

This Is Diabetes

2016 ANNUAL REPORT



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For 76 years, the American Diabetes Association® has been driven by one purpose—our mission to prevent and cure diabetes and to improve the lives of all people affected by diabetes.

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Our Vision is a life free of diabetes and all its burdens.

This Is Diabetes.™

Diabetes can surprise you in its complexity, its many highs and lows. It's a father who spends too many sleepless nights worrying about his child's blood glucose numbers. It's a family who has seen diabetes relentlessly strike every generation. It's the research that is leading to better treatments, but in need of adequate federal funding. It's a young woman who has to stretch her grocery budget to afford the insulin she needs to survive.

We can list our accomplishments in the realms of diabetes research, education and advocacy. We can

describe the ways in which we advanced what is known about diabetes in the past 76 years, striving to make life better for people affected by this disease—until we find a cure.

But the story of diabetes is actually best told by the nearly 30 million Americans who live with it, as well as those who have dedicated their careers to ending it.

In fact, storytelling was the impetus behind our This Is Diabetes™ campaign for American Diabetes Month®. Thousands of supporters

took to social media and their communities in November to share and demonstrate what diabetes really looks like.

This Is Diabetes became the American Diabetes Association's theme for the year, weaving its way into our nationwide efforts with its unifying and attention-grabbing message. Together, we raised the volume on diabetes, generating much-needed awareness and support.

This was 2016.
This Is Diabetes.





Martha Parry Clark
Interim Chief Executive Officer

Message from the Interim CEO and the Chair of the Board

ON MANY FRONTS, 2016 was a resounding success for the American Diabetes Association (ADA) because of our impact on the lives of those with diabetes. We can proudly say that the 29.1 million people with diabetes in the U.S. are better off today because of our work this past year.

However, in some crucial aspects, 2016 was a challenging year for people with diabetes, as 1.5 million Americans adjusted to being newly diagnosed with diabetes, and the disease contributed to the deaths of 252,806 other Americans. We have much more work to do.

On the bright side, more than 6,000 children learned how to self-manage their diabetes with greater confidence—or lower their risk for type 2, as the case may be—thanks to our life-transforming summer camp program, which served a record number of youth in 48 cities. We improved care for patients of all ages as hundreds of thousands of health care professionals enhanced their clinical knowledge using the annual *Standards of Medical Care in Diabetes*. The most recent version included key recommendations for treating diabetes' psychosocial challenges, addressing hypoglycemia and more.

Our advocacy led Medicare to announce plans to reimburse for the National Diabetes Prevention Program (NDPP), the gold standard in helping people prevent or delay type 2 diabetes through lifestyle changes. We expect this progress to cascade into broader coverage by state health programs and the private insurance sector in 2018.

We renewed 160 diabetes education programs, certified 57 new ones and accredited an additional 160 new sites under our Educational Recognition Program (ERP), expanding the breadth of diabetes self-management education and support nationwide. Collectively, these ERP programs serve nearly 900,000 patients every year.

Our efforts in 2016 also laid the groundwork for improving lives in the future. For one, we ignited a national discussion on insulin affordability that we hope will lead to more affordable solutions for the nearly 6 million people who rely on this medication daily to stay alive.

The ADA funded nearly \$35 million in diabetes research, emphasizing young investigators and innovative projects that were likely too risky to secure government funding. We also defended funding for the National Institute of Diabetes and Digestive and Kidney Diseases at the National Institutes of Health, the Division of Diabetes Translation at the Centers for Disease Control and Prevention and the NDPP. Our unwavering advocacy resulted in a collective \$24.5 million increase for diabetes research and programs at these agencies.

Our Pathway to Stop Diabetes® researchers applied for three patents on their insights gained while being

funded by this innovative ADA program—supporting their research and accelerating their progress on the road to breakthrough discoveries.

We acquired Intelligent Medical Decisions, Inc. in July 2016, to continue the development and testing of our Diabetes INSIDE program. This national population health initiative is aimed at improving the quality of diabetes care among large health systems. It focuses on patients with diabetes who are not achieving goals defined by our own *Standards of Medical Care in Diabetes*, leaving them particularly vulnerable to the health complications of diabetes. Given the impressive early success of this initiative, we plan to scale its impact by taking it to communities nationwide.

We also convened the first ADA Technology Summit in Mountain View, California, bringing patients together with entrepreneurs, investors and health care system payers to help them better understand the needs of people with diabetes and to develop revolutionary approaches to address the most pressing needs in diabetes care and self-management.

We delivered all this and more, despite facing ongoing challenges with finding a financially sustainable way to fund and grow our mission.

While we missed our 2016 financial goals, we took decisive action to improve our focus and accelerate changes in how we operate internally. These include initiating partnerships with new players that match the scale of this disease and bring fresh thinking to our work such as IBM Watson Health. We also implemented fundamental changes to the ADA's cost structure and management team.

We closed out 2016 excited about the possibilities for scientific breakthroughs and optimistic about the positive impact our work will once again have on every person living with diabetes. ADA volunteers, staff and Board members will work each day to ensure that 2017 is yet another year when the burdens of diabetes get a little lighter—and the hope for stopping diabetes gets much brighter.

Sincerely,



Martha Parry Clark
Interim Chief Executive Officer



Robin J. Richardson
2016 Chair of the Board

Looking Ahead

Stopping a disease as formidable as diabetes means planning for the future as much as it does helping people in the here and now. We spent the latter half of 2016 redefining and articulating our organizational strategy, in the form of the **2017-2020 Strategic Plan**.



Our vision emerged around three enduring pillars of strength: to **Drive Discovery**, **Raise Voice** and **Support People**. This critical document, released in January 2017, will be a beacon for focusing our work on the areas where we can have the greatest impact on the lives of people with diabetes.

Nearly
\$770 million
invested in
cutting-edge
diabetes
research
since 1952



Our Research

Accelerating Progress Toward the Next Big Discovery

As our members and supporters know and live firsthand, diabetes is an extremely complex disease. Although finding a single cure that simultaneously addresses the various causes of diabetes has been elusive, critical research efforts in recent decades have led to significantly improved patient care. The result: fewer complications and better health outcomes for individuals with diabetes.

The American Diabetes Association is a leading organization dedicated specifically to the research, education and advocacy required to improve the lives of all people with diabetes, and our direct involvement in diabetes research extends back to 1952. Dr. Charles H. Best, one of four scientists credited with discovering insulin, provided the ADA with the framework and early leadership for a formalized diabetes research program.

