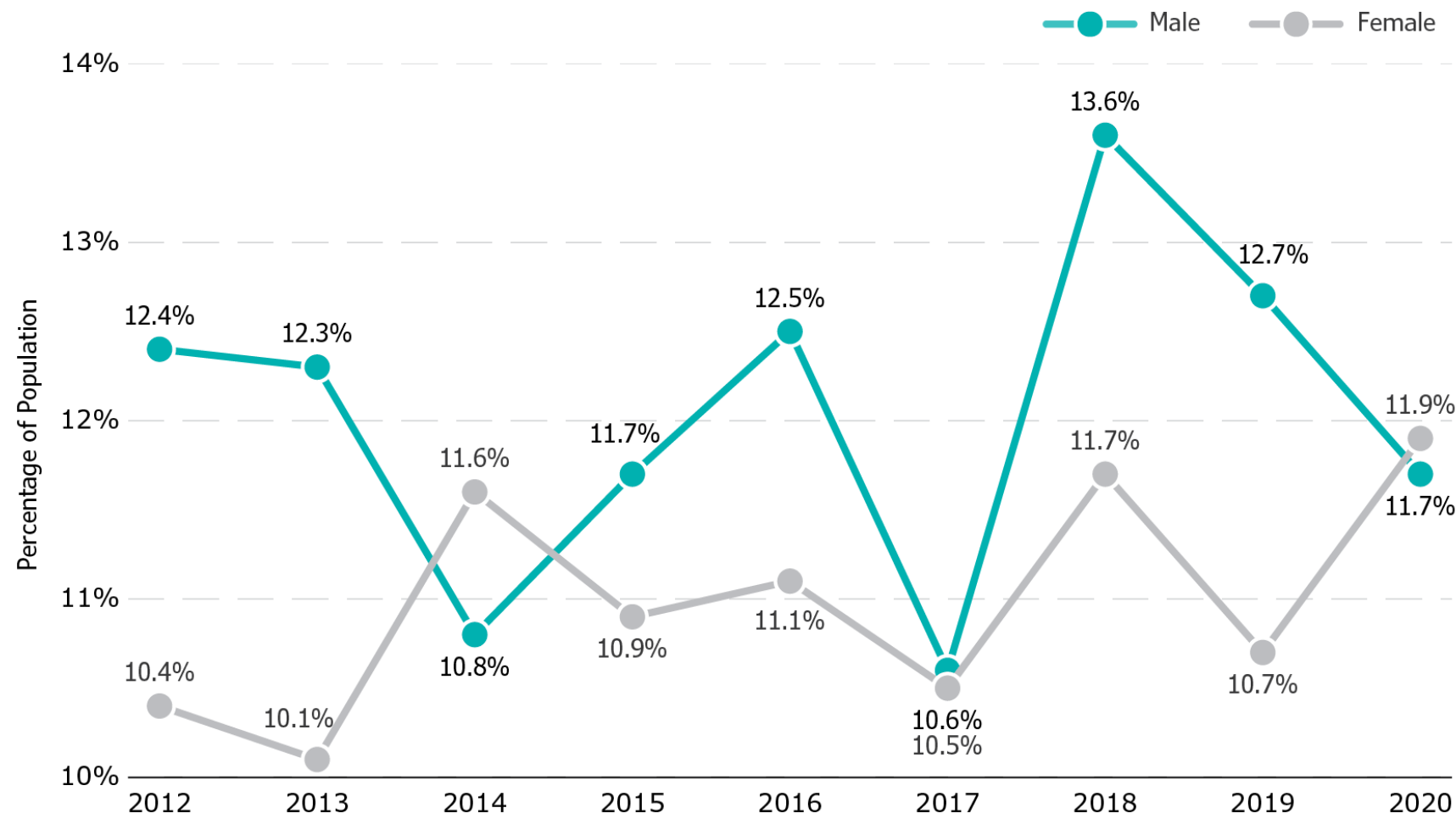
References: **1.** Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System © 2022

NOTE: Behavioral Risk Factor Surveillance System (BRFSS) data on diabetes and prediabetes are based on responses to the survey question, "Have you ever been told by a doctor that you have diabetes?" Throughout this report, commercial insurance includes HMOs, PPOs, point-of-service plans, and exclusive provider organizations. Medicaid includes fee-for-service and managed care. The Lakeland market includes Winter Haven; the Miami market includes Fort Lauderdale and West Palm Beach; the Orlando market includes Kissimmee and Sanford; the Palm Bay market includes Melbourne and Titusville; the Tampa market includes St. Petersburg and Clearwater. An n/a indicates that data were not available.

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Percentage of Type 2 Diabetes Patients, by Payer, 2021–2022[2]					
	Commercial Insurance		Medicare		Medicaid	
MARKET	2021	2022	2021	2022	2021	2022
Jacksonville	42.7%	43.5%	50.1%	49.3%	7.2%	7.1%
Lakeland	38.4	40.9	50.6	48.1	11.0	10.9
Miami	44.1	46.0	46.5	45.5	9.3	8.4
Orlando	40.0	42.4	46.2	44.1	13.8	13.5
Palm Bay	38.9	42.3	54.7	51.3	6.4	6.3
Tampa	31.1	33.2	62.6	61.1	6.3	5.7
Florida	40.0	42.0	51.0	49.5	9.0	8.5
NATION	41.2%	42.3%	45.2%	44.4%	13.5%	13.2%

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Distribution of Commercial Type 2 Diabetes Patients, by Age, 2021–2022[2]

MARKET	0–17		18–35		36–64		65–79		80+	
	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022
Jacksonville	0.3%	0.3%	2.2%	2.4%	48.6%	48.1%	38.3%	38.4%	10.6%	10.9%
Lakeland	0.3	0.4	2.4	2.7	49.6	47.9	36.6	37.8	11.2	11.2
Miami	0.2	0.2	1.9	1.9	44.8	44.8	37.8	37.8	15.3	15.2
Orlando	0.3	0.3	2.1	2.1	48.9	47.1	37.8	38.8	11.0	11.8
Palm Bay	0.2	0.2	1.5	1.6	43.5	40.3	40.4	41.9	14.4	16.1
Tampa	0.2	0.2	2.2	2.3	47.1	46.3	38.2	38.7	12.3	12.5
Florida	0.2	0.2	2.0	2.1	45.5	44.8	38.9	39.2	13.4	13.7
NATION	0.3%	0.2%	2.6%	2.5%	52.6%	51.3%	34.3%	35.3%	10.3%	10.6%

References: 2. IQVIA © 2023

MAT-US-2308077-v1.0-09/2023

Percentage of Commercial Type 2 Diabetes Patients With ≥2 Comorbidities, 2020–2022[1,a]

Legend: ● 2020 ● 2021 ● 2022

Percentage of Patients

	2020	2021	2022
Jacksonville	70.4%	71.8%	70.9%
Lakeland	66.7%	72.7%	72.0%
Miami	62.2%	66.7%	65.7%
Orlando	70.3%	71.6%	70.3%
Palm Bay	62.2%	65.3%	65.2%
Tampa	71.5%	69.6%	68.9%
Florida	67.1%	68.9%	67.8%
Nation	63.6%	64.5%	63.7%

