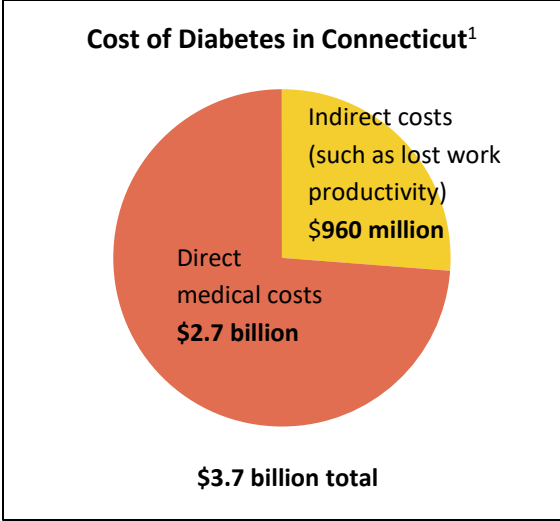
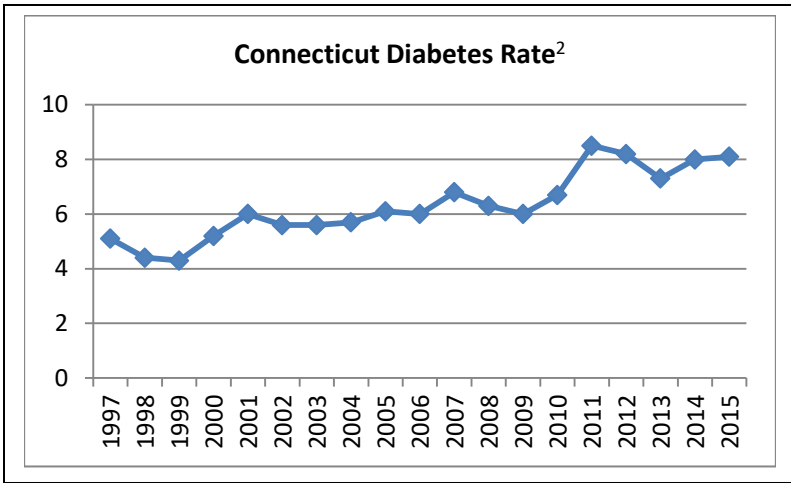


Diabetes is currently one of the 10 leading causes of death in Connecticut. In 2015, **355,000** people in Connecticut were estimated to have diabetes, and the disease was estimated to affect the health of 11.4 percent of the adult population.<sup>1</sup> Not only does diabetes cause detriment to the well-being of Connecticut’s citizens, but it also puts a tremendous financial burden on the state.



In 2014, **108,000** non-traumatic lower limb amputations were performed in the US due to diabetes.<sup>3</sup> The average cost of each amputation is **\$70,434**.<sup>4</sup> Research shows yearly visits to a podiatrist by those with diabetes can decrease the risk of lower limb amputation by up to 80 percent.<sup>5</sup> Connecticut projects a total of **477,000** people living with diabetes at a cost of **\$4.7 billion** by 2025.<sup>6</sup> For more information, visit [www.apma.org/diabetes](http://www.apma.org/diabetes).

### Investing in Care by Podiatrists

- While diabetes is the leading cause of non-traumatic lower limb amputation, these amputations can be prevented.
- Every \$1 invested in care by a podiatrist results in \$27 to \$51 of savings for the health-care system among patients with commercial insurance. For Medicare-eligible patients, every \$1 invested in care by a podiatrist results in \$9 to \$13 of savings.<sup>7</sup>
- The inclusion of care provided by podiatrists for those with diabetes alone will save the health-care system \$3.5 billion per year.<sup>7</sup>
- As a cost-cutting measure, Arizona removed patient access to DPMs in June 2010. However, after data indicated Arizona actually increased Medicaid spending by \$48 for every \$1 in projected savings, Arizona reinstated DPMs in the Medicaid program in 2016.<sup>8</sup>

<sup>1</sup> American Diabetes Association, “The Burden of Diabetes In Connecticut,” 2018. Accessed July 2018.  
<sup>2</sup> National Diabetes Surveillance System, 2015. Centers for Disease Control and Prevention.  
<sup>3</sup> National Diabetes Statistics Report: Estimates of Diabetes and Its Burden in the United States, 2017. Centers for Disease Control and Prevention. Accessed July 2018.  
<sup>4</sup> Lee C. Rogers et al., “The Right to Bear Legs—An Amendment to Healthcare: How Preventing Amputations Can Save Billions for the US Health-care System,” *Journal of the American Podiatric Medical Association* 98 (March 2008): 166–168.  
<sup>5</sup> T.B. Gibson et al., “Podiatrist care and outcomes for patients with diabetes and foot ulcer,” *International Wound Journal* 11 (December 2014): 641–648.  
<sup>6</sup> Institute for Alternative Futures, “Diabetes 2025—U.S., State, and Metropolitan Trends,” 2011.  
<sup>7</sup> Ginger Carls et al., “The Economic Value of Specialized Lower-Extremity Medical Care by Podiatric Physicians in the Treatment of Diabetic Foot Ulcers,” *Journal of the American Podiatric Medical Association* 101 (April 2011): 93–115.  
<sup>8</sup> American Diabetes Association, “Arizona Medicaid Study: Exclusion of Podiatric Physicians and Surgeons Adversely Impacted Diabetic Patient Health, Program Finances,” June 2013.