Our Research Program

The ADA's Research Program supports projects that cover a broad spectrum of approaches to address all types of diabetes and related complications. ADA-supported researchers made significant progress in understanding how diabetes develops and progresses, and in identifying new ways to combat the disease. Notable advances included development and testing of a gene therapy in mice that both stimulates production of new insulin-producing cells and prevents autoimmune attack of the cells, offering a potential cure for type 1 diabetes; examination of the best diabetes treatment strategies for older adults who live in long-term care facilities and suffer a high prevalence of type 2 diabetes; and the discovery of how high glucose levels disrupt normal wound-healing, a problem that contributes to the high rates of amputation among people with diabetes.

Our Research Grants

The ADA's Research Grants provide extraordinary opportunities for researchers from diverse backgrounds and foster the professional development of young scientists in diabetes research.

In 2016, the American Diabetes Association awarded more than **\$34.5 million** to support **378** new and continuing research projects at **150** leading research institutions.

Additionally, in 2016, the ADA received 699 research grant applications. All ADA grant applications undergo peer review by three or more volunteer experts in diabetes research. This submission process evaluates the strengths and weaknesses of each application and sets ADA-funded research apart by ensuring we are supporting the pinnacle of scientific discovery. Twenty-three post-doctoral fellowships, eight minority post-doctoral fellowships, and 59 research and development grants were awarded in 2016.

Through our four major research programs, we aim to:

- Support innovative, early-stage research with a high potential to benefit people with diabetes
- Encourage early-career investigators to dedicate themselves to diabetes research
- Support research in high-needs, emerging or promising topic areas
- Accelerate the translation of research findings into clinical practice
- Attract brilliant scientists at the peak of their creativity to diabetes research

PATHWAY TO STOP DIABETES®

Putting Scientists on the Road to Discovery

The path to scientific discovery is long and challenging. Our Pathway to Stop Diabetes program is a bold, innovative initiative that supports the most brilliant scientific minds and accelerates their progress on the road to breakthrough discoveries.

Diabetes and Technology

The ADA hosted its inaugural Technology Summit in Mountain View, California, in November 2016. The summit convened more than 150 clinicians, entrepreneurs, executives and patients from the diabetes design and health technology ecosystems. The discussion centered on the needs of people with diabetes, caregivers, health care providers and those at risk of developing the disease. We learned that there are many innovative ideas that need funding but are struggling to find a sustainable business model that can improve diabetes care and outcomes. The ADA will continue to convene the health technology ecosystem to improve the odds that the products and services that address the most pressing needs are brought to market.

2016

PATHWAY HIGHLIGHTS

It's different being a Pathway scientist. A Pathway scientist is supported for five to seven years and is given the freedom to explore new ideas as they are discovered, without the constraints of traditional project-based funding.

These scientists come from diverse backgrounds, often from outside the field of diabetes research but with an idea of how their knowledge can be applied to diabetes. They are from many different research institutions, and they convene with experienced mentors to share ideas and challenge each other.

Pathway scientists are quickly adding key insights in the field of diabetes. See the course Pathway scientists Dr. Thomas Delong and Dr. Stephen C.J. Parker, featured ahead, have taken on the path to discover more about type 1 and type 2 diabetes.



4th Annual Pathway to Stop Diabetes Grant Competition



ADA reviewed 106 award nominations (for 2017)



Six new Pathway awardees began their research projects in January 2016

More Pathway Highlights

- 17 Pathway scientists funded, collectively published 38 high-impact research manuscripts and reviews and delivered several hundred presentations at scientific meetings.
- Five Pathway Initiator award recipients secured their first independent faculty positions.
- Three patents have been filed by Pathway awardees as of the end of 2016.

Pathway to Stop Diabetes:



DR. THOMAS DELONG

PATHWAY BREAKTHROUGH

The Case of Mistaken Identity in Type 1 Diabetes

We've known since the mid-1970s that type 1 diabetes is an autoimmune disease. But many questions still linger about its development.

Pathway scientist **Thomas DeLong, PhD**, got us closer to the answers in 2016. His work at the University of Colorado Denver has pinpointed a possible explanation for the autoimmune attack that causes type 1 diabetes. The study, for which he was lead investigator, was published in the prestigious journal *Science* in February 2016.

Our immune system is there to protect us by fighting off signs of infection, and it's supposed to ignore signals from our own bodies. But with type 1 diabetes, the T cells are somehow tricked into damaging healthy cells in the pancreas. These insulin-producing beta cells contain many proteins—and Dr. DeLong knew any one of them could be responsible for the triggering the attack.

Using an experimental technique called mass spectrometry, Dr. DeLong and his colleagues discovered hybrid insulin peptides (HIPs)—which are half insulin fragments, half something else—that appear to be the critical targets in type 1. These combo peptides look foreign to the immune system, prompting T cells to destroy them. This in turn destroys the body's ability to produce insulin, the hallmark of type 1 diabetes.

Dr. DeLong likes to use a table-setting analogy for how this autoimmune response works. “At a fine restaurant, on the table you'll allow many items, including spoons and forks. But when these utensils are combined—in a spork, for example—it's rejected, it's not allowed.”

The more scientists learn about this process, the closer we get to finding ways to predict, reverse or even prevent type 1 diabetes, which affects 1.25 million Americans.

Eventually, the rogue T cells could serve as biomarkers telling us who is prone to type 1. Dr. DeLong thinks future therapies might involve “silencing or reeducating the bad T cells, and regenerating healthy beta cells.” But the biggest challenge will be erasing the immune system's memory of what triggered type 1 diabetes in the first place.

The German-born DeLong, who received his Pathway grant in 2015, has a very personal reason for wanting to solve this mystery. He was diagnosed with type 1 diabetes about 30 years ago.

A firsthand understanding of diabetes' burdens fuels his work. “I'm hopeful we'll find a cure in my lifetime. That keeps me going,” said Dr. DeLong.

Putting Scientists on the Road to Discovery

PATHWAY BREAKTHROUGH

Identifying the Genetic Regulatory Signature of Type 2 Diabetes

Type 2 diabetes is the confluence of many risk factors—and they run deeper than your age, what you weigh or how often you exercise.

Its origins are partly encoded deep in our genetic sequence, specifically the 100 or so possible variations that predispose someone to type 2 diabetes and dictate its progression.

Stephen C.J. Parker, PhD, one of the very first Pathway grantees, made great research strides in 2016. His mission: to find the genetic regulatory signature for type 2 diabetes, which accounts for 90 to 95 percent of diabetes in the United States.

If genetics is a language, then “regulatory grammar” describes how proteins recognize certain genetic sequences as words. They like to bind at these sites in ways that control when, where or how much a gene is expressed. Genetic variations are misspellings of these words; they disrupt how genes are regulated, leading to disease.

“Right now, we can look at your genetic code and know you’re likely to develop type 2 diabetes,” Dr. Parker explains. “But we don’t know why or how, because it’s not the same for everyone.”