Y-axis: 76%, 57%, 38%, 19%, 0%
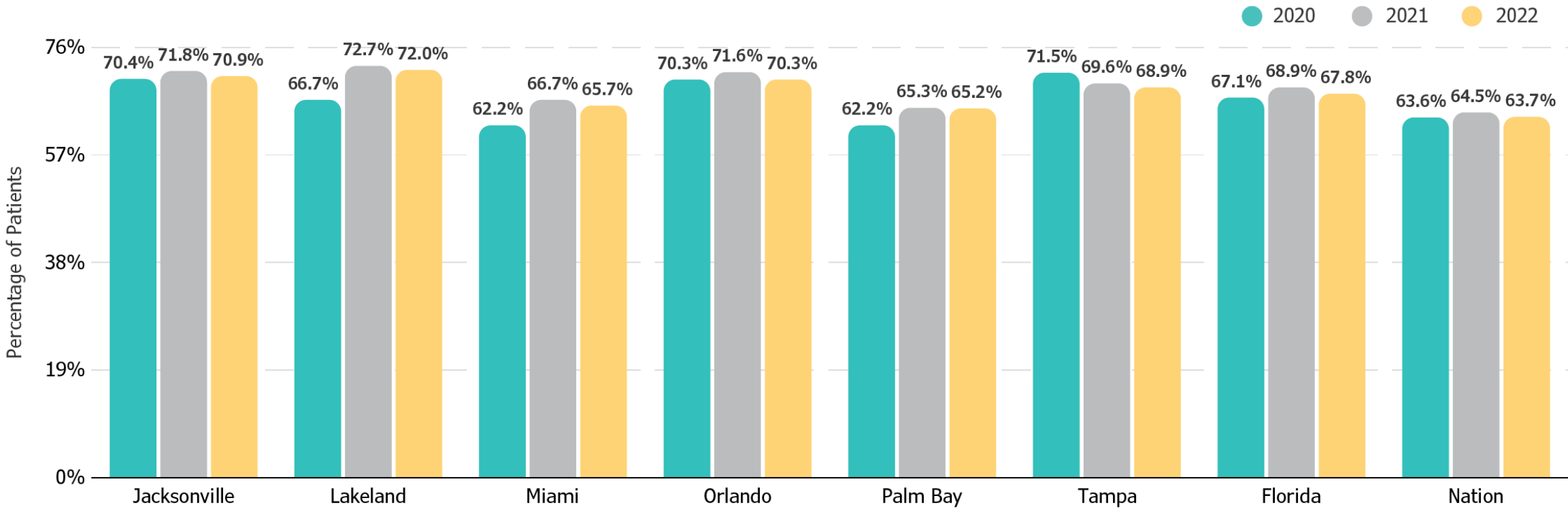
Reference: 1. IQVIA © 2023

[a] A comorbidity is a condition a patient with diabetes may also have, which may not be directly related to the diabetes. Comorbidities were narrowed down to a subset of conditions which are typically present in patients with diabetes. Comorbidities of diabetes include, but are not limited to, depression, hyperlipidemia, hypertension, obesity and pneumonia.
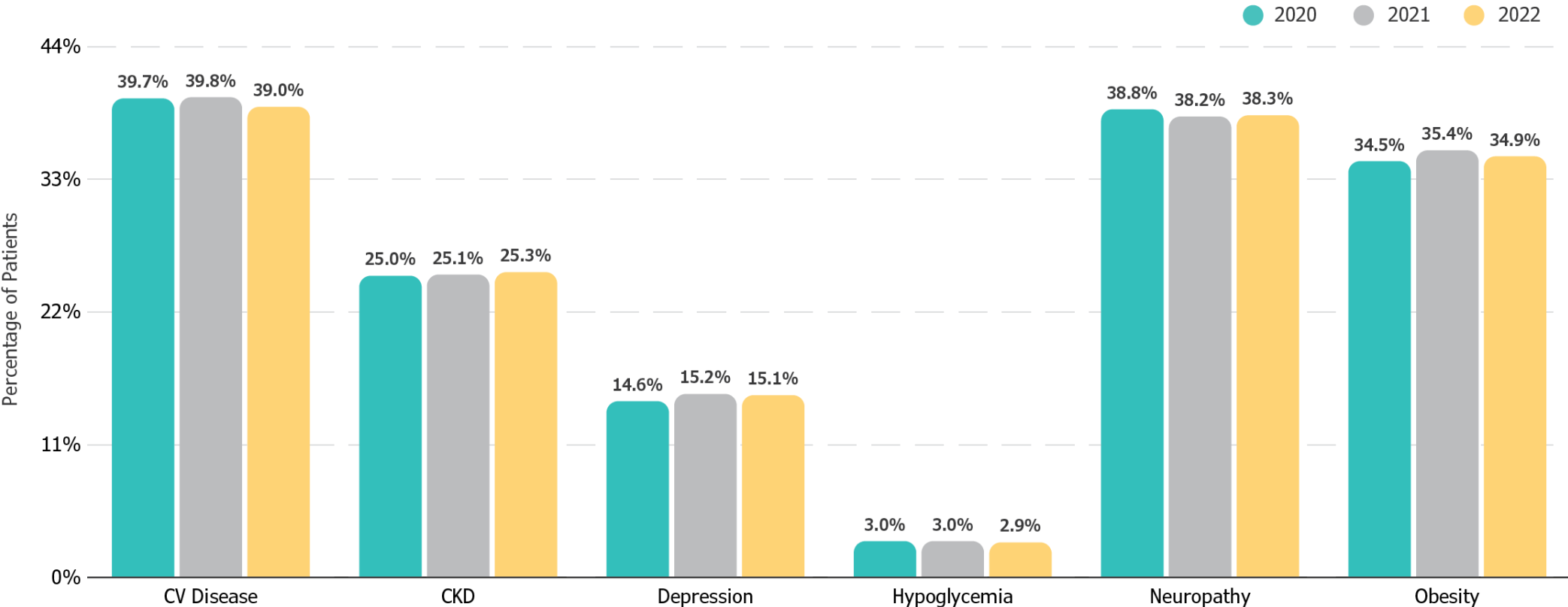
Percentage of Commercial Type 2 Diabetes Patients With ≥2 Complications, 2020–2022[1,b]

● 2020 ● 2021 ● 2022

	2020	2021	2022
Jacksonville	56.4%	58.1%	59.1%
Lakeland	58.4%	59.7%	59.0%
Miami	53.0%	56.3%	55.9%
Orlando	55.8%	59.0%	58.9%
Palm Bay	49.5%	53.8%	53.6%
Tampa	59.8%	57.6%	57.6%
Florida	56.0%	57.5%	57.2%
Nation	46.6%	47.8%	47.6%

