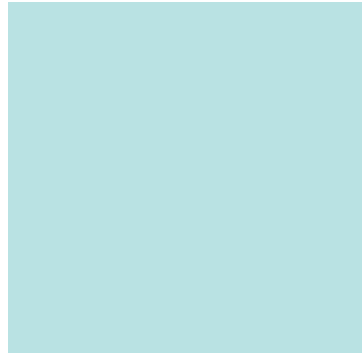


 **MANAGED CARE  
DIGEST SERIES®**



# DIABETES REPORT™ FLORIDA ALLIANCE FOR HEALTHCARE VALUE

*With a Focus on High-Risk Co-Occurring Conditions*

**Intended for use with payers, formulary committees, or other similar entities for the purposes of population-based drug selection, coverage, and/or reimbursement decision making.**

**10th Edition**

# FLORIDA ALLIANCE FOR HEALTHCARE VALUE DIABETES REPORT™

## INTRODUCTION

Sanofi U.S. (Sanofi), in conjunction with the Florida Alliance for Healthcare Value, is pleased to present the 10th edition of the **Florida Alliance for Healthcare Value Diabetes Report™** for 2024. This report provides an overview of pertinent demographic, laboratory, charge, and pharmacotherapy measures for Type 1 and Type 2 diabetes patients in key local markets in Florida, with a focus on how high-risk co-occurring conditions can impact diabetes care. The report also includes national benchmarks that can help providers and employers identify opportunities to better serve the needs of their patients. Publicly available data on disease prevalence; income; education; and access to vehicles, providers, and broadband internet offer insight into possible gaps around social determinants of health (SDoH).

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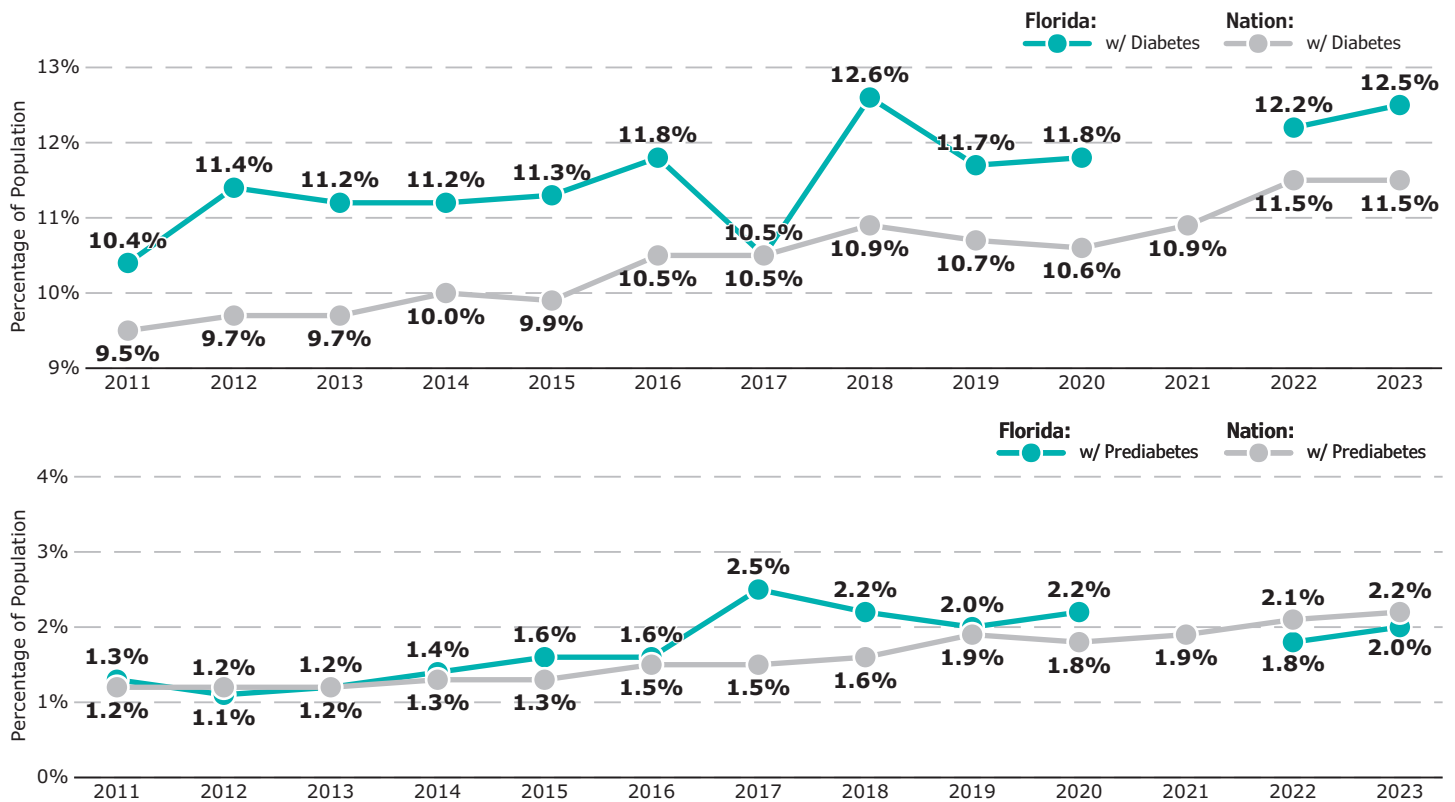
# EXECUTIVE SUMMARY

The **Florida Alliance for Healthcare Value Diabetes Report** offers a broad overview of the state of diabetes—with a focus on how co-occurring diagnoses such as cardiovascular (CV) disease, depression, hypoglycemia, neuropathy, and obesity impact care—in markets across Florida. The report provides state and national benchmarks for commercially insured patients (including comparison with their peers covered by Medicaid or Medicare) to identify potential gaps in care and reinforce positive trends. In select views, data on Type 1 diabetes patients has been included to provide insight into this condition. Current as of 2023 and spanning several years, the data in this report encompass nearly 872,000 patients with Type 1 diabetes and roughly 14.2 million unique patients nationally with Type 2 diabetes; Florida data captured nearly 65,000 patients with Type 1 diabetes and nearly 1.2 million with Type 2.

This year’s report provides several observations to help providers and employers better meet the needs of employees. For example:

- In 2023—as in 2022—Florida commercial patients with Type 2 diabetes were more likely to have multiple complications or comorbidities than their counterparts across the nation.
- The percentages of Florida commercial Type 2 diabetes patients with any of the profiled co-occurring conditions exceeded the U.S. averages in 2023. For chronic kidney disease, the gap was nearly six percentage points.
- The percentage of Florida commercial Type 1 or Type 2 diabetes patients with a poorly controlled A1c level (>9.0%) on their last test exceeded the U.S. rate in 2023.
- In Lakeland in 2023, lower percentages of commercial Type 2 diabetes patients received an A1c test, blood glucose test, ophthalmological exam, serum cholesterol test, or urine microalbumin exam vs. the national average.
- Duval and Miami-Dade counties demonstrated higher social determinant of health stresses vs. other Florida counties.