One of his studies, published in June 2016 in *Nature Communications*, looked at the type 2-related genetic variations expressed in human

skeletal muscle tissue. They found that certain variations might influence how insulin converts glucose into energy in the muscles. This metabolic process could be hindered in someone with type 2 diabetes.

Dr. Parker also contributed to a study published in *Nature* that showed most type 2 risk comes from common genetic variations—not rarer ones, as once thought.

As this work continues, it could give birth to a new generation of tissue-specific treatments. One person with type 2 diabetes could receive a drug targeted at the pancreas’ hormone-producing islet cells. Meanwhile, another would benefit from one geared toward the liver.

Moving forward, Dr. Parker will further his research on the type 2 regulatory signature in skeletal muscle tissue, while also investigating what all these type 2 genetic modifications have in common.

Thanks to ADA funding, Dr. Parker is able to “focus on the science” at the University of Michigan in Ann Arbor, where he is an assistant professor. And his research is moving at a fast pace.

“No question, [Pathway] has made my career,” said Dr. Parker.



DR. STEPHEN C.J. PARKER

Dr. Stephen C.J. Parker in the lab with undergraduate researcher Sophia Manduca, recipient of the ADA’s Minority Undergraduate Internship.



At A Glance: 2016 Scientific Sessions

16,000+
attendees

700 million+
media impressions

94.3 million
social media impressions

3,200+
abstracts received

800
speakers

ATTENDEE

ADA MEMBER

SHUTTLE PASS

Scientific Sessions

THE ADA'S SCIENTIFIC SESSIONS IS THE LARGEST scientific and medical meeting focused on the latest research related to diabetes and its complications. The 76th annual meeting was held in the vibrant Southern city of New Orleans. It offered researchers and health care providers from around the world the opportunity to learn about significant advances in diabetes research, treatment and care. During the five-day meeting, attendees received exclusive access to more than 2,500 original research presentations and participated in engaging exchanges with leading diabetes experts.

The Scientific Sessions exemplifies the ADA's leadership role in the global diabetes community, while providing a critical platform for driving diabetes research. As the world's most comprehensive professional meeting centered on diabetes, the program includes the latest integral research news, evidence-based patient care information and practical knowledge to improve the quality of life for all people living with diabetes. Eight meeting tracks covered the most important aspects of diabetes care: Acute and Chronic Complications; Behavioral Medicine, Clinical Nutrition, Education and Exercise; Clinical Diabetes/Therapeutics; Epidemiology/Genetics; Immunology/Transplantation; Insulin Action/Molecular Metabolism; Integrated Physiology/Obesity; and Islet Biology/Insulin Secretion.

Scientists unveiled promising research about new sources for beta-cell replacement, which could potentially help people with type 1 diabetes maintain normal blood glucose levels without the need for insulin injections or whole pancreas transplants. Presenters also shared exciting updates regarding the impact of the ADA's Camp programs, which serve about 6,000 youth each summer. Results from a three-year study indicate that children who attend these camps are able to better manage their diabetes, reducing the risk for future complications. During a symposium about the digital health industry, renowned experts discussed the latest technological advances in the health care arena such as wearables and software that tracks health outcomes, and addressed the need to create the infrastructure to implement these innovations at scale.



**ADA and IBM
Watson Health
Partnership
Announced**

At the 76th Scientific Sessions, the American Diabetes Association and IBM Watson Health announced a collaboration to build solutions for patients, caregivers, researchers and clinicians to assist in the treatment, prevention and management of diabetes.

Combining the ADA's enormous variety and depth of content with Watson's cognitive computing capabilities, both organizations will work together to meet the needs of patients and professionals alike to optimize clinical, research and lifestyle decisions—ultimately leading to better health outcomes.

In addition, the ADA will work with the patient data from IBM-acquired companies Truven and Explorys to conduct research into key areas in the hopes of finding new insights into the disease.

Our partnership efforts are aimed at better informing clinical treatment decisions, providing tailored treatment approaches and accelerating significant breakthroughs in diabetes research.

Supporting Health Care Professionals

WITH SO MANY NEW ADVANCES in our understanding of diabetes and treatments available, it is critical that clinicians stay abreast of the newest knowledge. In January 2016, the annual *Standards of Medical Care in Diabetes*, the organization's key clinical practice guidelines, and the abridged version of the *Standards of Care* for primary care physicians were published in *Diabetes Care* and *Clinical Diabetes*, respectively. These *Standards of Care* guide health care providers based on the best available scientific evidence to guide them as they strive to provide optimal care for their patients. In addition, numerous ADA position statements and other professional papers were published in *Diabetes Care* in 2016.

The *Standards of Medical Care in Diabetes 2016* was viewed on the *Diabetes Care* website more than 700,000 times over the course of the year.

The *Standards of Medical Care in Diabetes* reached health care professionals through a variety of ways in 2016:

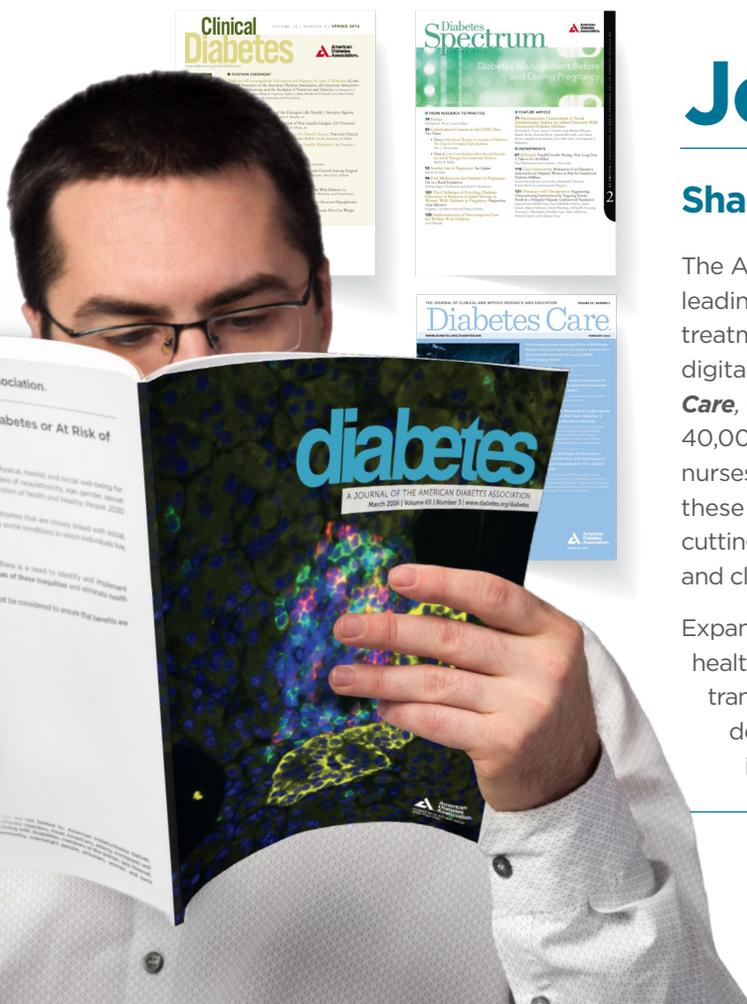
- **78,073 downloads** of the *Standards of Care* app (27,782 active users)
- **46,827 views** of the abridged *Standards of Care*, which was published in the winter 2016 issue of *Clinical Diabetes*
- A **continuing education webcast**, which complemented the *Standards of Care* and provided **comprehensive slides** developed for professionals for use in their own presentations
- Summary articles on the *Standards of Care*, which were submitted by the Primary Care Advisory Group and published in the *Annals of Internal Medicine*, *Journal of Family Practice* and *Osteopathic Family Physician*, reaching an additional **240,359 clinicians**