Percentage of Patients
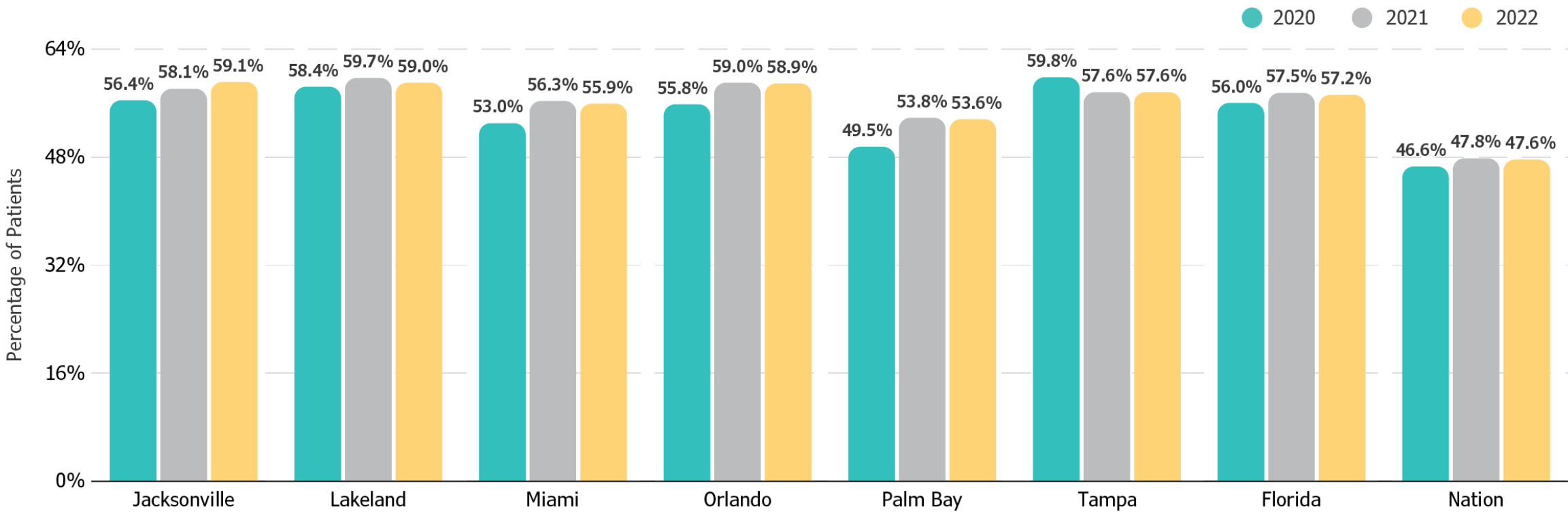
Reference: 1. IQVIA © 2023

[b] A complication is defined as a patient condition caused by diabetes. Complications of diabetes include, but are not limited to, atherosclerotic cardiovascular disease (ASCVD), cardiovascular (CV) disease, chronic kidney disease (CKD), congestive heart failure, diabetic ketoacidosis (DKA), end-stage renal disease (ESRD), hyperglycemia, hypoglycemia, myocardial infarction (MI), nephropathy, neuropathy, peripheral artery disease (PAD), retinopathy, and stroke. ASCVD includes patients with acute coronary syndromes (ACS), MI, stroke, and other cardiovascular diseases.

MAT-US-2308077-v1.0-09/2023

Percentage of Commercial Type 2 Diabetes Patients With Various Co-Occurring Conditions, Florida, 2020–2022[1,c]

Legend: ● 2020 ● 2021 ● 2022

Condition	2020	2021	2022
CV Disease	39.7%	39.8%	39.0%
CKD	25.0%	25.1%	25.3%
Depression	14.6%	15.2%	15.1%
Hypoglycemia	3.0%	3.0%	2.9%
Neuropathy	38.8%	38.2%	38.3%
Obesity	34.5%	35.4%	34.9%

Y-axis: Percentage of Patients (0%, 11%, 22%, 33%, 44%)

Reference: 1. IQVIA © 2023

c A co-occurring condition is a condition a patient with diabetes may also have, which may or may not be directly related to the diabetes. Co-occurring conditions were narrowed down to a subset of conditions, including, but not limited to, atherosclerotic cardiovascular disease (ASCVD; includes patients with acute coronary syndromes, myocardial infarction, stroke, and other cardiovascular conditions), chronic kidney disease (CKD), COVID-19, depression, gastrointestinal (GI) symptoms, congestive heart failure, hyperglycemia, hypoglycemia, obesity, peripheral artery disease (PAD), and stroke.

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Percentage of Commercial Type 2 Diabetes Patients Receiving Various Services, 2020–2022[1]

MARKET	A1c Test[a]			Blood Glucose Test			Ophthalmologic Exam			Serum Cholesterol Test			Urine Microalbumin Test		
	2020	2021	2022	2020	2021	2022	2020	2021	2022	2020	2021	2022	2020	2021	2022
Jacksonville	76.9%	81.8%	82.3%	79.9%	84.5%	84.8%	41.0%	41.2%	38.5%	63.7%	68.5%	68.1%	32.5%	35.2%	34.7%
Lakeland	73.8	82.5	84.6	79.5	83.3	84.3	51.4	53.1	55.0	65.2	68.1	69.1	36.3	35.5	37.5
Miami	72.3	79.0	80.5	77.4	81.9	83.1	46.5	46.0	47.0	62.1	66.6	67.3	30.6	32.8	33.0
Orlando	76.6	81.4	83.2	80.7	82.2	82.7	41.0	48.6	53.3	65.8	66.4	66.9	33.7	33.2	33.8
Palm Bay	74.8	79.8	79.2	81.0	84.0	83.6	43.4	48.7	49.5	66.5	68.5	68.1	34.9	35.2	35.2
Tampa	78.8	81.5	81.9	82.9	84.8	85.3	50.9	53.1	53.7	69.2	70.5	70.2	38.8	37.5	37.3
Florida	74.7	79.8	80.9	79.2	82.7	83.5	46.1	47.7	48.7	64.3	67.6	67.9	33.0	34.1	34.3
NATION	80.0%	83.2%	83.5%	83.9%	86.5%	86.7%	40.1%	42.3%	42.6%	70.0%	72.9%	72.7%	41.8%	43.9%	44.0%

[a] The A1c test measures the average blood glucose over the past 3 months. Figures reflect the percentage of diabetes patients who have had at least one A1c test in a given year.

Percentage of Commercial Type 2 Diabetes Patients, by Setting, 2020–2022[1]

MARKET	Emergency Department			Inpatient			Office/Clinic			TeleHealth		
	2020	2021	2022	2020	2021	2022	2020	2021	2022	2020	2021	2022
Jacksonville	14.0%	14.5%	16.0%	19.0%	17.7%	19.4%	81.0%	79.9%	78.4%	8.2%	7.4%	8.1%
Lakeland	19.1	18.9	19.0	13.3	12.1	11.7	79.8	80.9	83.3	6.3	8.6	7.0
Miami	17.3	18.8	19.8	12.8	14.5	14.4	79.5	78.0	79.1	12.8	11.0	11.0
Orlando	21.3	19.4	17.3	12.9	11.5	10.6	81.3	81.2	84.2	12.3	10.0	10.7
Palm Bay	16.1	16.1	16.6	15.9	15.6	14.8	84.4	83.8	84.5	12.0	8.4	8.1
Tampa	15.3	16.4	17.6	13.3	13.2	13.1	76.7	74.0	77.6	10.9	8.5	8.7
Florida	**17.4**	**18.3**	**18.8**	**14.7**	**15.0**	**14.8**	**80.5**	**79.0**	**80.4**	**11.0**	**9.1**	**9.0**
NATION	**18.3%**	**18.3%**	**18.2%**	**12.8%**	**12.6%**	**12.0%**	**79.0%**	**79.0%**	**79.6%**	**16.1%**	**11.8%**	**11.2%**

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Number of Encounters per Commercial Type 2 Diabetes Patient per Year, Overall vs. With Various Co-Occurring Conditions, 2022[1,b,c]

