**The Florida Senate**

# BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Committee on Fiscal Policy

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| BILL: | SB 816 |
| INTRODUCER: | Senator Bradley |
| SUBJECT: | Diabetes Research |
| DATE: | February 4, 2026 |
| REVISED: | |

| | ANALYST | STAFF DIRECTOR | REFERENCE | ACTION |
|---|---|---|---|---|
| 1. | Jahnke | Bouck | HE | **Favorable** |
| 2. | Gray | Elwell | AHE | **Favorable** |
| 3. | Jahnke | Siples | FP | **Favorable** |

## I. Summary:

SB 816 codifies the University of Florida Diabetes Institute within the University of Florida College of Medicine as a statewide resource for diabetes research, prevention, treatment, and education, and focuses on all forms of diabetes, including type 1, type 2, and gestational diabetes. The bill provides for the institute to conduct research, develop prevention and treatment strategies, provide multidisciplinary clinical care, educate and train health care professionals, and engage in community outreach.

Additionally, the bill authorizes the institute to administer statewide pilot programs, maintain and share deidentified data for research purposes, and convene a statewide diabetes research and care consortium to coordinate research, share expertise, and support collaborative initiatives.

The bill does not impact state revenues or expenditures. **See Section V., Fiscal Impact Statement.**

The bill takes effect July 1, 2026.

## II. Present Situation:

### Diabetes

Diabetes is a chronic health condition that affects how the human body turns food into energy. The human body breaks down most food into sugar, known as glucose,[1] which is released into

[1] Glucose is a type of sugar that primarily comes from carbohydrates consumed through food and drinks and serves as a primary source of energy for the body. Glucose circulates in the bloodstream and is transported to the body's cells for use as energy. *See:* Cleveland Clinic, *Diabetes,* https://my.clevelandclinic.org/health/diseases/7104-diabetes (last visited Jan. 20, 2026).

the bloodstream. When blood glucose levels increase, the pancreas releases insulin. Insulin allows glucose to enter the body's cells, where it is used as a source of energy.

In individuals with diabetes, the body either produces insufficient insulin or uses it inefficiently. When insulin is insufficient or cells do not respond properly to insulin, excess glucose remains in the bloodstream. Over time, elevated blood glucose levels can lead to serious health complications, including heart disease, vision loss, and kidney disease.

There is currently no cure for diabetes; however, the condition can be managed through lifestyle changes and other interventions.

There are three basic types of diabetes:
- Type 1 diabetes.
- Type 2 diabetes.
- Gestational diabetes.[2]

***Type 1 Diabetes***

Type 1 diabetes is thought to be caused by an autoimmune reaction in which the body's immune system attacks and destroys the cells in the pancreas that normally produce insulin. Roughly 5 to 10 percent of people with diabetes have type 1. Symptoms of type 1 often develop quickly. It is usually diagnosed in children, teens, and young adults. Someone with type 1 diabetes must take insulin regularly to survive, usually through subcutaneous injection one or more times per day. Currently, type 1 diabetes can neither be prevented nor cured.[3]

***Type 2 Diabetes***

In type 2 diabetes, the body does not use insulin effectively, leading to elevated blood glucose levels. About 90 to 95 percent of people with diabetes have type 2. It develops over many years and is usually diagnosed in overweight, middle-aged adults, although it can sometimes manifest in adolescents and young adults. Type 2 diabetes can often be prevented, delayed, or even eliminated through healthy lifestyle changes, such as losing weight, eating a healthy diet, and exercising regularly.[4] Type 2 diabetes is usually treated with oral medications, but can require insulin injections in some cases.

***Gestational Diabetes***

Gestational diabetes develops in pregnant women who have never had diabetes. If a woman has gestational diabetes, her baby could be at higher risk for health problems. Gestational diabetes usually goes away after the baby is born. However, it increases the mother's risk for

[2] U.S. Centers for Disease Control, *Diabetes Basics*, https://www.cdc.gov/diabetes/about/index.html (last visited Jan. 20, 2026).
[3] Centers for Disease Control and Prevention, *Type 1 Diabetes,* https://www.cdc.gov/diabetes/about/about-type-1-diabetes.html (last visited Jan. 20, 2026).
[4] U.S. Centers for Disease Control, *Type 2 Diabetes*, https://www.cdc.gov/diabetes/about/about-type-2-diabetes.html (last visited Jan. 20, 2026).

type 2 diabetes later in life, and the baby is more likely to have obesity as a child or teen and develop type 2 diabetes later in life.[5]

**Prevalence of Diagnosed Diabetes**

The National Diabetes Statistic Report provides up-to-date information on the prevalence and incidence of diabetes and prediabetes, risk factors for complications, acute and long-term complications, deaths, and costs. Highlights of reported statistics include the following:

- In 2021, there were 29.7 million people of all ages, or 8.9 percent of the U.S. population, who had diagnosed diabetes.
- In 2021, there were 352,000 children and adolescents younger than age 20 who had diagnosed diabetes, including 304,000 with Type 1 diabetes.[6]

***Diabetes in Florida***

In Florida, recent estimates indicate that roughly 9.6 percent to 11.6 percent of the adult population has diagnosed diabetes, representing more than 2 million adults with the condition. An estimated 117,000 Florida adults are newly diagnosed each year, reflecting the prevalence of diabetes in the state.[7]

**University of Florida Diabetes Institute**

The University of Florida (UF) Diabetes Institute was founded in 2015 and operates within UF and UF Health, the university's academic health center. The institute serves as an umbrella organization that coordinates diabetes-related research, treatment, and education activities across the university.