**Percentage of Adults Self-Reporting Diabetes or Prediabetes, 2011–2023<sup>1</sup>**

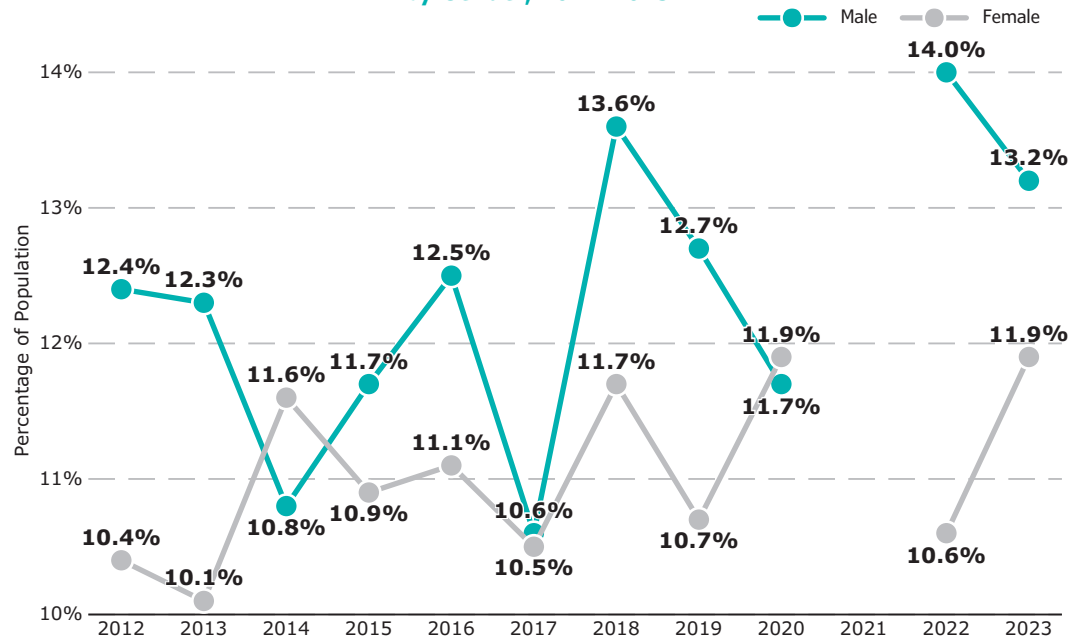


Reference: 1. Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System © 2024

NOTE: On pages 3–4, 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?” Data are crude prevalence and were unavailable for Florida for 2021.

# PATIENT DEMOGRAPHICS

Percentage of Florida Population Self-Reporting Diabetes, by Gender, 2012–2023<sup>1</sup>



## COMMERCIAL INSURERS COVER MORE THAN 50% OF FL DIABETES PATIENTS

In 2023, the majority of Florida Type 1 and Type 2 diabetes patients were covered by commercial insurers. In Jacksonville, Lakeland, and Orlando, the commercial portions of Type 2 diabetes patients were below 50% but still higher than those of Medicare or Medicaid. In Tampa, Medicaid covered 24.4% of Type 1 diabetes patients and just 8.5% of Type 2 diabetes patients.

Percentage of Diabetes Patients, by Payer, 2023<sup>2</sup>

MARKET	Commercial Insurance		Medicare		Medicaid	
	Type 1 Diabetes	Type 2 Diabetes	Type 1 Diabetes	Type 2 Diabetes	Type 1 Diabetes	Type 2 Diabetes
Jacksonville	58.5%	49.6%	29.7%	42.1%	10.7%	7.4%
Lakeland	54.3%	48.4%	29.4%	40.3%	15.5%	10.6%
Miami	60.2%	54.7%	25.2%	35.8%	13.4%	8.1%
Orlando	58.2%	47.9%	28.4%	38.0%	12.7%	13.7%
Palm Bay	62.2%	52.8%	30.2%	40.5%	6.8%	6.3%
Tampa	53.8%	54.7%	20.5%	35.6%	24.4%	8.5%
<b>Florida</b>	<b>57.5%</b>	<b>52.5%</b>	<b>26.9%</b>	<b>37.7%</b>	<b>14.6%</b>	<b>9.0%</b>
<b>NATION</b>	<b>57.3%</b>	<b>49.6%</b>	<b>22.9%</b>	<b>34.5%</b>	<b>18.5%</b>	<b>14.0%</b>

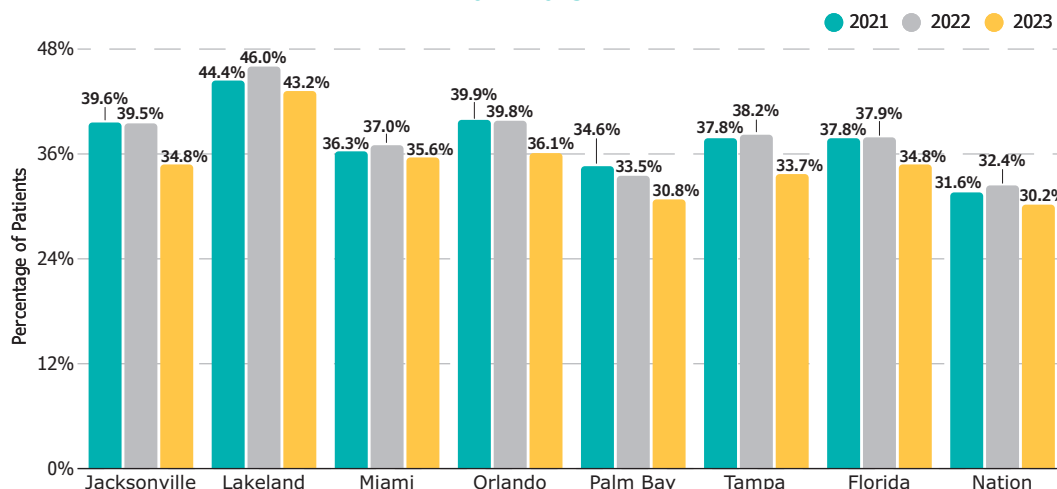
Distribution of Commercial Type 2 Diabetes Patients, by Age, 2022–2023<sup>2</sup>

MARKET	0–17		18–35		36–64		65–79		80+	
	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023
	Jacksonville	0.3%	0.3%	2.2%	2.2%	44.0%	43.9%	41.4%	41.2%	12.1%
Lakeland	0.3%	0.3%	2.4%	2.4%	44.4%	44.1%	40.2%	40.9%	12.7%	12.4%
Miami	0.2%	0.2%	1.7%	1.7%	39.3%	39.7%	41.4%	41.4%	17.4%	17.1%
Orlando	0.3%	0.2%	1.8%	1.9%	41.8%	40.2%	42.7%	43.8%	13.4%	13.9%
Palm Bay	0.2%	0.2%	1.6%	1.5%	37.2%	35.4%	43.6%	45.5%	17.5%	17.5%
Tampa	0.2%	0.2%	2.1%	2.5%	42.6%	49.4%	41.3%	36.3%	13.8%	11.7%
<b>Florida</b>	<b>0.2%</b>	<b>0.2%</b>	<b>1.8%</b>	<b>1.9%</b>	<b>40.3%</b>	<b>41.5%</b>	<b>42.3%</b>	<b>41.5%</b>	<b>15.3%</b>	<b>14.9%</b>
<b>NATION</b>	<b>0.2%</b>	<b>0.2%</b>	<b>2.3%</b>	<b>2.4%</b>	<b>46.2%</b>	<b>46.0%</b>	<b>39.2%</b>	<b>39.2%</b>	<b>12.1%</b>	<b>12.2%</b>