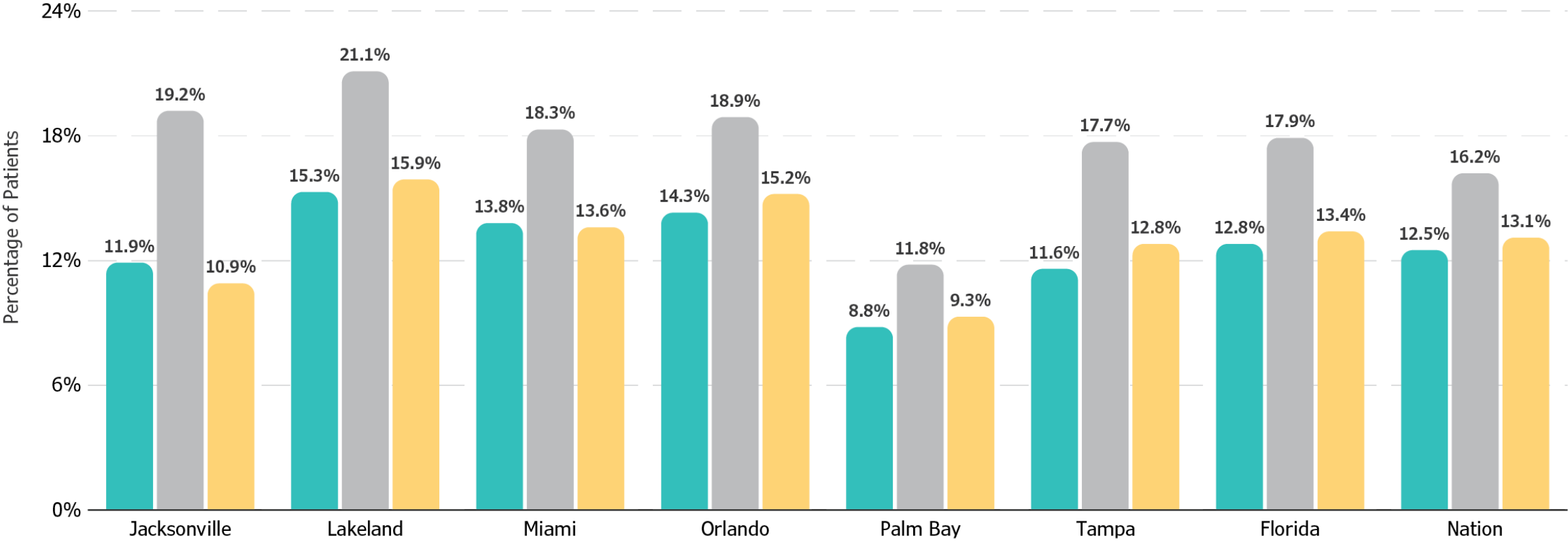| MARKET	Overall	w/ CV Disease	w/ Depression	w/ Hypoglycemia	w/ Obesity
Jacksonville	11.6	17.2	18.5	25.5	14.0
Lakeland	8.6	11.1	10.5	14.9	10.5
Miami	11.5	16.1	18.5	23.2	13.5
Orlando	8.0	10.2	10.0	15.1	9.2
Palm Bay	11.5	16.5	16.6	22.0	13.4
Tampa	8.2	10.5	11.1	13.9	10.1
Florida	**10.5**	**14.4**	**14.8**	**20.2**	**12.2**
NATION	**11.4**	**17.6**	**17.8**	**22.2**	**14.1**

Reference: 1. IQVIA © 2023

[b] Figures reflect the total number of provider encounters by Type 2 diabetes patients over the year shown within the given geography, divided by the total number of patients within that geography.

[c] A co-occurring condition is a condition a patient with diabetes may also have, which may or may not be directly related to the diabetes. Co-occurring conditions were narrowed down to a subset of conditions, including, but not limited to, atherosclerotic cardiovascular disease (ASCVD; includes patients with acute coronary syndromes, myocardial infarction, stroke, and other cardiovascular conditions), chronic kidney disease (CKD), COVID-19, depression, gastrointestinal (GI) symptoms, congestive heart failure, hyperglycemia, hypoglycemia, obesity, peripheral artery disease (PAD), and stroke.

MAT-US-2308077-v1.0-09/2023

Distribution of Type 2 Diabetes Patients, by A1c Level Range and Payer, 2022[1,a]

MARKET	≤7.0%			7.1–7.9%			8.0–9.0%			>9.0%		
	Comm. Ins.	Medicare	Medicaid	Comm. Ins.	Medicare	Medicaid	Comm. Ins.	Medicare	Medicaid	Comm. Ins.	Medicare	Medicaid
Jacksonville	59.2%	64.3%	55.2%	17.6%	17.5%	15.8%	11.3%	9.8%	12.7%	11.9%	8.4%	16.3%
Lakeland	55.1	62.2	52.9	18.0	18.5	15.7	11.6	9.8	11.3	15.3	9.5	20.1
Miami	57.0	68.3	55.3	18.1	16.4	15.8	11.1	8.4	11.5	13.8	6.9	17.4
Orlando	55.3	64.0	52.9	18.6	17.9	16.0	11.7	9.9	12.6	14.3	8.2	18.5
Palm Bay	64.5	68.7	60.4	17.3	16.3	16.7	9.4	8.2	8.3	8.8	6.8	14.6
Tampa	59.5	70.7	54.4	18.1	16.6	16.2	10.8	7.6	11.0	11.6	5.1	18.4
Florida	**58.1**	**68.3**	**54.9**	**18.1**	**16.8**	**16.0**	**11.0**	**8.4**	**11.6**	**12.8**	**6.5**	**17.5**
NATION	**58.2%**	**65.0%**	**53.1%**	**18.4%**	**17.5%**	**17.2%**	**11.0%**	**9.3%**	**11.8%**	**12.5%**	**8.2%**	**17.8%**

Reference 1. IQVIA © 2023

Percentage of Commercial Type 2 Diabetes Patients With an A1c Level >9.0%, Overall vs. With Claim in Selected Settings, 2022[1,a]

Legend: ● Overall ● w/ Emergency Department Claims ● w/ Telehealth Claims

Jacksonville: Overall 11.9%, w/ Emergency Department Claims 19.2%, w/ Telehealth Claims 10.9%
Lakeland: Overall 15.3%, w/ Emergency Department Claims 21.1%, w/ Telehealth Claims 15.9%
Miami: Overall 13.8%, w/ Emergency Department Claims 18.3%, w/ Telehealth Claims 13.6%
Orlando: Overall 14.3%, w/ Emergency Department Claims 18.9%, w/ Telehealth Claims 15.2%
Palm Bay: Overall 8.8%, w/ Emergency Department Claims 11.8%, w/ Telehealth Claims 9.3%
Tampa: Overall 11.6%, w/ Emergency Department Claims 17.7%, w/ Telehealth Claims 12.8%
Florida: Overall 12.8%, w/ Emergency Department Claims 17.9%, w/ Telehealth Claims 13.4%
Nation: Overall 12.5%, w/ Emergency Department Claims 16.2%, w/ Telehealth Claims 13.1%

Y-axis: Percentage of Patients

Reference 1. IQVIA © 2023

a The A1c test measures the average blood glucose over the past 3 months. Figures reflect the percentage of diabetes patients who have had at least one A1c test in a given year.

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Percentage of Commercial Type 2 Diabetes Patients Receiving Long-Acting Basal Category 1 vs. Category 2, With an A1c Level ≤7.0% or >9.0%, 2020 and 2022[1,a]

MARKET	≤7.0%				>9.0%			
	Category 1		Category 2		Category 1		Category 2	
	2020	2022	2020	2022	2020	2022	2020	2022
Jacksonville	28.1%	30.1%	28.5%	34.4%	30.0%	27.6%	28.2%	22.6%
Lakeland	26.6	29.1	23.2	31.8	31.6	35.9	28.8	25.8
Miami	23.5	28.5	25.1	29.6	34.0	31.3	29.5	25.7
Orlando	25.5	26.4	28.3	28.6	31.7	31.8	29.6	24.8
Palm Bay	29.1	36.6	35.0	36.8	30.0	21.8	24.4	21.3
Tampa	29.4	31.8	28.7	32.5	27.3	26.6	25.7	23.2
Florida	**26.3**	**30.1**	**27.7**	**31.5**	**30.9**	**29.1**	**27.8**	**24.5**
NATION	**27.1%**	**30.3%**	**27.0%**	**31.6%**	**30.5%**	**28.6%**	**28.1%**	**24.7%**

Reference 1. IQVIA © 2023

NOTE: "Category 1" refers to long-acting basal insulins approved through 2014 and follow-on long-acting insulins approved after 2014. "Category 2" refers to non-follow-on long-acting basal insulins approved in or after 2015.