Journals

Sharing Scientific Advances in a Digital World

The American Diabetes Association continues to publish the world's leading scientific and medical journals related to the prevention and treatment of diabetes and its complications, providing both print and digital access to the latest advances. In 2016, *Diabetes*, *Diabetes Care*, *Clinical Diabetes* and *Diabetes Spectrum* reached more than 40,000 health care professionals, including physicians, researchers, nurses, nutritionists, dietitians and diabetes educators. Together, these publications put forth the best in peer-reviewed information on cutting-edge diabetes research, state-of-the-art treatment advances and clinical treatment guidelines.

Expanding our digital footprint is vital to sharing information with health care providers when they need it most. That is why we transitioned our journal websites to a new reader-friendly, responsive-design platform in June 2016. Since then, we've seen a 15 percent increase in overall traffic to the ADA's online journal content.



The 2017 edition of the *Standards of Medical Care in Diabetes* was published online December 15, 2016, and included key changes related to mental health, access to care, expanded and personalized treatment options, and the tracking of hypoglycemia. Important statements published in 2016, include:

- Metabolic Surgery in the Treatment Algorithm for Type 2 Diabetes
- Physical Activity/Exercise and Diabetes
- Management of Diabetes in Long-term Care and Skilled Nursing Facilities
- Psychosocial Care for People With Diabetes

Our first psychosocial position statement, *Psychosocial Care for People with Diabetes*, was published in *Diabetes Care* in November 2016. This statement recommends mental health screening at regular intervals for every individual with diabetes for issues such as diabetes distress, depression, anxiety, disordered eating and serious mental illness, and referral of patients who need support to mental health providers knowledgeable about the day-to-day demands of managing diabetes. To support the statement, the ADA formed a partnership with the American Psychological Association to provide mental health resources in 2017. Together, a professional education program for mental health care providers was developed, and, upon successful completion, mental health care providers will be listed in a searchable, online directory. These programs are made possible by a grant from The Leona M. and Harry B. Helmsley Charitable Trust.

In 2016, we saw:

- More than **9 million** visits to diabetesjournals.org
- **10,000 followers** on our Journals social media platforms
- **60,000 downloads** of our *Diabetes Care* Update podcast, which provides content summaries targeted toward primary care providers

The ADA publishes the highest-ranked journals devoted exclusively to diabetes-related research. In the world of academic journals, prestige is measured by “impact factor,” which reflects the frequency with which articles in the journal are cited by other publications. The 2015 impact factors for *Diabetes* and *Diabetes Care* were released in July 2016. *Diabetes Care* (8.9) and *Diabetes* (8.8) rank seventh and ninth, respectively, of 124 publications in the field of endocrinology/metabolism.

In 2015, original research reports published in *Diabetes Care* and *Diabetes* were cited more than 110,000 times.



Inspiring System Improvement Through Data-Driven Excellence

In July 2016, the American Diabetes Association completed its acquisition of Intelligent Medical Decisions, Inc. (iMD), to bring the ADA-sponsored Diabetes INSIDE program under the ADA umbrella and to expand to health systems across the country. Diabetes INSIDE is a national quality improvement (QI) initiative aimed at improving health care delivery and population health for people living with diabetes.

Key Quality Improvement

The ADA's QI Services team presented a poster at Scientific Sessions on improved clinical outcomes from successfully completed Diabetes INSIDE engagements with Inova Health System (Northern Virginia and Washington, D.C.) and the Parkland Health and Hospital System (Dallas). The initiative was designed to improve clinical care processes, focused on diabetes patients who were not reaching their A1C goals. A1C measures a person's average blood glucose levels over the past two to three months and is a standard indicator of diabetes management. The ADA suggests an A1C target of < 7% for most adults with diabetes.

Aggressive treatment for patients who are not able to control their blood glucose levels without insulin is critical to reducing complications from the disease. Inova showed a 19 percent reduction in the proportion of their patients with an A1C > 9%. Parkland showed significant process improvements, increasing the number of patients with an A1C > 9% who started insulin therapy by 24 percent.

New Grants Awarded

Several new grants were also awarded to support Diabetes INSIDE—at the University of Chicago and NorthShore Health in Illinois, focused on reducing cardiovascular disease risk, and a new QI project with Parkland Health and Hospital System in Texas, which focused on managing obesity in patients with prediabetes.

**“The great aim
of education is
not knowledge
but action.”**

-Herbert Spencer, philosopher,
biologist, anthropologist
and sociologist



Improving Lives in Our Community

To create change,
we must move
beyond education
and promote action.

The ADA's critical efforts to improve awareness, prevention and management of diabetes are measured not only in our success in educating communities, but also in our ability to inspire action and change lives. This requires that we reach out in various ways to grab the attention of those who need to act. We must find the moment and the message that inspires people to action.

Awareness campaigns such as American Diabetes Month®, American Diabetes Association Alert Day®, National Get Fit Don't Sit Day™, America's Diabetes Challenge, and our collaboration with the Ad Council, the American Medical Association and the Centers for Disease Control and Prevention, encouraged thousands of people to learn their risk for type 2 diabetes, seek appropriate clinical care, take steps to achieve a healthier lifestyle and—for those already living with type 2—reach their A1C goals.

In response to our nationwide Ad Council prediabetes campaign, more than 300,000 individuals completed the ADA's prediabetes risk test in 2016 and received tips to prevent or delay type 2 diabetes. Meanwhile, the reach of our Camp program expanded in 2016 by 26 percent, with new sessions specifically targeting children and families at risk of developing type 2 diabetes.

Each program's success is quantified by the substantial increases in participation over previous years, and as new campaigns and initiatives are added, our influence in the fight against this disease continues to grow. Through these life-changing endeavors, the ADA reaches more communities than ever before as we make significant strides in achieving our ultimate goal: to Stop Diabetes®.