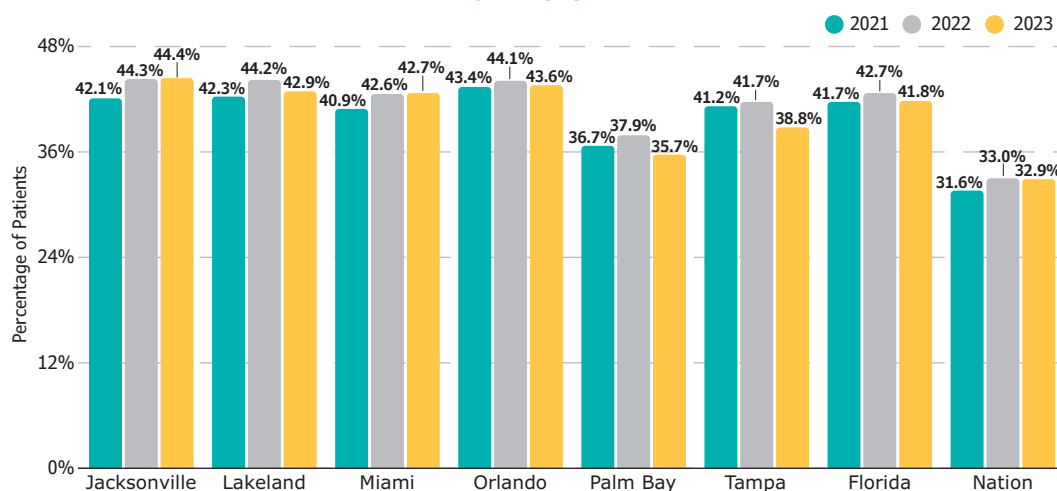
References: 1. Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System © 2024. 2. IQVIA © 2024.

NOTE: 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. Prevalence data for Florida for 2021 were not available.

### Percentage of Commercial Type 2 Diabetes Patients With ≥2 Comorbidities, 2021–2023<sup>1,a</sup>



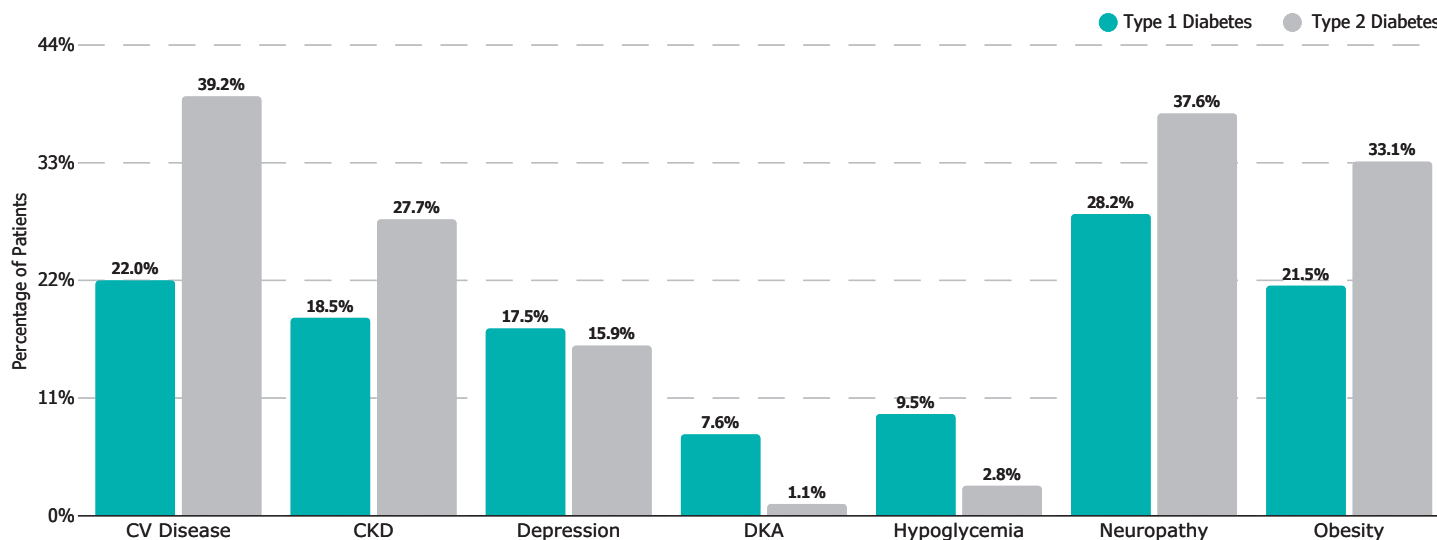
### Percentage of Commercial Type 2 Diabetes Patients With ≥2 Complications, 2021–2023<sup>1,b</sup>



## MULTIPLE COMPLICATIONS AND COMORBIDITIES AFFECT FL TYPE 2 DIABETES PATIENTS

In all of the profiled Florida markets, the percentages of commercially insured Type 2 diabetes patients with multiple comorbidities or complications exceeded those of the nation each year from 2021 to 2023. In Jacksonville, for example, 44.4% of commercial Type 2 diabetes patients had claims for two or more of the tracked complications, a percentage that exceeded the national rate by 11.5 percentage points in 2023. Furthermore, Florida commercial Type 2 diabetes patients were more apt than their peers nationally to have any of the six individual co-occurring conditions tracked that year. At 27.7%, the percentage of Florida commercial Type 2 diabetes patients with CKD exceeded that of the nation by 5.6 percentage points (nation data not shown).

### Percentage of Commercial Type 1 and Type 2 Diabetes Patients With Various Co-Occurring Conditions, Florida, 2023<sup>1,c</sup>



Reference: 1. IQVIA © 2024

<sup>a</sup> 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, asthma, atrial fibrillation/atrial flutter, depression, hyperlipidemia, hypertension, knee osteoarthritis, obesity, pneumonia, rheumatoid arthritis, and social determinants of health.  
<sup>b</sup> 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), gastrointestinal (GI) symptoms, 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 CV diseases.  
<sup>c</sup> 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, diabetic ketoacidosis (DKA), gastrointestinal (GI) symptoms, congestive heart failure, hyperglycemia, hypoglycemia, obesity, peripheral artery disease (PAD), and stroke.

# UTILIZATION

## Percentage of Commercial Type 1 (T1D) or Type 2 Diabetes (T2D) Patients Receiving Various Services, 2023<sup>1</sup>

MARKET	A1c Test <sup>a</sup>		Blood Glucose Test		Ophthalmologic Exam		Serum Cholesterol Test		Urine Microalbumin Test	
	T1D	T2D	T1D	T2D	T1D	T2D	T1D	T2D	T1D	T2D
Jacksonville	90.9%	82.9%	94.3%	85.6%	40.4%	37.9%	65.1%	70.1%	46.4%	35.8%
Lakeland	88.7%	84.4%	92.9%	85.8%	49.3%	53.9%	67.5%	71.3%	50.8%	40.8%
Miami	85.8%	83.8%	90.1%	85.5%	42.9%	48.4%	66.8%	72.2%	46.9%	40.1%
Orlando	88.2%	84.5%	91.1%	83.7%	46.4%	53.8%	67.9%	69.2%	49.2%	37.7%
Palm Bay	85.7%	78.9%	93.9%	84.3%	51.7%	50.3%	72.6%	70.1%	51.3%	38.3%
Tampa	89.9%	85.5%	93.3%	87.8%	45.0%	48.7%	70.0%	74.9%	51.8%	43.7%
<b>Florida</b>	<b>87.3%</b>	<b>83.6%</b>	<b>91.6%</b>	<b>85.4%</b>	<b>45.3%</b>	<b>48.4%</b>	<b>68.1%</b>	<b>71.7%</b>	<b>48.2%</b>	<b>39.3%</b>
<b>NATION</b>	<b>88.9%</b>	<b>85.0%</b>	<b>91.8%</b>	<b>88.0%</b>	<b>44.1%</b>	<b>43.2%</b>	<b>69.1%</b>	<b>74.9%</b>	<b>54.3%</b>	<b>46.8%</b>