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Professional Charges per Commercial Type 2 Diabetes Patient per Year, by Setting, 2021–2022[1,a]

MARKET	Emergency Department		Inpatient		Outpatient		Office/Clinic	
	2021	2022	2021	2022	2021	2022	2021	2022
Jacksonville	$2,381	$2,625	$4,923	$4,717	$2,132	$2,097	$2,593	$2,546
Lakeland	3,056	2,989	4,019	4,636	1,819	1,898	1,619	1,654
Miami	2,778	2,759	4,841	4,731	2,099	1,988	2,426	2,681
Orlando	2,684	2,808	4,377	4,453	1,956	1,908	1,581	1,637
Palm Bay	1,917	1,967	3,698	3,739	1,529	1,439	2,884	3,016
Tampa	2,122	2,111	4,323	4,349	2,186	2,200	1,754	1,796
Florida	**2,562**	**2,577**	**4,467**	**4,449**	**2,062**	**2,014**	**2,219**	**2,309**
NATION	**$1,908**	**$1,919**	**$4,646**	**$4,784**	**$1,843**	**$1,888**	**$2,437**	**$2,572**

Reference: 1. IQVIA © 2023

a Professional charges are those generated by the providers delivering care to patients with diabetes in various settings.

MAT-US-2308077-v1.0-09/2023

Professional Inpatient Charges per Type 2 Diabetes Patient per Year, by Payer, 2022[1,a]

MARKET	Commercial Insurance	Medicare	Medicaid
Jacksonville	$4,717	$6,930	$5,113
Lakeland	4,636	5,274	5,255
Miami	4,731	6,587	5,507
Orlando	4,453	6,405	5,785
Palm Bay	3,739	5,267	5,602
Tampa	4,349	5,404	5,518
Florida	4,449	5,885	5,553
NATION	$4,784	$5,371	$5,674

Reference: 1. IQVIA © 2023

[a] Professional charges are those generated by the providers delivering care to patients with diabetes in various settings.

Professional Emergency Department Charges per Commercial Type 2 Diabetes Patient per Year, Overall vs. With Various Co-Occurring Conditions, 2022[1,a,b]

	Overall	w/ CV Disease	w/ Depression	w/ Hypoglycemia	w/ Neuropathy	w/ Obesity
Jacksonville	$2,625	$2,964	$3,251	$4,260	$3,010	$2,844
Lakeland	2,989	3,840	3,423	4,524	3,675	3,185
Miami	2,759	3,227	3,657	4,500	3,204	3,052
Orlando	2,808	3,154	3,340	4,161	3,109	2,935
Palm Bay	1,967	2,335	2,317	2,815	2,373	1,919
Tampa	2,111	2,410	2,582	3,024	2,416	2,517
Florida	**2,577**	**2,966**	**3,215**	**3,921**	**2,955**	**2,861**
NATION	**$1,919**	**$2,241**	**$2,311**	**$2,900**	**$2,216**	**$2,043**

Reference: 1. IQVIA © 2023

a Professional charges are those generated by the providers delivering care to patients with diabetes in various settings.

b A co-occurring condition is a condition a patient with diabetes may also have, which may or may not be directly related to the diabetes. Co-occurring conditions were narrowed down to a subset of conditions, including, but not limited to, atherosclerotic cardiovascular disease (ASCVD; includes patients with acute coronary syndromes, myocardial infarction, stroke, and other cardiovascular conditions), chronic kidney disease (CKD), COVID-19, depression, gastrointestinal (GI) symptoms, congestive heart failure, hyperglycemia, hypoglycemia, obesity, peripheral artery disease (PAD), and stroke.

MAT-US-2308077-v1.0-09/2023

Percentage of Commercial Type 2 Diabetes Patients Receiving Various Insulin and Combination Therapies, 2021–2022[1]

MARKET	Long-Acting Basal Category 1		Long-Acting Basal Category 2		Rapid-/Short-Acting Insulin		Fixed Ratio (Long-Acting Insulin/ GLP-1 RA)		Free Ratio (Variable Long-Acting Insulin + GLP-1 RA)	
	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022
Jacksonville	14.7%	14.5%	8.9%	9.0%	16.9%	17.3%	1.1%	1.0%	9.6%	10.8%
Lakeland	16.5	15.6	7.3	7.8	12.6	12.8	0.6	0.6	8.1	9.5
Miami	14.4	13.3	5.8	5.9	11.3	10.6	0.9	1.0	6.5	7.0
Orlando	14.3	13.8	6.2	6.2	11.5	11.2	0.8	1.1	7.2	7.8
Palm Bay	10.2	9.2	10.4	10.1	13.5	13.0	0.9	0.8	8.2	8.8
Tampa	14.8	13.5	7.1	7.3	12.8	12.4	0.7	0.6	7.5	8.3
Florida	**14.2**	**13.3**	**7.0**	**7.1**	**12.2**	**11.8**	**0.8**	**0.9**	**7.4**	**8.2**
NATION	**15.3%**	**14.1%**	**7.1%**	**7.4%**	**12.4%**	**12.2%**	**0.8%**	**0.7%**	**8.7%**	**9.6%**

Percentage of Commercial Type 2 Diabetes Patients Receiving Long-Acting Basal Insulin Category 1 vs. Category 2, by Co-Occurring Condition, 2022[1,a]

MARKET	CV Disease		Depression		Hypoglycemia		Neuropathy		Obesity	
	Cat. 1	Cat. 2	Cat. 1	Cat. 2	Cat. 1	Cat. 2	Cat. 1	Cat. 2	Cat. 1	Cat. 2
Jacksonville	32.3%	25.2%	8.9%	6.0%	3.8%	3.7%	37.9%	33.4%	33.8%	35.8%
Lakeland	29.2	31.0	13.3	8.9	5.8	4.6	40.8	44.8	48.1	49.9
Miami	31.0	28.6	9.6	7.4	3.7	3.6	35.5	31.8	36.1	34.4
Orlando	30.1	23.7	11.2	9.5	4.0	5.6	35.4	32.2	34.5	30.4
Palm Bay	34.3	25.6	8.8	8.2	3.0	2.9	39.2	34.3	30.6	29.5
Tampa	32.4	28.5	12.4	11.0	3.8	3.1	36.6	36.0	35.1	34.5
Florida	31.4	28.1	10.6	8.9	4.0	4.0	36.3	33.9	35.5	34.9
NATION	27.0%	24.3%	10.8%	10.0%	4.0%	3.9%	32.8%	31.3%	28.9%	30.5%

Reference: 1. IQVIA © 2023

a A co-occurring condition is a condition a patient with diabetes may also have, which may or may not be directly related to the diabetes. Co-occurring conditions were narrowed down to a subset of conditions, including, but not limited to, atherosclerotic cardiovascular disease (ASCVD; includes patients with acute coronary syndromes, myocardial infarction, stroke, and other cardiovascular conditions), chronic kidney disease (CKD), COVID-19, depression, gastrointestinal (GI) symptoms, congestive heart failure, hyperglycemia, hypoglycemia, obesity, peripheral artery disease (PAD), and stroke.

