### Appendix 1. Intention-to-treat and per-protocol populations results

| Endpoint GP | Intention-to-treat | Per Protocol |
|-------------|-------------------|--------------|
|             | Criteria          | Criteria     |
|             | 1 | 3 | 1 | 3 |
| N | % | N | % | N | % | N | % |
| Healthy | 947 | 79,0% | 768 | 65,1% | 905 | 79,2% | 325 | 62,0% |
| Prediabetes | 139 | 11,6% | 226 | 19,2% | 129 | 11,3% | 106 | 20,2% |
| Diabetes | 113 | 9,4% | 186 | 15,8% | 109 | 9,5% | 93 | 17,7% |
| Total | 1199 | 100,0% | 1180 | 100,0% | 1143 | 100,0% | 524 | 100,0% |

| Endpoint Endocrinologist | Intention-to-treat | Per Protocol |
|--------------------------|-------------------|--------------|
|             | Criteria          | Criteria     |
|             | 1 | 3 | 1 | 3 |
| N | % | N | % | N | % | N | % |
| Healthy | 919 | 76,3% | 781 | 64,3% | 877 | 76,3% | 328 | 60,7% |
| Prediabetes | 174 | 14,4% | 241 | 19,8% | 166 | 14,4% | 116 | 21,5% |
| Diabetes | 112 | 9,3% | 193 | 15,9% | 106 | 9,2% | 96 | 17,8% |
| Total | 1205 | 100,0% | 1215 | 100,0% | 1149 | 100,0% | 540 | 100,0% |

### Appendix 2. Cost of identifying one patient with T2DM

| Method of screening | Number of eligibility criteria |
|---------------------|--------------------------------|
| HbA1c | Glucose | 3 factors | 1 factor |
| Screened (N) | 1,195 | 1,225 | 1,215 | 1,205 |
| Diagnosed T2DM (N) | 140 | 165 | 193 | 112 |
| Cost of 1 procedure (UZS) | 37,500 | 5,000 | 5,000 | 5,000 |
| Cost of all procedures (UZS) | 11,620,000 | 3,547,500 | 8,515,000 | 6,652,500 |
| Cost of identifying 1 patient with T2DM (UZS) | 83,000 | 21,500 | 44,119 | 59,397 |
* Cost of 1 procedure (USD) | 4.46 | 0.59 | 0.59 | 0.59 |
* Cost of all procedures (USD) | 1,381 | 422 | 1,012 | 791 |
* Cost of identifying 1 patient with T2DM (USD) | 9.86 | 2.55 | 5.24 | 7.06 |

*Conversion rate as of May 10, 2019: 8415 soms per 1 US Dollar
Appendix 3. “Patient funnel” from the first to the second visit in the “incidental glycemia–fasting glucose” scenario

Note: among 1105 patients, 954 patients did not come in a fasting state and were tested for an incidental glycemia on Visit 1. Among them, 68.4% had a glucose level < 7.8 mmol/L, 9% had a glucose level ≥ 11.1 mmol/L and were referred to an endocrinologist, 23% had a glucose level between 7.8 and 11.1 mmol/L and were asked to come for Visit 2 for fasting glucose testing. 68.8% of these patients did not come for Visit 2.
Appendix 4. “Patient funnel” from the first to the second visit in the “incidental glucose–HbA1c” scenario

Note: among 1196 patients, 346 came in a fasting state. Among them, 53% had a glucose level < 6.1 mmol/L. 17% had a glucose level ≥ 7.1 mmol/L. 31 out of these 60 patients had an additional HbA1c determination; among them 94% had HbA1c ≥ 6.5%. 30% out of the patients who came in a fasting state had a glucose level between 6.1 and 7.0 mmol/L. 60 out of these 103 patients had an additional HbA1c determination; among them only 2% had HbA1c ≥ 6.5%.

Among 1196 patients, 850 did not come in a fasting state. Among them, 84% had a glucose level < 7.8 mmol/L. 6% had a glucose level ≥ 11.1 mmol/L. 32 out of these 51 patients had an additional HbA1c determination; among them 81% had HbA1c ≥ 6.5%. 10% out of the patients who did not come in a fasting state had a glucose level between 7.8 and 11.0 mmol/L. 67 out of these 88 patients had an additional HbA1c determination; among them 22% had HbA1c ≥ 6.5%