## Percentage of Commercial Type 1 (T1D) or Type 2 Diabetes (T2D) Patients, by Setting, 2023<sup>1</sup>

MARKET	Emergency Department		Inpatient		Office/Clinic		Telehealth	
	T1D	T2D	T1D	T2D	T1D	T2D	T1D	T2D
Jacksonville	20.6%	21.6%	24.3%	27.5%	80.6%	78.8%	10.2%	7.9%
Lakeland	25.8%	19.3%	17.0%	15.5%	81.3%	87.0%	11.6%	8.2%
Miami	19.6%	22.0%	12.8%	16.0%	62.7%	81.6%	9.6%	10.8%
Orlando	27.9%	20.4%	17.0%	13.9%	83.3%	88.6%	14.2%	10.8%
Palm Bay	24.8%	20.5%	18.3%	15.7%	82.2%	87.5%	7.8%	6.6%
Tampa	23.7%	23.5%	15.9%	16.8%	67.8%	80.2%	10.1%	9.1%
<b>Florida</b>	<b>23.5%</b>	<b>22.9%</b>	<b>17.1%</b>	<b>17.6%</b>	<b>70.9%</b>	<b>83.1%</b>	<b>9.8%</b>	<b>9.2%</b>
<b>NATION</b>	<b>17.2%</b>	<b>19.4%</b>	<b>10.7%</b>	<b>13.0%</b>	<b>69.3%</b>	<b>81.3%</b>	<b>10.9%</b>	<b>9.6%</b>

## Number of Encounters per Commercial Type 2 Diabetes Patient per Year, Overall vs. With Various Co-Occurring Conditions, 2023<sup>1,b,c</sup>

MARKET	Overall	w/ CV Disease	w/ Depression	w/ Hypoglycemia	w/ Obesity
Jacksonville	13.1	19.2	20.2	27.2	15.5
Lakeland	11.4	15.4	16.0	20.1	13.1
Miami	12.8	18.8	20.1	22.2	15.4
Orlando	11.4	16.9	18.7	23.5	14.4
Palm Bay	15.1	23.5	24.6	33.4	18.2
Tampa	10.8	15.1	15.0	21.8	12.6
<b>Florida</b>	<b>13.4</b>	<b>19.2</b>	<b>22.1</b>	<b>28.8</b>	<b>15.9</b>
<b>NATION</b>	<b>12.8</b>	<b>20.4</b>	<b>20.5</b>	<b>26.4</b>	<b>15.9</b>

Reference: 1. IQVIA © 2024

<sup>a</sup> The A1c test measures how much glucose has been in the blood during the past 2-3 months. Figures reflect the percentage of diabetes patients who have had at least one A1c test in a given year.

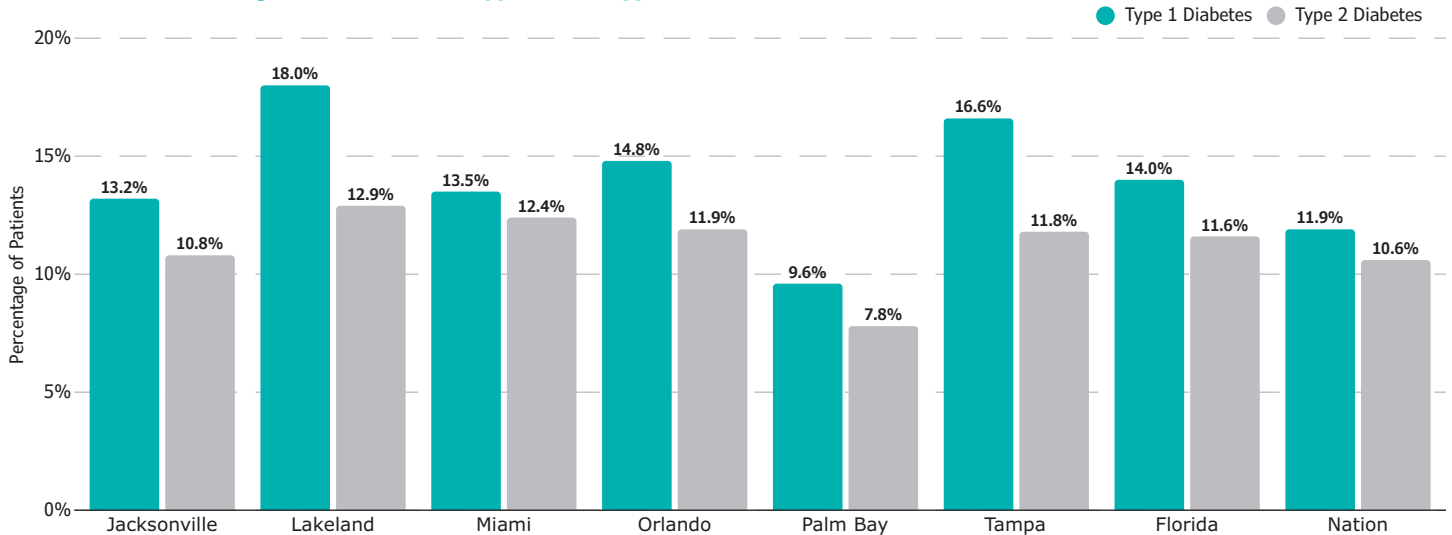
<sup>b</sup> Figures reflect the total number of provider encounters by Type 2 diabetes patients over the year shown within the given geography, divided by the total number of patients within that geography.

<sup>c</sup> 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, diabetic ketoacidosis (DKA), gastrointestinal (GI) symptoms, congestive heart failure, hyperglycemia, hypoglycemia, obesity, peripheral artery disease (PAD), and stroke.

## Distribution of Type 2 Diabetes Patients, by A1c Level Range and Payer, 2023<sup>1,a</sup>

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	60.4%	64.3%	55.0%	18.0%	18.1%	14.5%	10.8%	10.1%	12.2%	10.8%	7.6%	18.2%
Lakeland	56.4%	60.2%	52.0%	18.5%	19.6%	15.8%	12.3%	11.4%	13.1%	12.9%	8.9%	19.1%
Miami	57.5%	65.2%	55.0%	18.7%	18.1%	16.7%	11.4%	9.6%	12.1%	12.4%	7.2%	16.3%
Orlando	57.7%	63.3%	53.1%	18.6%	18.9%	17.6%	11.8%	10.2%	13.4%	11.9%	7.6%	16.0%
Palm Bay	64.1%	68.3%	65.9%	18.4%	18.1%	14.9%	9.7%	8.3%	9.0%	7.8%	5.3%	10.2%
Tampa	58.6%	64.9%	54.3%	18.2%	18.5%	15.6%	11.3%	9.8%	11.9%	11.8%	6.9%	18.2%
<b>Florida</b>	<b>58.7%</b>	<b>64.9%</b>	<b>55.3%</b>	<b>18.6%</b>	<b>18.4%</b>	<b>16.2%</b>	<b>11.2%</b>	<b>9.7%</b>	<b>12.1%</b>	<b>11.6%</b>	<b>7.1%</b>	<b>16.4%</b>
<b>NATION</b>	<b>61.0%</b>	<b>64.3%</b>	<b>56.4%</b>	<b>18.0%</b>	<b>18.1%</b>	<b>17.1%</b>	<b>10.4%</b>	<b>9.7%</b>	<b>11.5%</b>	<b>10.6%</b>	<b>7.9%</b>	<b>14.9%</b>