Percentage of Commercial Type 2 Diabetes Patients Receiving Various Non-Insulin Antidiabetic Therapies, 2021–2022[1]

MARKET	Biguanides		GLP-1 RAs		DPP-4 Inhibitors		Insulin Sensitizing Agents		SGLT-2 Inhibitors	
	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022
Jacksonville	58.3%	56.5%	29.1%	36.0%	9.0%	7.7%	12.2%	12.0%	21.8%	24.8%
Lakeland	63.4	62.3	26.0	32.6	8.7	6.9	8.2	8.4	20.2	22.5
Miami	71.5	71.8	19.1	24.2	10.2	8.0	5.3	5.5	17.2	19.4
Orlando	66.6	67.7	23.2	27.3	8.7	7.2	7.9	7.7	18.2	20.0
Palm Bay	62.7	60.8	25.0	31.3	8.1	6.8	6.0	6.4	23.0	25.9
Tampa	65.5	65.5	23.5	30.0	9.1	7.8	6.9	7.0	19.7	22.0
Florida	66.3	66.3	22.7	28.5	9.4	7.7	6.8	6.9	18.2	20.7
NATION	68.5%	67.3%	25.7%	32.6%	9.4%	7.9%	6.9%	6.7%	20.1%	23.1%

Reference: 1. IQVIA © 2023

Persistency: Commercial Type 2 Diabetes Patients Receiving Various Non-Insulin Antidiabetic Therapies, Florida, 2022[1]
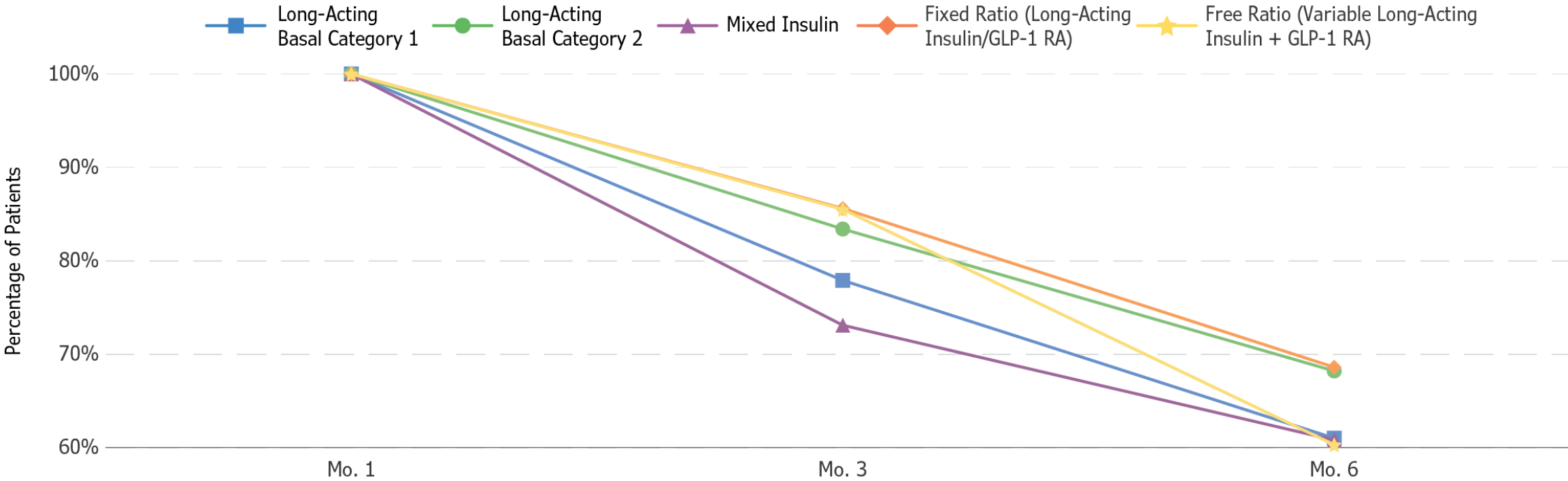
Reference: 1. IQVIA © 2023

NOTE: "Persistency" measures whether patients maintain their prescribed therapy. It is calculated by identifying patients who filled a prescription for the reported drug class in the six months prior to the reported year, and then tracking prescription fills for those same patients in each of the months in the current reported year. If patients fill a prescription in a month, they are reported among the patients who have continued or restarted on therapy. Continued means that the patient has filled the drug group in each of the preceding months. Restarted means that the patient did not fill in one or more of the preceding months. Continuing and restarting patients are reported together. Persistency is tracked for patients who are new to therapy (those who have not filled the therapy in question in the six months prior to their first fill of the study period). "Category 1" refers to long-acting basal insulins approved through 2014 and follow-on long-acting insulins approved after 2014. "Category 2" refers to non-follow-on long-acting basal insulins approved in or after 2015. "Fixed ratio (long-acting insulin/GLP-1 RA)" refers to the two therapies combined in a single product. "Free ratio (variable long-acting insulin + GLP-1 RA)" refers to the two therapies taken separately and concurrently.

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Persistency: Commercial Type 2 Diabetes Patients Receiving Various Insulin and Combination Therapies, Florida, 2022[1]
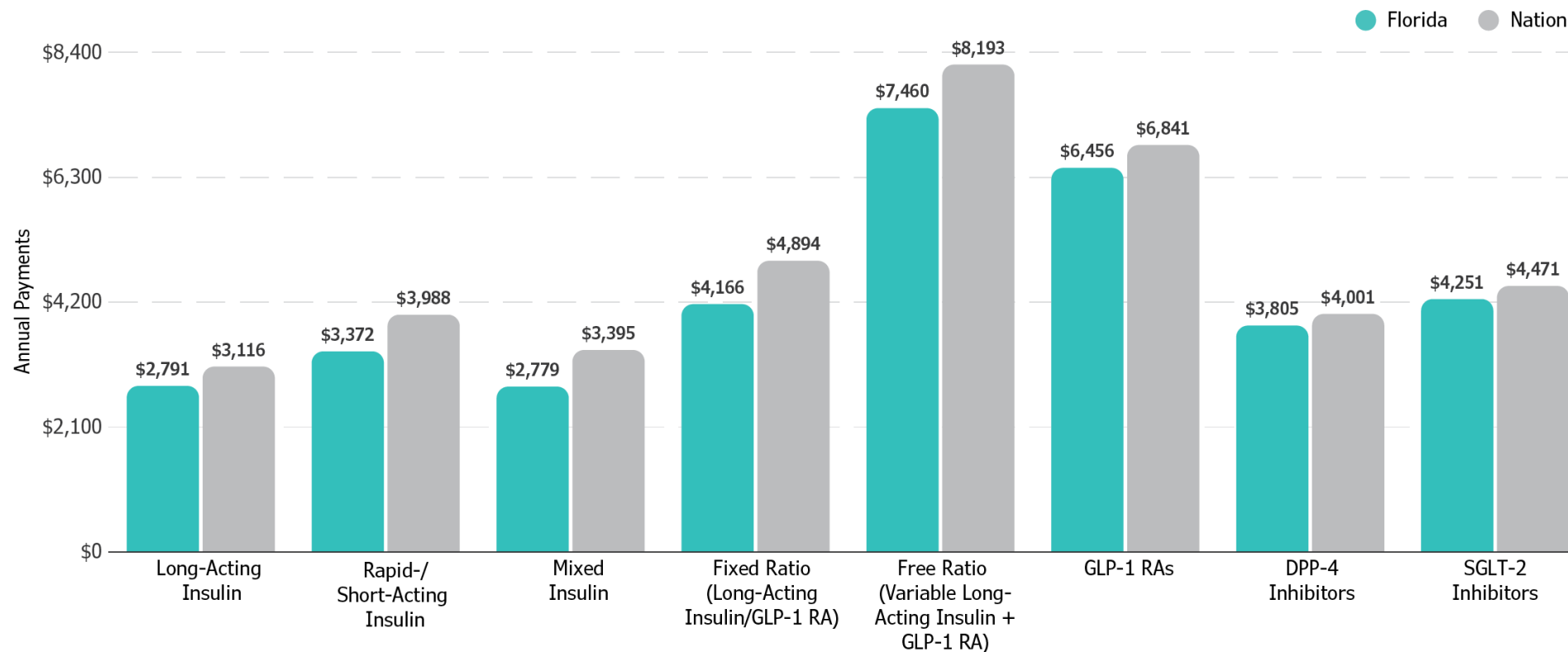