Reaching More People

Sometimes our best work involves improving and enhancing already successful outreach initiatives. In 2016, the American Diabetes Association provided education about how to manage diabetes and its risk, and inspired action across our communities.

Camp Programs

The ADA continues to be the world's largest provider of camps for children with diabetes. At these summer sessions, we teach the importance of self-management, self-confidence and knowledge, all while having fun. In addition to serving kids with types 1 and 2 diabetes, we expanded to welcome kids and families at risk of developing type 2 diabetes. These programs focus on nutrition, physical activity and confidence to create healthy lifestyles—now and in the future. In 2016, the ADA hosted **68 Camp** sessions serving more than **6,000 children** and **10,000 parents** in **48 cities** and **28 states**.



ALERT! DAY[®]

Held on Tuesday, March 28, Alert Day 2016 influenced more than 35,800 American adults to take the 60-second online risk test to assess their chances of developing type 2 diabetes. This was an increase of 6 percent over any single-day total in 2015. The campaign and risk test were further boosted through the exposure of our national prediabetes awareness campaign with Ad Council partners.

On social media:

- The hashtag **#prediabetes** generated 30 million impressions
- **#DiabetesAlertDay** generated 41 million impressions
- Social media mentions **increased by 120%** over 2015
- Social media impressions **increased by 74%**
- Notable contributors and celebrities promoted Alert Day through conversations on Facebook and Twitter

National Get Fit Don't Sit Day™

On Wednesday, May 4, the second annual National Get Fit Don't Sit Day ignited a conversation about the importance of sitting less and moving more—every 90 minutes—for better health. More than 2,700 businesses, organizations and industry leaders took steps to ensure the health of their employees and members through organized walks, exercise stations, standing desks, yoga classes and more. This year's efforts introduced new initiatives such as the CEO Fitness Challenge and enhanced digital support materials in a downloadable e-toolkit that included tips on desk exercises, sandwich swapping, eating at restaurants and other healthy tidbits.

#GetFitDontSit on social media yielded:



9.9 million
potential social media impressions
on May 4—up 13.5% from 2015



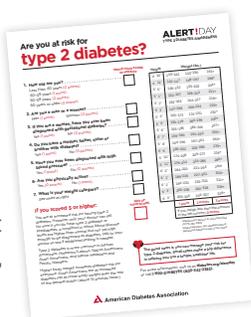
220 million
overall impressions—up 461%



Participation by notable contributors, such as actress Jessica Marie Garcia, NASCAR driver Ryan Reed, actress Jillian Rose Reed, television host Maria Menounos and First Lady Michelle Obama's Let's Move! campaign

Prediabetes Awareness PSAs

In collaboration with the Ad Council, the American Medical Association and the Centers for Disease Control and Prevention, in January, we launched the highly successful public phase of our three-year, public service announcement (PSA) campaign to raise awareness about prediabetes. The campaign featured print, radio and video PSAs to encourage the public to take the prediabetes risk test.



Campaign Results

- 318,000 individuals completed the prediabetes risk test (more than six times the 12-month goal of 30,000 to 50,000)
- 952,000 unique visitors browsed the campaign website, doihaveprediabetes.org (double the 12-month goal of 400,000 to 500,000)
- One-third of site visitors took the prediabetes risk test



American Diabetes Month

Our American Diabetes Month (ADM) campaign for November, sponsored nationally by Medtronic

Diabetes® and our National Oral Care Strategic Partner, Colgate Total®, featured stories of friends, family and neighbors sharing the day-to-day challenges of the disease under the theme #ThisIsDiabetes. Using social media to compel engagement, this storytelling effort mixed professionally produced videos, educational Facebook Live broadcasts and infographics to invite the public—anyone affected by diabetes—to tell their stories of courage, triumph and hope.

- 1.1 million ADM video views of real-life stories and Team Tackle messages, an initiative that brings together current and former professional football players and the ADA to draw increased attention to diabetes
- More than 300% increase in hashtag (#ThisIsDiabetes) engagement compared to the 2015 ADM #EatWellAmerica campaign
- 639 million impressions across all marketing and communications channels

SOCIAL MEDIA: Digital and Mobile Connections

According to a 2016 Pew Research Center survey, two-thirds of American adults obtain their news through social media. While traditional communication channels will always be a mainstay of diabetes outreach efforts, the ADA continues to address the emerging role of digital and mobile platforms by creating meaningful audience engagement. We're proud to maintain engaging, mission-oriented channels of communication for the public and the millions of people with or who care for someone with diabetes.

In 2016, the ADA's flagship social media channels continued to grow:

-  Facebook fan base **increased 9.3%** to 694,000+
-  Twitter following **increased 16.3%** to 116,000+
-  Pinterest following **increased 26.6%** to 12,238
-  Instagram became our fastest growing channel, increasing **nearly 300%**, with 13,300 followers
-  LinkedIn became a dedicated channel for professional health care providers, increasing by **more than 20%** to 25,320
-  YouTube subscribers **grew by 21.2%** to 7,076, averaging 45,000+ monthly video views

 **LIVE** We took full advantage of an innovative Facebook feature that debuted in 2016. Our eight Facebook Live broadcasts highlighted topics such as diabetes prevention, eye and oral health for people with diabetes and keeping children with diabetes Safe at School.

**We continue to
be the loudest
voice in the room
on behalf of all
people affected
by diabetes.**



Telling Our Nation's Leaders: This Is Diabetes

With nearly half a million Diabetes Advocates in our ranks, the ADA is poised to amplify the voices of the more than 115 million Americans living with or at risk for diabetes. Our goal: to make sure that those with influence recognize that diabetes must be a national priority, and to mobilize their support of policies and programs that positively impact people with diabetes.

From statehouses to courthouses to our nation's capital, we have shared the challenges and triumphs of people living with diabetes to spur action and change policy. We painted pictures of a family struggling to afford critical diabetes supplies and insulin, the senior citizen whose life was changed with access to innovative diabetes technology, the young girl who hopes each day that research will find a cure, the aspiring professional who can pursue a dream free of discrimination—and many more. We showed them that ***This Is Diabetes.***

And we saw our collective voices—as families, researchers, ADA staff, health care providers and attorneys—make a significant difference.

We achieved victories in health insurance in 25 states where we defended mandated diabetes benefits laws, passed consumer protection laws and protected or improved Medicaid coverage. We also made sure people with diabetes and prediabetes receive complete,

accurate and culturally appropriate information about their health insurance coverage.

We achieved significantly bipartisan support for the Special Diabetes Program in Congress, with 75 Senators and 356 House members voicing the importance of reauthorizing the program. We enacted state coordination on diabetes legislation in additional states, bringing the total number of states with important laws that shine a light on the burden of diabetes and policy recommendations to address the burden to 24.