## Percentage of Commercial Type 1 and Type 2 Diabetes Patients With an A1c Level >9.0%, 2023<sup>1,a</sup>



## Percentage of Commercial Type 2 Diabetes Patients Receiving Long-Acting vs. Longer-Acting Insulin, With an A1c Level ≤7.0% or >9.0%, 2021 and 2023<sup>1,a</sup>

MARKET	≤7.0%				>9.0%			
	Long Acting		Longer Acting		Long Acting		Longer Acting	
	2021	2023	2021	2023	2021	2023	2021	2023
Jacksonville	29.5%	35.5%	31.0%	36.0%	28.4%	22.6%	27.1%	22.1%
Lakeland	28.2%	29.2%	24.7%	28.0%	32.0%	30.0%	30.6%	23.5%
Miami	25.8%	27.6%	28.6%	30.6%	32.9%	30.0%	26.0%	23.2%
Orlando	27.5%	29.6%	28.2%	33.3%	30.4%	27.6%	24.5%	21.0%
Palm Bay	34.2%	37.0%	39.3%	40.8%	24.5%	22.3%	19.1%	15.3%
Tampa	31.1%	30.9%	29.9%	31.8%	26.5%	27.0%	24.9%	22.7%
<b>Florida</b>	<b>28.4%</b>	<b>30.4%</b>	<b>29.6%</b>	<b>32.7%</b>	<b>29.9%</b>	<b>27.4%</b>	<b>25.9%</b>	<b>22.0%</b>
<b>NATION</b>	<b>28.1%</b>	<b>32.7%</b>	<b>29.0%</b>	<b>34.8%</b>	<b>30.2%</b>	<b>25.4%</b>	<b>25.9%</b>	<b>21.2%</b>

## FLORIDA COMMERCIAL DIABETES PATIENTS HAVE ELEVATED A1c LEVELS COMPARED WITH NATION IN 2023

At 14.0% and 11.6%, respectively, the percentages of Florida commercial Type 1 and Type 2 diabetes patients with an A1c >9.0% exceeded the corresponding national percentages in 2023. This percentage among Florida Medicaid patients with Type 2 diabetes was even higher, at 16.4% that year, or roughly one in every six patients in the Medicaid cohort. Florida commercial Type 2 diabetes patients who received a longer-acting insulin therapy were less likely than similar patients on a long-acting therapy to have an A1c level in this range: 22.0% vs. 27.4%.

Reference 1. IQVIA © 2024

<sup>a</sup> The A1c test measures how much glucose has been in the blood during the past 2–3 months. Figures reflect the percentage of diabetes patients who have had at least one A1c test in a given year.

NOTE: "Long-Acting Insulin" refers to long-acting basal insulins approved through 2014 and follow-on long-acting insulins approved after 2014. "Longer-Acting Insulin" refers to non-follow-on long-acting basal insulins approved in or after 2015.

# CHARGES

## Professional Charges per Commercial Type 2 Diabetes Patient per Year, by Setting, 2022–2023<sup>1,a</sup>

MARKET	Emergency Department		Inpatient		Outpatient		Office/Clinic	
	2022	2023	2022	2023	2022	2023	2022	2023
Jacksonville	\$2,900	\$3,008	\$5,411	\$5,474	\$2,226	\$2,425	\$2,855	\$3,010
Lakeland	\$2,999	\$2,769	\$4,815	\$4,374	\$1,924	\$1,869	\$1,943	\$2,101
Miami	\$2,780	\$2,599	\$5,071	\$5,335	\$2,057	\$2,188	\$3,006	\$3,066
Orlando	\$2,809	\$3,147	\$4,692	\$4,804	\$2,009	\$2,149	\$2,026	\$2,241
Palm Bay	\$2,077	\$2,158	\$3,948	\$4,378	\$1,539	\$1,873	\$3,040	\$3,049
Tampa	\$2,064	\$2,143	\$4,668	\$4,913	\$2,287	\$2,298	\$2,224	\$2,344
<b>Florida</b>	<b>\$2,586</b>	<b>\$2,555</b>	<b>\$4,804</b>	<b>\$5,113</b>	<b>\$2,103</b>	<b>\$2,237</b>	<b>\$2,641</b>	<b>\$2,768</b>
<b>NATION</b>	<b>\$1,967</b>	<b>\$2,016</b>	<b>\$5,043</b>	<b>\$5,244</b>	<b>\$1,909</b>	<b>\$2,002</b>	<b>\$2,756</b>	<b>\$2,923</b>

## Professional Inpatient Charges per Type 1 and Type 2 Diabetes Patient per Year, by Payer, 2023<sup>1,a</sup>

MARKET	Commercial Insurance		Medicare		Medicaid	
	Type 1 Diabetes	Type 2 Diabetes	Type 1 Diabetes	Type 2 Diabetes	Type 1 Diabetes	Type 2 Diabetes
Jacksonville	\$5,361	\$5,474	\$5,258	\$4,632	\$5,852	\$6,885
Lakeland	\$4,567	\$4,374	\$4,242	\$4,875	\$8,356	\$5,807
Miami	\$5,237	\$5,335	\$5,992	\$5,340	\$5,459	\$5,483
Orlando	\$5,491	\$4,804	\$6,148	\$5,358	\$7,263	\$5,965
Palm Bay	\$5,170	\$4,378	\$6,022	\$4,591	\$3,944	\$5,037
Tampa	\$5,472	\$4,913	\$6,048	\$5,087	\$4,430	\$5,733
<b>Florida</b>	<b>\$5,379</b>	<b>\$5,113</b>	<b>\$5,445</b>	<b>\$4,872</b>	<b>\$5,619</b>	<b>\$5,820</b>
<b>NATION</b>	<b>\$5,213</b>	<b>\$5,244</b>	<b>\$5,343</b>	<b>\$4,773</b>	<b>\$6,008</b>	<b>\$6,073</b>

## Professional Emergency Department Charges per Commercial Type 2 Diabetes Patient per Year, Overall vs. With Various Co-Occurring Conditions, 2023<sup>1,a,b</sup>

	Overall	w/ CV Disease	w/ Depression	w/ Hypoglycemia	w/ Neuropathy	w/ Obesity
Jacksonville	\$3,008	\$3,468	\$3,843	\$4,169	\$3,383	\$3,314
Lakeland	\$2,769	\$3,339	\$3,441	\$4,802	\$3,292	\$2,863
Miami	\$2,599	\$3,050	\$3,297	\$4,384	\$3,002	\$2,852
Orlando	\$3,147	\$3,751	\$3,868	\$5,080	\$3,613	\$3,265
Palm Bay	\$2,158	\$2,672	\$2,651	\$3,527	\$2,417	\$2,244
Tampa	\$2,143	\$2,608	\$2,772	\$3,440	\$2,507	\$2,452
<b>Florida</b>	<b>\$2,555</b>	<b>\$3,043</b>	<b>\$3,181</b>	<b>\$4,027</b>	<b>\$2,961</b>	<b>\$2,800</b>
<b>NATION</b>	<b>\$2,016</b>	<b>\$2,396</b>	<b>\$2,449</b>	<b>\$3,105</b>	<b>\$2,333</b>	<b>\$2,116</b>

Reference: 1. IQVIA © 2024

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

<sup>b</sup> 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, diabetic ketoacidosis (DKA), gastrointestinal (GI) symptoms, congestive heart failure, hyperglycemia, hypoglycemia, obesity, peripheral artery disease (PAD), and stroke.