Reference: 1. IQVIA © 2023

NOTE: "Persistency" measures whether patients maintain their prescribed therapy. It is calculated by identifying patients who filled a prescription for the reported drug class in the six months prior to the reported year, and then tracking prescription fills for those same patients in each of the months in the current reported year. If patients fill a prescription in a month, they are reported among the patients who have continued or restarted on therapy. Continued means that the patient has filled the drug group in each of the preceding months. Restarted means that the patient did not fill in one or more of the preceding months. Continuing and restarting patients are reported together. Persistency is tracked for patients who are new to therapy (those who have not filled the therapy in question in the six months prior to their first fill of the study period). "Category 1" refers to long-acting basal insulins approved through 2014 and follow-on long-acting insulins approved after 2014. "Category 2" refers to non-follow-on long-acting basal insulins approved in or after 2015. "Fixed ratio (long-acting insulin/GLP-1 RA)" refers to the two therapies combined in a single product. "Free ratio (variable long-acting insulin + GLP-1 RA)" refers to the two therapies taken separately and concurrently.
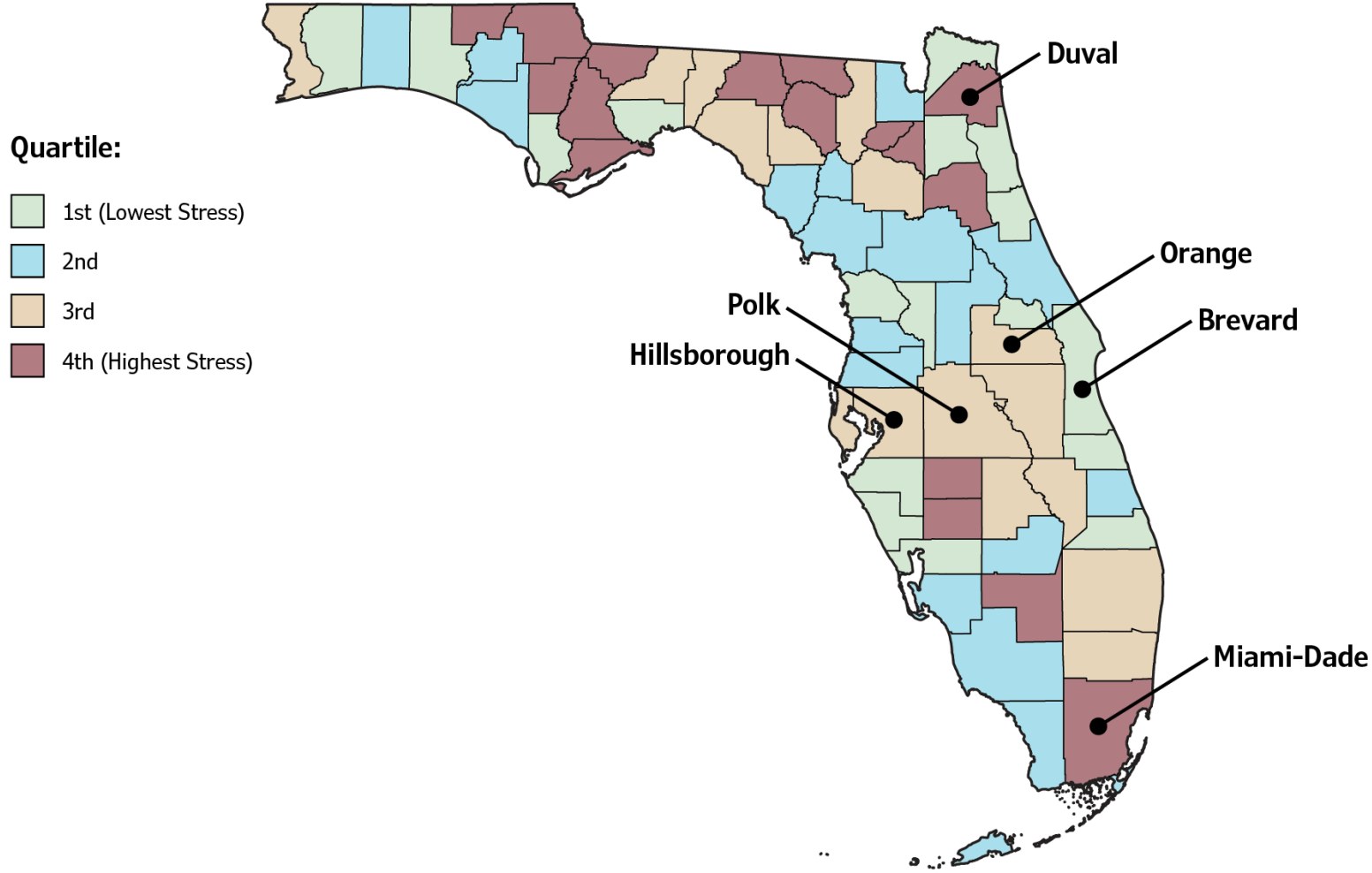
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Annual Payments per Commercial Type 2 Diabetes Patient for Various Insulin and Non-Insulin Antidiabetic Therapies, 2022[1,a]

Legend: ● Florida ● Nation

- Long-Acting Insulin: Florida $2,791, Nation $3,116
- Rapid-/Short-Acting Insulin: Florida $3,372, Nation $3,988
- Mixed Insulin: Florida $2,779, Nation $3,395
- Fixed Ratio (Long-Acting Insulin/GLP-1 RA): Florida $4,166, Nation $4,894
- Free Ratio (Variable Long-Acting Insulin + GLP-1 RA): Florida $7,460, Nation $8,193
- GLP-1 RAs: Florida $6,456, Nation $6,841
- DPP-4 Inhibitors: Florida $3,805, Nation $4,001
- SGLT-2 Inhibitors: Florida $4,251, Nation $4,471

(Y-axis: Annual Payments — $0, $2,100, $4,200, $6,300, $8,400)

Reference: 1. IQVIA © 2023

a Figures reflect the per-patient yearly payments for diabetes patients receiving a particular type of therapy. These are the actual amounts paid by the insurer and patient for such prescriptions.