We took an important step to protect the rights of children with diabetes by filing a lawsuit against the U.S. Army Child, Youth & School Services for its discriminatory policies. Even more children with diabetes will have the protections they need to be Safe at School®, thanks to our work to make sure that guidelines and regulations in states with previously passed legislation continue to meet the ADA's standards. Thirty-three states now meet the tenets of our Safe at School initiative.

With additional wins in the areas of prevention, health disparities, and funding for diabetes programs and research, the ADA is primed to achieve a record number of state legislative and regulatory wins in 2017. We have educated state and federal regulators about the importance of

the Medicaid program to people with and at risk for diabetes, cautioning against future changes that could put adequate, affordable health care coverage out of reach for millions of low-income Americans.

To add to these incredible victories, we recruited more than 190,000 new Diabetes Advocates and brought new voices to our Capitol Hill Advocacy Day in Washington, D.C. There, Team Tackle—more than 34 professional football players affected by diabetes—joined advocates from around the country for 73 congressional meetings, a Senate press conference and diabetes advocacy event at the White House.

In November, the ADA also took a bold public stand on insulin affordability and launched our MakeInsulinAffordable.org website and petition, garnering more than 135,000 signatures in just the first month.

We continue to be the loudest voice in the room on behalf of all people affected by diabetes and prediabetes, empowering them to raise their own.

This is Advocacy.
This Is Diabetes.

2016 Advocacy Highlights



Strengthened Our Voice in Washington, D.C., and State Capitals Across the Country

We raised our public policy voice through testimony for congressional hearings, leadership on congressional sign-on letters, discussions with the U.S. Department of Health and Human Services and the Food and Drug Administration, and countless state-level briefings, hearings, advocacy days, summits and caucus meetings.



Enacted and Protected Public Policies to Prevent Diabetes

We secured Medicare coverage of the National Diabetes Prevention Program for seniors at risk for type 2 diabetes. Coverage is scheduled to go into effect nationwide in 2018.



Advocated to Increase Government Commitment to Stop Diabetes

We succeeded in making sure that diabetes is included among the diseases eligible for the U.S. Department of Defense's Congressionally Directed Medical Research Programs.



Protected Legal Rights

We educated patients, caregivers, schools, employers and law enforcement on the rights of people with diabetes through stories posted on our Diabetes Stops Here blog. Our Legal Advocacy team supported litigation against the Federal Aviation Administration for its rules regarding medical certification of pilots with diabetes, and filed amicus briefs in cases involving employer wellness programs, disability discrimination in employment and licensing, and special education law.



Focused Advocacy Efforts on Those at High Risk

The ADA scored important state victories that increased access to fresh and healthy foods in underserved communities and secured funding for programs to reduce health disparities. We also initiated key collaborations with federal agencies.

We successfully defeated harmful changes to the state Medicaid program. We opposed proposals that would render coverage under the program unaffordable, discriminate against people with chronic health care needs, place undue administrative burden on enrollees or eliminate coverage altogether.

Extraordinary Measures

Fighting Diabetes Discrimination in the Army

For the past year, the American Diabetes Association has been directly engaged in litigation on behalf of our youngest constituents via a lawsuit against the U.S. Army Child, Youth & School Services (Army CYSS). We allege the Army CYSS program discriminates against children with diabetes participating in its programs by not allowing staff to administer insulin or glucagon, or to assist with carbohydrate counting. These rules exclude children with diabetes from CYSS programs, which include summer camps, child care programs, and before and after-school care programs on Army bases around the world.

Access to CYSS programs is particularly important for Army families. In many cases, these families have no other child care options; they often live on bases far from family support or have work schedules outside of traditional child care operating hours.

We continue to break down the barriers that stand in the way of people with diabetes receiving the services they need. We remain committed to this lawsuit and speaking up for families who are not equipped to fight such a large, bureaucratic system alone.

STAND UP FOR AFFORDABLE INSULIN



Insulin isn't optional.

For millions of people living with diabetes, including all individuals with type 1 diabetes, access to insulin is a matter of life and death. There is no medicine that can be substituted for insulin.

And yet, the average price of insulin has skyrocketed in recent years—nearly tripling between 2002 and 2013.

On November 17, 2016, we launched our Make Insulin Affordable campaign with a resolution and petition calling upon all entities in the insulin supply chain.

Nearly 150,000 Americans signed our petition in 2016, advocating for affordable insulin for all who need it.



Awards

National Scientific & Health Care Achievement Awards



Banting Medal for Scientific Achievement

Barbara B. Kahn, MD

George Minot Professor of Medicine, Harvard Medical School
Vice Chair for Research Strategy, Department of Medicine, Beth Israel Deaconess Medical Center



Outstanding Educator in Diabetes Award

Sheri R. Colberg-Ochs, PhD, FACSM

Professor of Exercise Science, Old Dominion University
Adjunct Professor, Internal Medicine, Eastern Virginia Medical School



Outstanding Scientific Achievement Award

Tamas L. Horvath, DVM, PhD

Jean and David W. Wallace Professor of Biomedical Research
Chair and Professor of Comparative Medicine, Professor of Neurobiology and Obstetrics/Gynecology
Director of the Program in Integrative Cell Signaling and Neurobiology of Metabolism
Yale University School of Medicine



Outstanding Physician Clinician in Diabetes Award

Mayer B. Davidson, MD

Professor of Medicine, Charles R. Drew University of Medicine and Science
Professor of Medicine, David Geffen School of Medicine at UCLA



Albert Renold Award

Gordon C. Weir, MD

Professor of Medicine, Harvard Medical School
Co-head, Section on Islet Cell and Regenerative Biology, Joslin Diabetes Center



Harold Rifkin Award for Distinguished International Service in the Cause of Diabetes

Yutaka Seino, MD, PhD

President, Kansai Electric Power Hospital
Director General, Kansai Electric Power Medical Research Institute
Emeritus Professor, Kyoto University



Outstanding Achievement in Clinical Diabetes Research Award

Steven E. Kahn, MB, ChB

Professor and Leonard L. Wright and Marjorie C. Wright Chair
Division of Metabolism, Endocrinology and Nutrition
Director, Diabetes Research Center, VA Puget Sound Health Care System and University of Washington School of Medicine



Kelly West Award for Outstanding Achievement in Epidemiology

Edward W. Gregg, PhD

Captain, U.S. Public Health Service
Chief of Epidemiology and Statistics Branch, Division of Diabetes Translation, Centers for Disease Control and Prevention

Professional Interest Group Awards



Richard R. Rubin Award
Elizabeth Arquin Walker, PhD, RN
 Professor of Medicine
 Professor of Epidemiology and
 Population Health,
 Albert Einstein College of Medicine



