Data table for Figure 1. Percentage of adults with diagnosed diabetes who were prescribed medication in the past 12 months and used selected strategies to reduce their prescription drug costs, by sex: United States, 2017–2018

| Strategy to reduce prescription drug costs | Percent (95% confidence interval) | Standard error |
|--|--------------------------------------|----------------|
| Did not take medication as prescribed | | |
| Total | 13.2 (12.1–14.4) | 0.58 |
| Men | 11.6 (10.1–13.4) | 0.82 |
| Women | 14.9 (13.3–16.6) | 0.84 |
| Asked doctor for lower-cost medication | | |
| Total | 24.4 (23.0–25.9) | 0.74 |
| Men | 23.4 (21.4–25.5) | 1.04 |
| Women | 25.5 (23.5–27.5) | 0.99 |

NOTES: "Did not take medication as prescribed" is a composite measure that includes adults who skipped medication doses, took less medicine, or delayed filling a prescription. See definitions section in this report for more details. A person may use more than one strategy to reduce prescription drug costs. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2017–2018.

Data table for Figure 2. Percentage of adults with diagnosed diabetes who were prescribed medication in the past 12 months and used selected strategies to reduce their prescription drug costs, by age group: United States, 2017–2018

| Strategy to reduce prescription drug costs | Percent (95% confidence interval) | Standard error |
|--|--------------------------------------|----------------|
| Did not take medication as prescribed | | |
| Total | 13.2 (12.1–14.4) | 0.58 |
| Under 65 | 17.9 (16.2–19.7) | 0.89 |
| 65 and over | 7.2 (6.1–8.5) | 0.60 |
| Asked doctor for lower-cost medication | | |
| Total | 24.4 (23.0–25.9) | 0.74 |
| Under 65 | 26.3 (24.2–28.5) | 1.09 |
| 65 and over | 21.9 (20.2–23.8) | 0.91 |

NOTES: "Did not take medication as prescribed" is a composite measure that includes adults who skipped medication doses, took less medicine, or delayed filling a prescription. See definitions section in this report for more details. A person may use more than one strategy to reduce prescription drug costs. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2017–2018.

Data table for Figure 3. Percentage of adults aged 18–64 with diagnosed diabetes who were prescribed medication in the past 12 months and used selected strategies to reduce their prescription drug costs, by insurance coverage status: United States, 2017–2018

| Strategy to reduce prescription drug costs | Percent (95% confidence interval) | Standard error |
|--|--------------------------------------|----------------|
| Did not take medication as prescribed | | |
| Total | 17.9 (16.2–19.7) | 0.89 |
| Private | 14.0 (11.9–16.3) | 1.08 |
| Medicaid | 17.8 (14.0–22.1) | 1.99 |
| Uninsured | 35.7 (28.4–43.5) | 3.74 |
| Asked doctor for lower-cost medication | | |
| Total | 26.3 (24.2–28.5) | 1.09 |
| Private | 25.7 (23.0–28.6) | 1.42 |
| Medicaid | 18.8 (15.2–22.8) | 1.88 |
| Uninsured | 42.6 (34.4–51.1) | 4.14 |

NOTES: "Did not take medication as prescribed" is a composite measure that includes adults who skipped medication doses, took less medicine, or delayed filling a prescription. See definitions section in this report for more details. A person may use more than one strategy to reduce prescription drug costs. Adults aged 18–64 with "other coverage" are included in the total but are not shown separately. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2017-2018.

Data table for Figure 4. Percentage of adults aged 65 and over with diagnosed diabetes who were prescribed medication in the past 12 months and used selected strategies to reduce their prescription drug costs, by insurance coverage status: United States, 2017–2018

| Strategy to reduce | Percent | |
|--|---------------------------|----------------|
| prescription drug costs | (95% confidence interval) | Standard error |
| Did not take medication as prescribed | | |
| Total | 7.2 (6.1–8.5) | 0.60 |
| Private | 6.2 (4.5–8.2) | 0.91 |
| Medicare and Medicaid | 6.2 (3.8–9.4) | 1.36 |
| Medicare Advantage | 9.3 (6.7–12.4) | 1.38 |
| Medicare only | 9.2 (6.4–12.6) | 1.51 |
| Asked doctor for lower-cost medication | | |
| Total | 21.9 (20.2–23.8) | 0.91 |
| Private | 26.1 (23.1–29.2) | 1.54 |
| Medicare and Medicaid | 13.0 (9.1–17.8) | 2.11 |
| Medicare Advantage | 25.8 (22.1–29.9) | 1.94 |
| Medicare only | 22.7 (18.2–27.8) | 2.37 |

NOTES: "Did not take medication as prescribed" is a composite measure that includes adults who skipped medication doses, took less medicine, or delayed filling a prescription. See definitions section in this report for more details. A person may use more than one strategy to reduce prescription drug costs. Adults aged 65 and over with "other coverage" or who were uninsured are included in the total but are not shown separately. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2017–2018.