NOTE: "Persistency" measures whether patients maintain their prescribed therapy. It is calculated by identifying patients who filled a prescription for the reported drug class in the six months prior to the reported year, and then tracking prescription fills for those same patients in each of the months in the current reported year. If patients fill a prescription in a month, they are reported among the patients who have continued or restarted on therapy. Continued means that the patient has filled the drug group in each of the preceding months. Restarted means that the patient did not fill in one or more of the preceding months. Continuing and restarting patients are reported together. Persistency is tracked for patients who are new to therapy (those who have not filled the therapy in question in the six months prior to their first fill of the study period). "Category 1" refers to long-acting basal insulins approved through 2014 and follow-on long-acting insulins approved after 2014. "Category 2" refers to non-follow-on long-acting basal insulins approved in or after 2015. "Fixed ratio (long-acting insulin/GLP-1 RA)" refers to the two therapies combined in a single product. "Free ratio (variable long-acting insulin + GLP-1 RA)" refers to the two therapies taken separately and concurrently.

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Combined Social Determinants of Health (SDoH) Stress in Florida, by County, 2021[1]

Quartile:
- 1st (Lowest Stress)
- 2nd
- 3rd
- 4th (Highest Stress)

Duval

Orange

Polk

Brevard

Hillsborough

Miami-Dade

References 1. U.S. Census Bureau, American Community Survey, Five-Year Estimate. © 2023

NOTE: Combined score represents a linear, equally weighted combination of county rankings for four SDoH elements: 1) percentage of population with income less than 150% of the federal poverty level; 2) percentage of households without a vehicle; 3) percentage of owner-occupied housing units (reversed); and 4) percentage of population aged 25+ who have completed high school (reversed). A higher combined score represents higher levels of stress with respect to these SDoH elements.

Overlap of Provider Access (per 100,000 Population) and Fixed Broadband Internet Scarcity, by County, 2020–2022[2,3]
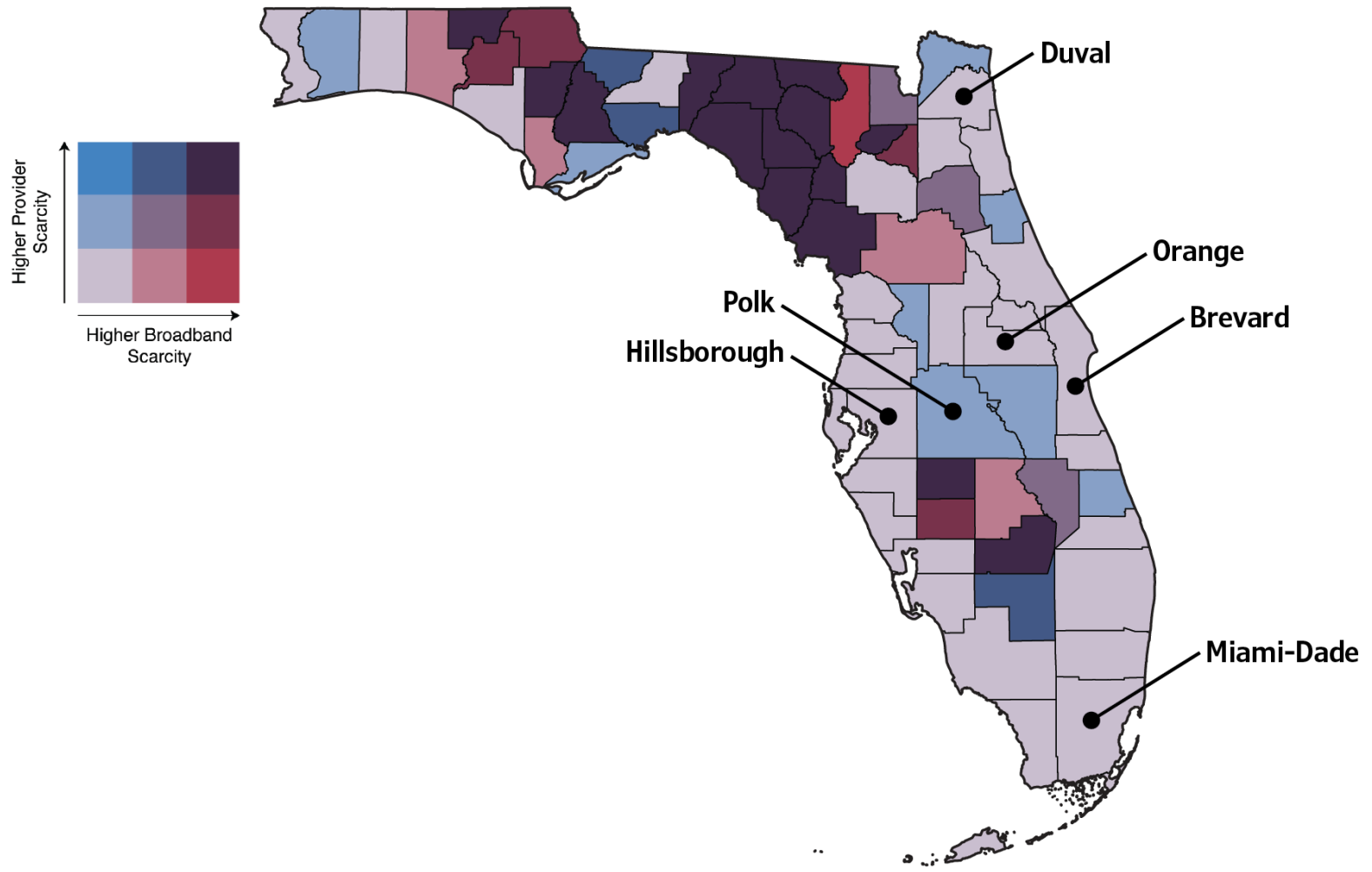
References 2. Health Resources and Services Administration © 2021 **3.** Federal Communications Commission © 2022

NOTE: Provider access data for medical doctors and doctors of osteopathy are for 2020; nurse practitioners and physician assistants data are for 2021. Fixed broadband Internet availability data are for 2022.

Methodology

Unless otherwise specified, the data for this report are from IQVIA, and are generated out of health care professional (837p) and institutional (837i) insurance claims, representing nearly 13.9 million unique patients nationally in 2022 with a diagnosis of Type 2 diabetes (ICD-10 codes E08, E09, E11, E13). Data from physicians of all specialties and from all hospital types are included. Substate markets represent core-based statistical areas (CBSAs).

IQVIA also gathers data on prescription activity from the National Council for Prescription Drug Programs (NCPDP). These data account for some 4 billion prescription claims annually, or more than 92% of the retail prescription universe and 72% of the traditional and specialty mail order universe. These prescription data represent the sampling of prescription activity from a variety of sources, including retail chains, mass merchandisers, and pharmacy benefit managers. Cash, Medicaid, and third-party transactions are tracked. Data arriving into IQVIA are put through a rigorous process to ensure that data elements match to valid references, such as product codes, ICD-10 (diagnosis) and CPT-4 (procedure) codes, and provider and facility data.

Proprietary lab data derive from one of the largest independent commercial lab companies in the U.S. Patient information is de-identified, matched, and linked with other patient data assets (e.g., medical claims data). The most common attributes used are the de-identified patient ID, observation date, diagnosis, test name, test code, and test result.

Claims undergo a careful de-duplication process to ensure that when multiple, voided, or adjusted claims are assigned to a patient encounter, they are applied to the database, but only for a single, unique patient.

Through its patient encryption methods, IQVIA creates a unique, random numerical identifier for every patient, and then strips away all patient-specific health information that is protected under the Health Insurance Portability and Accountability Act (HIPAA). The identifier allows IQVIA to track disease-specific diagnosis and procedure activity across the various settings where patient care is provided (hospital inpatient, hospital outpatient, emergency rooms, clinics, doctors' offices, and pharmacies), while protecting the privacy of each patient.