## Percentage of Commercial Type 2 Diabetes Patients Receiving Various Insulin and Combination Therapies, 2022–2023<sup>1</sup>

MARKET	Long-Acting Insulin		Longer-Acting Insulin		Rapid-/Short-Acting Insulin		Fixed Ratio (Long-Acting Insulin/ GLP-1 RA)		Free Ratio (Variable Long-Acting Insulin + GLP-1 RA)	
	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023
Jacksonville	14.4%	15.5%	8.9%	9.9%	17.0%	19.8%	1.0%	1.1%	10.6%	12.8%
Lakeland	15.4%	15.2%	7.4%	7.1%	12.6%	12.5%	0.7%	0.7%	9.2%	9.9%
Miami	13.1%	13.0%	5.7%	5.2%	10.4%	10.2%	1.0%	0.8%	6.9%	7.5%
Orlando	13.5%	13.8%	6.1%	6.1%	10.9%	11.7%	1.0%	1.0%	7.6%	8.5%
Palm Bay	9.3%	10.0%	10.1%	10.9%	12.9%	13.9%	0.9%	0.9%	8.8%	10.6%
Tampa	13.4%	13.8%	7.2%	7.0%	12.3%	12.7%	0.6%	0.6%	8.1%	9.2%
<b>Florida</b>	<b>13.2%</b>	<b>13.4%</b>	<b>6.9%</b>	<b>6.8%</b>	<b>11.6%</b>	<b>12.1%</b>	<b>0.9%</b>	<b>0.8%</b>	<b>8.0%</b>	<b>9.0%</b>
<b>NATION</b>	<b>13.9%</b>	<b>13.4%</b>	<b>7.3%</b>	<b>7.1%</b>	<b>12.0%</b>	<b>11.8%</b>	<b>0.7%</b>	<b>0.6%</b>	<b>9.4%</b>	<b>10.4%</b>

## Percentage of Commercial Type 2 Diabetes Patients Receiving Long-Acting Insulin vs. Longer-Acting Insulin, by Co-Occurring Condition, 2023<sup>1,a</sup>

MARKET	CV Disease		Depression		Hypoglycemia		Neuropathy		Obesity	
	Long Acting	Longer Acting	Long Acting	Longer Acting	Long Acting	Longer Acting	Long Acting	Longer Acting	Long Acting	Longer Acting
Jacksonville	29.7%	26.7%	7.0%	6.0%	3.3%	2.2%	36.9%	28.7%	36.0%	34.4%
Lakeland	27.7%	27.9%	15.7%	10.2%	4.0%	4.0%	41.6%	40.1%	50.7%	53.9%
Miami	32.1%	29.2%	10.0%	7.7%	3.2%	3.6%	36.3%	30.6%	36.4%	34.5%
Orlando	30.8%	24.6%	11.5%	10.9%	3.7%	4.3%	34.7%	34.1%	34.4%	32.2%
Palm Bay	31.8%	22.9%	12.2%	6.5%	4.6%	3.1%	39.4%	32.3%	32.0%	28.3%
Tampa	33.4%	27.2%	12.8%	12.0%	4.5%	3.2%	36.3%	32.3%	30.4%	30.9%
<b>Florida</b>	<b>31.4%</b>	<b>26.9%</b>	<b>10.6%</b>	<b>9.5%</b>	<b>3.8%</b>	<b>3.8%</b>	<b>36.0%</b>	<b>32.0%</b>	<b>34.8%</b>	<b>33.9%</b>
<b>NATION</b>	<b>27.1%</b>	<b>24.6%</b>	<b>11.2%</b>	<b>10.6%</b>	<b>4.2%</b>	<b>4.0%</b>	<b>32.5%</b>	<b>30.9%</b>	<b>29.5%</b>	<b>30.8%</b>

## Percentage of Commercial Type 2 Diabetes Patients Receiving Various Non-Insulin Antidiabetic Therapies, 2022–2023<sup>1</sup>

MARKET	Biguanides		GLP-1 RAs		DPP-4 Inhibitors		Insulin Sensitizing Agents		SGLT-2 Inhibitors	
	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023
Jacksonville	56.8%	53.0%	35.8%	45.9%	7.8%	7.1%	11.9%	11.5%	24.8%	28.0%
Lakeland	63.0%	61.4%	32.2%	40.6%	7.0%	5.5%	8.5%	8.5%	22.2%	24.3%
Miami	72.1%	71.9%	23.8%	31.4%	8.1%	7.0%	5.5%	5.4%	19.2%	21.8%
Orlando	67.8%	66.9%	27.3%	34.5%	7.4%	6.3%	7.8%	7.5%	20.2%	23.3%
Palm Bay	60.7%	58.8%	31.2%	43.9%	6.8%	5.2%	6.5%	6.4%	25.7%	28.2%
Tampa	65.8%	64.2%	29.7%	38.8%	7.7%	6.4%	7.0%	6.5%	21.8%	23.8%
<b>Florida</b>	<b>66.7%</b>	<b>65.4%</b>	<b>28.1%</b>	<b>36.8%</b>	<b>7.8%</b>	<b>6.6%</b>	<b>6.9%</b>	<b>6.5%</b>	<b>20.6%</b>	<b>23.2%</b>
<b>NATION</b>	<b>67.5%</b>	<b>64.9%</b>	<b>32.2%</b>	<b>41.7%</b>	<b>7.9%</b>	<b>6.5%</b>	<b>6.7%</b>	<b>6.4%</b>	<b>23.0%</b>	<b>25.5%</b>

Reference: 1. IQVIA © 2024

<sup>a</sup> 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.

**Biguanides:** Decrease the production of glucose by the liver, decrease intestinal absorption of glucose, and increase the peripheral uptake and use of circulating glucose.

**Dipeptidyl Peptidase 4 (DPP-4) Inhibitors:** Inhibit DPP-4 enzymes and slow inactivation of incretin hormones, helping to regulate glucose homeostasis through increased insulin release and decreased glucagon levels.

**Glucagon-Like Peptide-1 Receptor Agonists (GLP-1 RAs):** Increase glucose-dependent insulin secretion and pancreatic beta-cell sensitivity, reduce glucagon production, slow rate of absorption of glucose in the digestive tract by slowing gastric emptying, and suppress appetite. "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.

**Insulin Sensitizing Agents:** Increase insulin sensitivity by improving response to insulin in liver, adipose tissue, and skeletal muscle, resulting in decreased production of glucose by the liver and increased peripheral uptake and use of circulating glucose.

**Long-/Longer-Acting Insulin:** Insulin replacement product with a long duration of action. "Long-acting" refers to long-acting basal insulins approved through 2014 and follow-on long-acting insulins approved after 2014. "Longer-Acting" refers to non-follow-on long-acting basal insulins approved in or after 2015.