Norbert Freinkel Award
H. David McIntyre, MD, FRACP
 Director of Obstetric Medicine,
 Mater Health Services
 Head of the Discipline of Medicine,
 University of Queensland



Edwin Bierman Award
Clay F. Semenkovich, MD
 Irene E. and Michael M. Karl Professor
 Chief, Division of Endocrinology,
 Metabolism and Lipid Research,
 Washington University



Roger Pecoraro Award
Nicolaas C. Schaper, MD, PhD
 Professor of Internal Medicine
 Head, Division of Endocrinology,
 Maastricht University Hospital

Principal Officer Awards for Leadership and Service



**Charles H. Best Medal of
 Leadership and Service**
Robin J. Richardson
 2016 Chair of the Board
 Senior Vice President,
 Moda Health



**Banting Medal for
 Leadership and Service**
Desmond Schatz, MD
 2016 President, Medicine & Science
 Professor and Associate Chairman of Pediatrics
 Medical Director, Diabetes Center
 Director, General Clinical Research Center,
 University of Florida



**Rachmiel Levine Medal for
 Leadership and Service**
Margaret A. Powers, PhD, RD, CDE
 2016 President, Health Care & Education
 Research Scientist
 International Diabetes Center

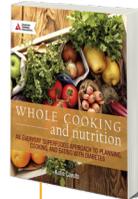
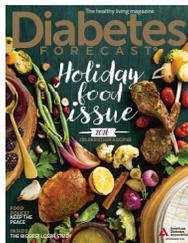


**Charles Kopke Medal for
 Leadership and Service**
Lorrie Welker Liang
 2016 Secretary/Treasurer
 Chief Operating Officer
 Sarasota Memorial Health Care System

Trusted Diabetes Information

The ADA works to ensure that access to information about diabetes and prediabetes is at the fingertips of those who need it most. At the epicenter of this effort is our Center for Information (1-800-DIABETES), where trained representatives answer questions, provide support, fulfill requests for diabetes resources, manage professional memberships and more. The Center for Information is surrounded by ADA efforts to educate and inform the public about diabetes.

- In 2016, our Center for Information responded to nearly 100,000 contacts from the public, ADA members and others requesting information or assistance.
- Our websites saw more than 45 million sessions and more than 30 million unique users.
- Diabetes.org, the ADA's content website for consumers and professionals, had 30 million sessions, up 22% from 2015.
- Our *DiabetesPro SmartBrief* e-newsletter circulation increased to 55,000 daily opt-in subscribers, with an open rate of 30%—well above average for a daily e-newsletter.
- Our Education Recognition Program (ERP) continued to operate as the largest and longest standing of the two Medicare National Accrediting Organizations with more than 1,650 Diabetes Self-Management Education (DSME) programs, more than 3,700 sites and more than 877,000 patients served annually. Medicare audits 30 of the recognized ERP programs annually, and the 2016 overall audit score was 99.5% for all DSME programs nationwide.
- Each issue of our bi-monthly healthy living magazine, *Diabetes Forecast*, continues to reach nearly 6 million people who are navigating life with diabetes or prediabetes, and their caregivers. The magazine and website provide healthy living and diabetes management tips, research news, inspirational success stories, and recipes and practical ideas about what to eat.
- Our new-and-improved Living With Type 2 Diabetes program enrolled 80,328 new participants, including 7,662 in its Spanish version of the program. This brings our total enrollment to 641,532 participants since its inception in 2011.
- *Recipes for Healthy Living* had 97,000 people register to receive recipes, meal plans and kitchen tips in 2016, for a total of 615,000 since the program's inception in 2011.



AWARD-WINNING INFORMATION

The American Diabetes Association continues to publish award-winning books for consumers and professionals on diabetes management and prevention. In 2016, the ADA:

- Directly published **15 new full-length titles**, including six new cookbooks, three self-care titles and six books devoted to the clinical care of diabetes for professionals.
- Received **seven prestigious awards** for consumer nutrition and lifestyle titles:



Nautilus Silver Award Winner
Whole Cooking and Nutrition
Katie Cavuto



Nautilus Silver Award Winner
Chef Ronaldo's Sabores de Cuba
Ronaldo Linares



Gourmand Awards, National Winner
The Perfect Diabetes Comfort Food Collection
Robyn Webb



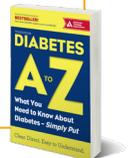
National Health Information Award: GOLD
The Six O'Clock Scramble Meal Planner
Aviva Goldfarb



National Health Information Award: SILVER
Diabetes A to Z, 7th Edition
American Diabetes Association



National Health Information Award: BRONZE
Diabetes de la A a la Z (Spanish)
American Diabetes Association



Our Supporters

It takes a groundswell of support to fund critical research; to provide educational services and programs; to prevent, treat and cure diabetes; and to eliminate its complications. We extend our sincere thanks to our donors, sponsors, volunteers and other individuals who chose to support the American Diabetes Association in 2016.

Your multi-million dollar corporate donations, your personal donations, memorial gifts and bequests, your volunteerism and your in-kind services have all enabled us to assist millions of people affected by diabetes. To our Team Tackle members, Diabetes Dance Dare supporters and anyone who contributed to our cause, in ways large and small: **Thank you!**

We are grateful for the ongoing generosity of every person who pedaled across the finish line in our Tour de Cure®, hit their stride during our Step Out Walk to Stop Diabetes®, Kissed a Pig to raise \$1.13 million, or supported our Father of the Year event by raising \$671,000.

OUR PREMIER WALK EVENT

Step Out Walk to Stop Diabetes®

- 86 Step Out Walks
- 53,000 participants
- \$12.6 million raised

OUR PREMIER CYCLING EVENT

Tour de Cure®

- 81 Tours
- 48,400 participants
- \$25.5+ million raised



Tackling Diabetes Through Team Tackle

In April 2016, the American Diabetes Association launched Team Tackle, an initiative that brings together current and former professional football players and the ADA to draw increased attention to diabetes.

With representation from every professional football team, the former players worked throughout the year to **elevate awareness** about diabetes and prediabetes; **to champion research, fair treatment and total wellness** for all people living with diabetes; and to **provide hope** to the millions of individuals and families who are managing diabetes or at risk for developing the disease.

The Team Tackle launch coincided with Capitol Hill Advocacy Day where Team Tackle members were introduced. **Thirty-four players participated in 73 meetings** with members of Congress and their staff to raise awareness of diabetes and the need for federal funding for diabetes research. There was also a live-streamed panel discussion at the White House featuring ADA leaders and Team Tackle members Rashad Jennings, Aaron Murray and Sam Acho, alongside other diabetes organizations and advocates.