Researchers and physicians affiliated with the institute work to prevent, diagnose, and treat diabetes across a wide range of disciplines, including immunology, genetics, endocrinology, metabolism, pediatrics, and social sciences. The institute supports both basic and clinical research and participates in national and international research collaborations to understand the causes of diabetes and improve its treatment and management.[8]

The UF Diabetes Institute serves as the primary coordinating center for the Breakthrough T1D[9] Network for Pancreatic Organ Donors with Diabetes, which supports research using donated pancreatic tissue to study how diabetes develops. In this role, the institute coordinates a global network of researchers and participates in international efforts to examine genetic and environmental factors associated with diabetes.

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[5] U.S. Centers for Disease Control, *Diabetes Basics*, https://www.cdc.gov/diabetes/about/index.html (last visited Jan. 20, 2026).
[6] U.S. Centers for Disease Control, *National Diabetes Statistical Report*, https://www.cdc.gov/diabetes/php/data-research/index.html (last visited Jan. 20, 2026).
[7] American Diabetes Association, *The Burden of Diabetes in Florida (February 2025), available at*, https://diabetes.org/sites/default/files/2025-05/the-burden-of-diabetes-florida-05-08-25.pdf (last visited Jan. 20, 2026).
[8] University of Florida, UF Diabetes Institute, *About the UF Diabetes Institute*, https://diabetes.ufl.edu/about-us/ (last visited Jan. 20, 2026).
[9] Breakthrough T1D was formerly known as the Juvenile Diabetes Research Foundation (JDRF).

Faculty affiliated with the UF Diabetes Institute have received competitive research funding from public and private sources, including the National Institutes of Health/National Institute of Diabetes and Digestive and Kidney Diseases, Breakthrough T1D, the American Diabetes Association, the Leona M. and Harry B. Helmsley Charitable Trust, and other funding agencies. According to the institute, current annual diabetes-related research funding exceeds $15 million, and UF faculty scholarship includes more than 1,100 papers, chapters, and books.[10]

## III. Effect of Proposed Changes:

This bill creates s. 1004.562, F.S., to codify the University of Florida (UF) Diabetes Institute within the UF College of Medicine as a statewide resource for diabetes research, prevention, treatment, and education. The institute's purpose is to advance scientific discovery, improve prevention and clinical care, and promote education and outreach on all forms of diabetes, including type 1, type 2, gestational, and related metabolic conditions. The bill requires the institute to:

- Conduct research on the causes, mechanisms, and potential cures of diabetes, including autoimmune, genetic, and environmental factors.
- Develop advanced prevention, diagnostic, and treatment strategies to reduce the incidence and complications of diabetes.
- Provide comprehensive, multidisciplinary clinical care to individuals living with diabetes, including patient and family education, nutrition counseling, mental health support, and disease management resources.
- Train and educate health care professionals, including physicians, nurses, dietitians, pharmacists, and scientists, to expand expertise in diabetes care and research.
- Collaborate with state universities, medical centers, community organizations, patient advocacy groups, and government agencies to advance care and accelerate progress towards prevention and cures.
- Engage in community-based outreach and education programs to reduce disparities and promote healthier lifestyles.

The bill authorizes the institute to establish and administer statewide pilot programs, including, but not limited to, screening, prevention initiatives, and technology-driven management tools. The institute must maintain a secure repository of deidentified data to advance diabetes research, prevention, and care. The bill authorizes the institute to share deidentified data with research collaborators under data-sharing agreements to support ongoing and future scientific investigations.

The bill authorizes the institute to convene a statewide diabetes research and care consortium composed of clinical and academic experts, health care providers, and patient representatives to coordinate research, share expertise, and develop innovative care models. Upon convening, the consortium must be administered by the institute under the direction of the institution's executive leadership. Additionally, the bill authorizes the consortium to solicit funding from public, nonprofit, and private sources to expand programs, research initiatives, and community services.

[10] University of Florida, UF Diabetes Institute, *About the UF Diabetes Institute*, https://diabetes.ufl.edu/about-us/ (last visited Jan. 7, 2026).

The bill requires the institute to provide an annual report to the Governor, the President of the Senate, and the Speaker of the House of Representatives, beginning October 15, 2027, detailing research projects and findings; clinical services provided and patient outcomes; community outreach and prevention initiatives; and recommendations for future initiatives.

The bill's implementation is contingent on appropriations provided in the General Appropriations Act or from other available funds.

The bill takes effect July 1, 2026.

## IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None.

## V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The bill does not impact state revenues or expenditures. However, the bill does require the University of Florida to establish a diabetes institute. To the extent the bill codifies current practices of the UF Diabetes Institute the bill does not have a fiscal impact on the University. Additionally, the bill's implementation is contingent on the availability of funding provided in the General Appropriations Act or from other available funds.

## VI. Technical Deficiencies:

None.

## VII. Related Issues:

None.

## VIII. Statutes Affected:

This bill creates section 1004.562 of the Florida Statutes.

## IX. Additional Information:

### A. Committee Substitute – Statement of Changes:
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

### B. Amendments:

None.