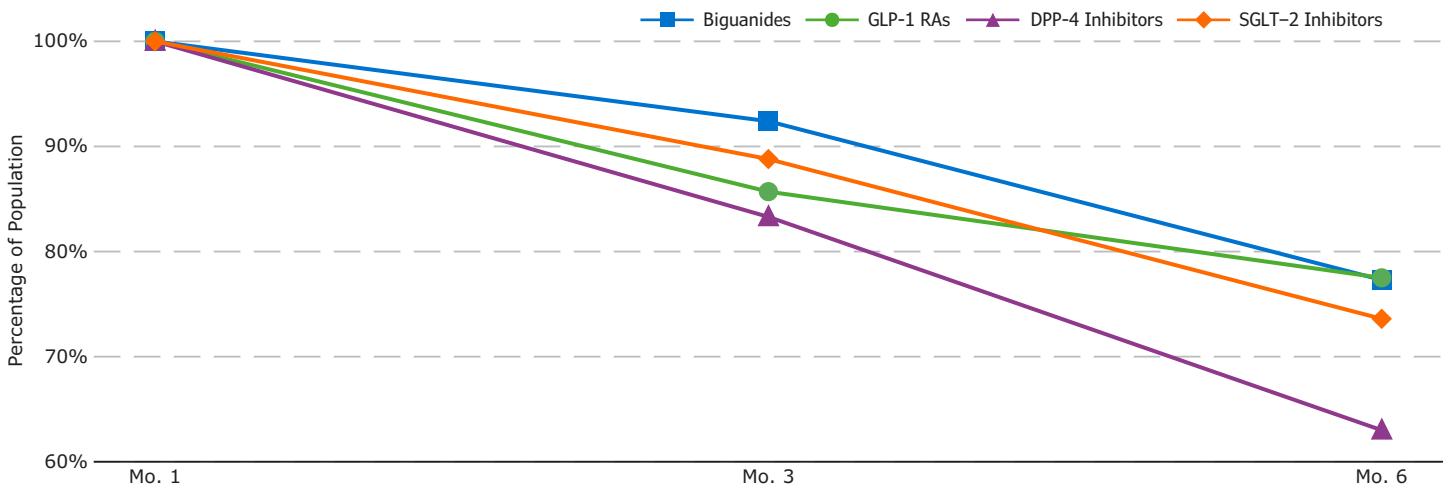
**Mixed Insulin:** Insulin replacement product combining a short-acting and an intermediate-acting insulin product.

**Rapid-/Short-Acting Insulin:** Insulin replacement products including: rapid-acting insulins that begin to work within 15 minutes after injection with duration of action of up to approximately four hours, and short-acting insulins that begin to work within 30 minutes after injection with duration of action of up to approximately six hours.

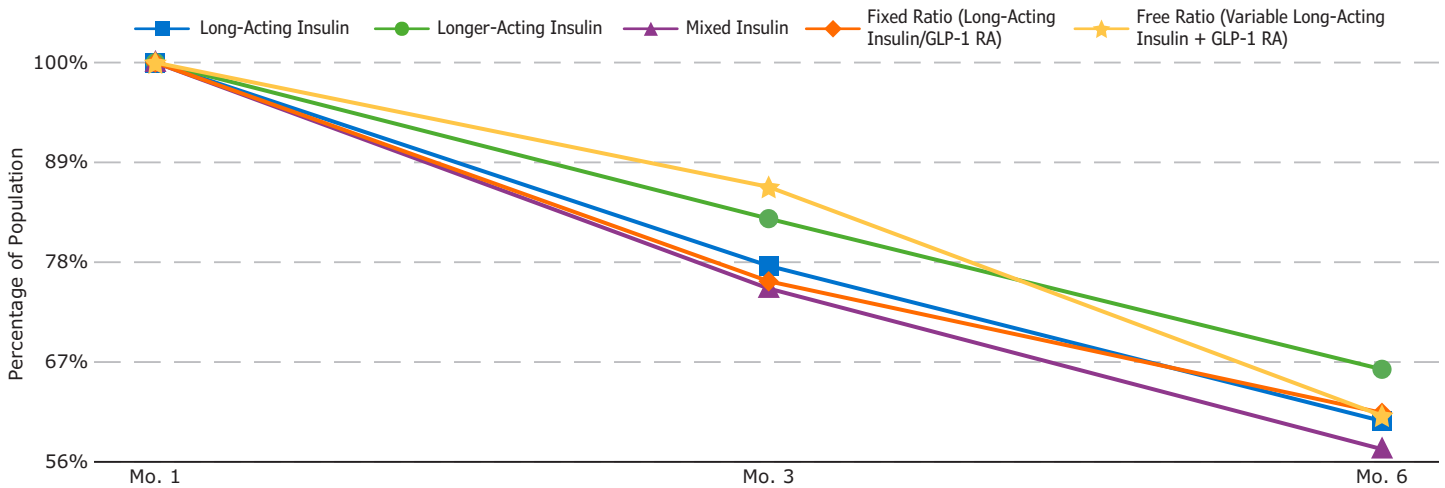
**Sodium/Glucose Cotransporter 2 (SGLT-2) Inhibitors:** Lower blood glucose concentration so that glucose is excreted instead of reabsorbed.

# PHARMACOTHERAPY

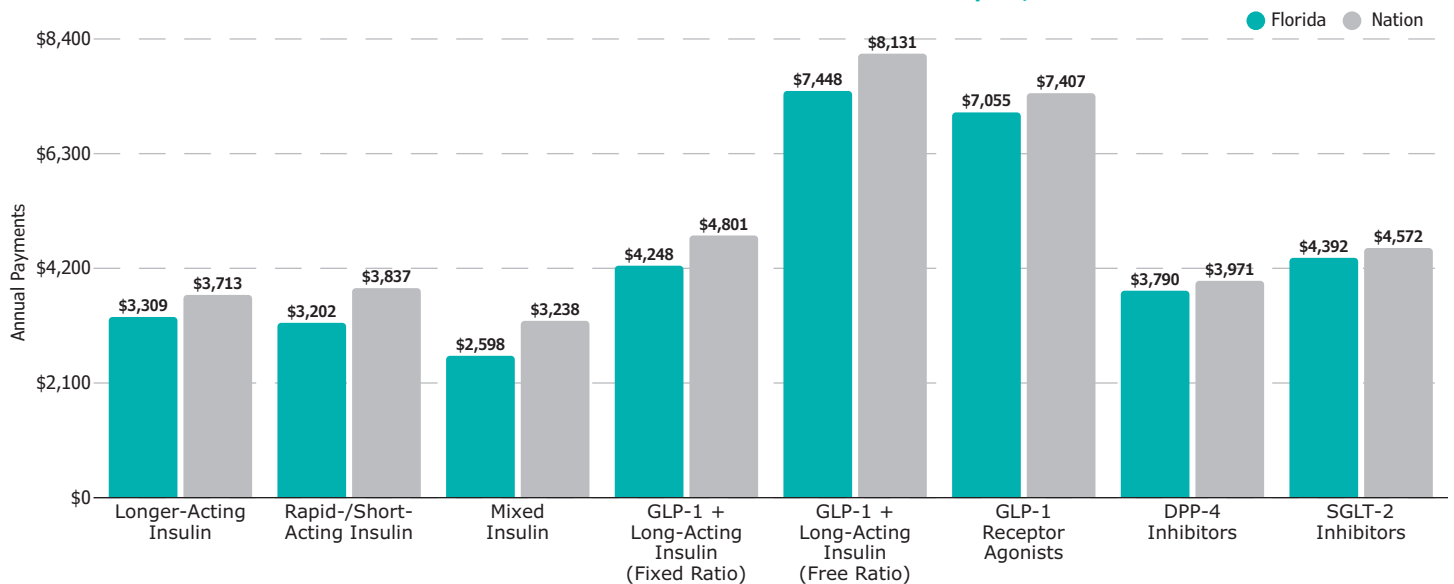
## Persistency: Commercial Type 2 Diabetes Patients Receiving Various Non-Insulin Antidiabetic Therapies, Florida, 2023<sup>1</sup>



## Persistency: Commercial Type 2 Diabetes Patients Receiving Various Insulin and Combination Therapies, Florida, 2023<sup>1</sup>



## Annual Payments per Commercial Type 2 Diabetes Patient for Various Insulin and Non-Insulin Antidiabetic Therapies, 2023<sup>1,a</sup>