Throughout 2016, Team Tackle members made appearances at our Camps and fundraising events. They sent advocacy emails, raised their voices on social media and participated in our Diabetes Dance Dare and various Tour de Cure and Step Out Walk activities.

They also featured the ADA on their game-day shoes during the league's My Cause, My Cleats awareness campaign.

Our Circle of Support

Our corporate supporters play an integral part in helping us advance our mission. Our sincere thanks for being a part of our circle!

Banting Circle Supporters

Companies that make medicines and devices to help people live with diabetes are recognized for their cumulative annual support. Our highest level of recognition, Banting Circle Elite honors companies that have given \$1 million or more.

Banting Circle Elite

- AstraZeneca Pharmaceuticals LP
- Eli Lilly and Company
- Janssen Pharmaceuticals
- Merck
- Novo Nordisk Inc.
- Sanofi

The Banting Circle includes companies that have donated \$500,000 or more:

- Ascensia Diabetes Care U.S. Inc.
- BD Diabetes Care
- Boehringer-Ingelheim Pharmaceuticals, Inc.
- Medtronic Diabetes
- Pfizer Inc.

National Strategic Partners

Consumer product companies who support the American Diabetes Association at our highest level of sponsor commitment represent our **National Strategic Partners**.

- Colgate-Palmolive Company
- NRG Energy, Inc.
- Sun Life Financial®
- The Kroger Co.
- Walgreen Co.

The American Diabetes Association would also like to thank the following

National Sponsors:

- Abbott Laboratories, Abbott Diabetes Care
- Cigna
- GlaxoSmithKline
- Hass Avocado Board
- Insulet Corporation
- Merisant Company
- The Dannon Company
- The Wonderful Company
- Visionworks® of America, Inc. & Davis Vision

Dare. Dance. Donate.

Every day is an opportunity to spark a dialogue about the prevalence of diabetes. In September 2016, the American Diabetes Association launched Diabetes Dance Dare, a national diabetes awareness and fundraising campaign, through Facebook, Twitter, Instagram and other social media channels, to ignite engagement and conversations, and to generate funds to help fight the disease.

Celebrity Chef Devin Alexander supported the launch on Facebook by challenging friends, family members and other celebrities to share a 23-second video of themselves dancing via social media using the hashtag #DiabetesDanceDare, to donate to the ADA, and then tag three others to do the same.

The short videos, posted by a number of celebrities, highlighted a key fact: Every 23 seconds someone in the U.S. is diagnosed with diabetes. Singers Usher and Kelly Clarkson, basketball legend Shaquille O’Neal, and several other athletes and celebrities shared their unique dance moves to encourage the nation to get up, dance and donate to change the course of diabetes.

Diabetes Dance Dare garnered more than one billion media impressions, including stories from several national outlets, such as ESPN, BBC, The Today Show, TMZ, Oxygen, *The Huffington Post*, *Entertainment Weekly*, *Billboard* and *Redbook*. The campaign also generated 12 million social media engagements in the form of likes, shares, comments and retweets.

**DIABETES
DANCE DARE**

Young Professional Leadership Council Promotes Volunteerism & Giving



The American Diabetes Association expanded the Young Professional Leadership Council (YPLC) in 2016 to continue to attract

and engage young community leaders, age 40 and under, with an interest in supporting our mission through volunteerism, fundraising and service.

In addition to the Baltimore, Maryland and Minneapolis, Minnesota offices, which spearheaded the initial councils, there were additional pilot programs across the country from Chicago, Illinois, to San Francisco, California, to Hampton Roads, Virginia.

The YPLC provides an active volunteer base by planning fundraising events and activities to support the ADA and our efforts to stop diabetes.



Financials

Message from the Secretary/Treasurer

The American Diabetes Association began 2016 with high expectations for a solid financial performance. The ADA raised more than \$171 million in total revenue. However, we ended 2016 with \$191 million in expenditures, resulting in a net loss of nearly \$20 million—making it a very disappointing year financially.

Despite the substantial loss, as demonstrated in this Annual Report, we were able to continue to deliver on our mission-driven work by increasing research grant funding, updating our *Standards of Care*, convening a successful 76th Scientific Sessions, producing journals, and providing educational programs to people living with and at risk for diabetes.

As a result of our 2016 financial performance, the Board of Directors implemented measures to re-position the ADA in 2017. The Board approved a four-year strategic plan and is making changes in leadership; hiring a new physician as the Chief Scientific, Medical & Mission Officer; actively investing in innovation; and working to strengthen and

streamline our infrastructure and fundraising model, all while reducing costs.

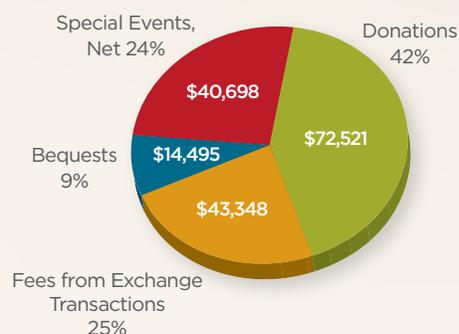
Although we finished the year with a relatively high cash reserve, which allows us to focus on key mission opportunities to meet our strategic goals, we must remain financially vigilant with our donor dollars and with the continued support we receive from volunteers and other key stakeholders. These individuals believe in our cause and entrust us to continue to work to fulfill our mission to prevent and cure diabetes and to improve the lives of all people affected by diabetes.

We are grateful for the countless contributions we receive, and we will continue to work to stabilize our organization, making the fundamental changes to our operations needed to strengthen our processes and demonstrate our financial prudence.



Lorrie Welker Liang
Secretary/Treasurer

Public Support and Other Revenue**



Total Revenue: \$171,062

Expenses



Total Expenses: \$190,650
Net Income: (\$19,588)

December 31, 2016
(in thousands of dollars)

Financial Highlights as of December 31, 2016

ASSETS	LIABILITIES	NET ASSETS
Cash and Investments \$79,603	Accounts Payable and Accrued Liabilities. \$29,160	Unrestricted Net Assets \$1,085
Accounts Receivable, Net \$10,375	Line of Credit. \$ —	Temporarily Restricted Net Assets \$83,552
Contributions Receivable, Net . . \$41,945	Research Grants Payable. \$18,988	Permanently Restricted Net Assets \$14,161
Fixed Assets, Net \$18,784	Deferred Revenues \$10,995	Total Net Assets. \$98,798
Other Assets \$7,234	Total Liabilities \$59,143	Total Liabilities and Net Assets \$157,941
Total Assets \$157,941		

** Includes \$25.2M in pharmaceutical, biotechnology and medical device corporate support, representing 14.7% of total organizational revenue.

(in thousands of dollars)

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International Diabetes Center
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