FLORIDA HOUSE OF REPRESENTATIVES
BILL ANALYSIS

This bill analysis was prepared by nonpartisan committee staff and does not constitute an official statement of legislative intent.

BILL #: HB 901	**COMPANION BILL:** SB 816 (Bradley)
TITLE: Diabetes Research	**LINKED BILLS:** None
SPONSOR(S): Kincart Jonsson	**RELATED BILLS:** None

Committee References

Education Administration	➤	Higher Education Budget	➤	Education & Employment
18 Y, 0 N		11 Y, 0 N		17 Y, 0 N

SUMMARY

Effect of the Bill:
The bill 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, focusing 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.

In addition, 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.

Fiscal or Economic Impact:
The fiscal impact of the bill is indeterminate. Its implementation is subject to an appropriation in the General Appropriations Act.

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ANALYSIS

EFFECT OF THE BILL:

The bill creates s. 1004.562, F.S., to codify the University of Florida (UF) Diabetes Institute (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 enhance care and accelerate progress towards diabetes prevention and cures.
- Engage in community-based outreach and education programs to increase awareness, 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 Institute'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.

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 an appropriation provided by the General Appropriations Act or from other available funds. (Section 1).

The bill takes effect July 1, 2026. (Section 2).

FISCAL OR ECONOMIC IMPACT:

STATE GOVERNMENT:

The fiscal impact of the bill is indeterminate. The implementation of the bill is contingent on the availability of funding provided in the General Appropriations Act or from other available funds.

RELEVANT INFORMATION

SUBJECT OVERVIEW:

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 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.[2]
There are three basic types of diabetes:

- Type 1 diabetes

[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 Feb. 3, 2026).
[2] U.S. Centers for Disease Control, *Diabetes Basics*, https://www.cdc.gov/diabetes/about/index.html (last visited Feb. 3, 2026).

- Type 2 diabetes
- Gestational diabetes

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 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 Statistics 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:[6]

- 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.

Diabetes in Florida
In Florida, recent estimates indicate that roughly 10 percent of the adult population has diagnosed diabetes, representing more than 2.3 million adults with the condition. An estimated 139,000 Florida adults are newly diagnosed each year, reflecting the prevalence of diabetes in the state.[7]

University of Florida Diabetes Institute

[3] Centers for Disease Control and Prevention, *Type 1 Diabetes,* https://www.cdc.gov/diabetes/about/about-type-1-diabetes.html (last visited Feb. 3, 2026).
[4] U.S. Centers for Disease Control, *Type 2 Diabetes*, https://www.cdc.gov/diabetes/about/about-type-2-diabetes.html (last visited Feb. 3, 2026).
[5] U.S. Centers for Disease Control, *Diabetes Basics*, https://www.cdc.gov/diabetes/about/index.html (last visited Feb. 3, 2026).
[6] U.S. Centers for Disease Control, *National Diabetes Statistics Report*, https://www.cdc.gov/diabetes/php/data-research/index.html (last visited Feb. 3, 2026).
[7] American Diabetes Association, *The Burden of Diabetes in Florida (August 2025), available at* https://diabetes.org/sites/default/files/2025-08/florida-diabetes-08-26-25.pdf.

The 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 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.[10]

BILL HISTORY

COMMITTEE REFERENCE	ACTION	DATE	STAFF DIRECTOR/ POLICY CHIEF	ANALYSIS PREPARED BY
Education Administration Subcommittee	18 Y, 0 N	1/21/2026	Sleap	Blalock
Higher Education Budget Subcommittee	11 Y, 0 N	1/28/2026	Fontaine	Stenson
Education & Employment Committee	17 Y, 0 N	2/3/2026	Hassell	Blalock

[8] University of Florida, UF Diabetes Institute, *About the UF Diabetes Institute*, https://diabetes.ufl.edu/about-us/ (last visited Feb. 3, 2026).
[9] Breakthrough T1D was formerly known as the Juvenile Diabetes Research Foundation (JDRF).
[10] University of Florida, UF Diabetes Institute, *About the UF Diabetes Institute*, https://diabetes.ufl.edu/about-us/ (last visited Feb. 3, 2026).