Reference: 1. IQVIA © 2024

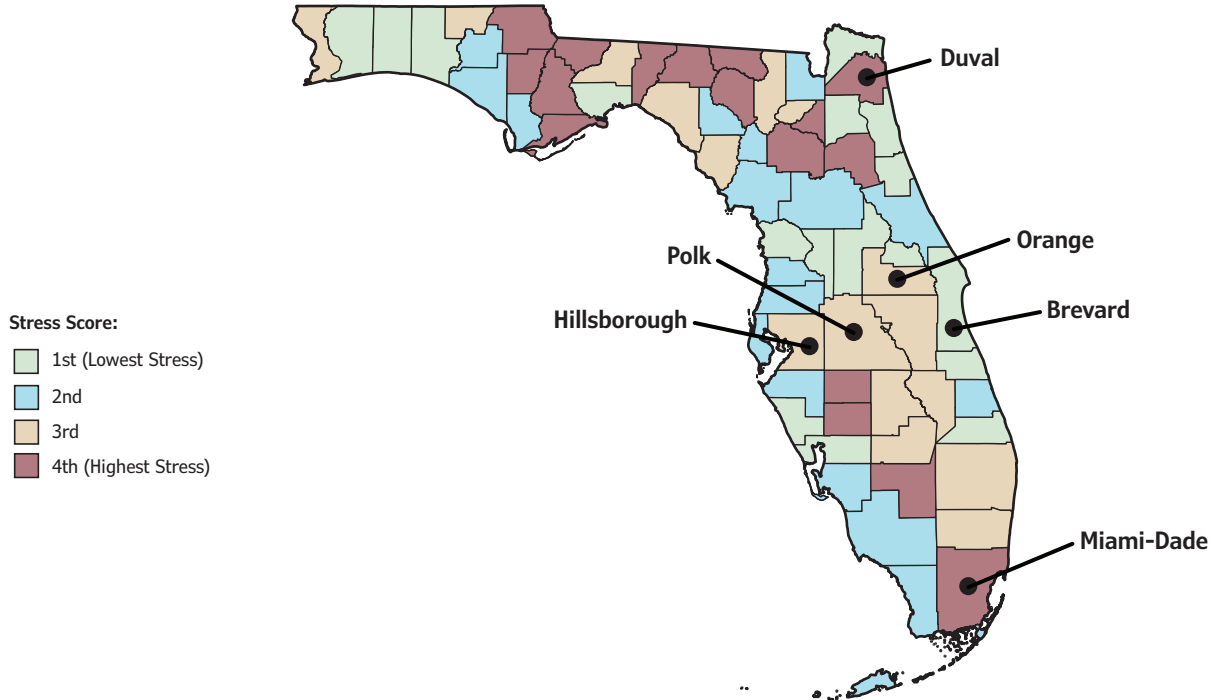
<sup>a</sup> Figures reflect the per-patient yearly payments for diabetes patients receiving a particular type of therapy. These are the actual amounts paid by the insurer and patient for such prescriptions. NOTE: "Persistency" measures whether patients maintain their prescribed therapy. It is calculated 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). "Long-Acting Insulin" refers to long-acting basal insulins approved through 2014 and follow-on long-acting insulins approved after 2014. "Longer-Acting Insulin" 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.

# SOCIAL DETERMINANTS OF HEALTH

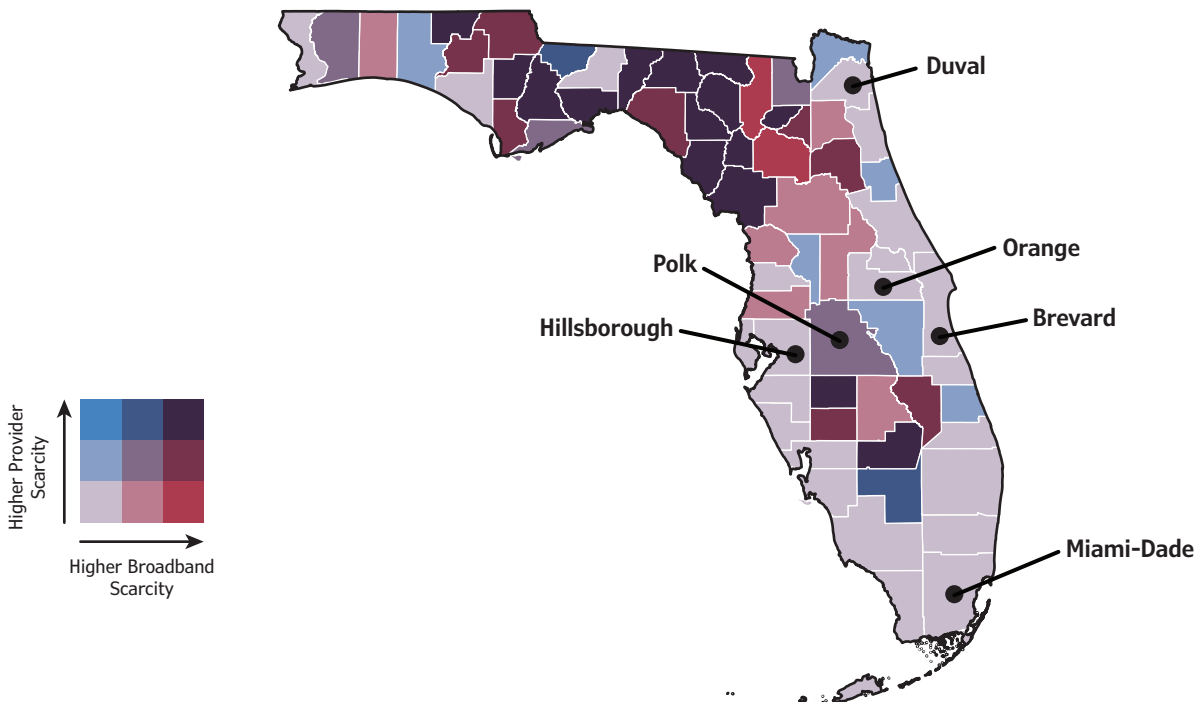
## SDoH STRESS APPEARS HIGH IN DUVAL AND MIAMI-DADE; POLK COUNTY REPORTS LOWER PROVIDER AVAILABILITY

- Duval (Jacksonville) and Miami-Dade (Miami) Counties both demonstrated high SDoH stress, both ranking in the fourth quartile (highest stress) for combined scores in income, vehicle access, owner-occupied housing, and high school graduation measures in 2022.
- Provider access (measured by number of providers per 100,000 population) and broadband internet availability were lower in Polk County (Lakeland market) relative to the other profiled counties. Additionally, Polk County ranked in the third quartile for SDoH stress in 2022.

Combined Social Determinants of Health (SDoH) Stress in Florida, by County, 2022<sup>1</sup>



Overlap of Provider Access (per 100,000 Population) and Fixed Broadband Internet Scarcity in Florida, by County, 2021–2023<sup>2,3</sup>



References 1. U.S. Census Bureau, American Community Survey, Five-Year Estimate © 2024. 2. Health Resources and Services Administration © 2024. 3. Federal Communications Commission © 2024.

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. Provider access data for medical doctors and doctors of osteopathy are for 2021; nurse practitioners and physician assistants data are for 2022. Fixed broadband internet availability data are for 2023.

## METHODOLOGY

Unless otherwise specified, the data for this report are from IQVIA and are out of health care professional (837p) and institutional (837i) insurance claims, representing nearly 872,000 patients with Type 1 diabetes (ICD-10 code E10) and nearly 14.2 million unique patients nationally in 2023 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.

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