SUPPLEMENTARY DATA

Supplementary Table 1. A) Annual Transition Probabilities for Incidence Module of T2DM and NAFLD patients in the U.S. 2017 for patients aged 50-64 B) Annual Transition Probabilities for Prevalence Module of T2DM and NASH patients in the U.S. for patients aged 50-64

Incidence Module

Annual Transition Probabilities

	NAFL	F0	F1	F2	F3	CC	DCC	HCC	1yPLT	PLT	LRM	CVM	BM
NAFL	98.68%	0.28%	0.01%	≠	≠	≠	≠	≠	≠	≠	≠	0.30%	0.73%
F0	1.00%	86.05%	5.88%	3.04%	1.53%	1.03%	≠	0.04%	≠	≠	0.06%	0.64%	0.73%
F1	0.50%	2.24%	89.24%	3.96%	2.22%	0.30%	≠	0.04%	≠	≠	0.13%	0.64%	0.73%
F2	≠	1.34%	4.40%	86.12%	3.15%	2.63%	≠	0.53%	≠	≠	0.10%	1.00%	0.73%
F3	≠	≠	4.09%	4.09%	77.49%	8.85%	≠	0.53%	≠	≠	1.58%	2.64%	0.73%
CC	≠	≠	≠	≠	4.36%	79.01%	9.60%	1.35%	≠	≠	2.30%	2.64%	0.73%
DCC	≠	≠	≠	≠	≠	≠	54.99%	2.60%	12.00%	≠	25.00%	4.68%	0.73%
HCC	≠	≠	≠	≠	≠	≠	≠	49.00%	15.00%	≠	28.31%	6.96%	0.73%
1yPLT	≠	≠	≠	≠	≠	≠	≠	≠	≠	89.00%	7.02%	3.25%	0.73%
PLT	≠	≠	≠	≠	≠	≠	≠	≠	≠	90.32%	7.00%	1.95%	0.73%

Prevalence Module

Annual Transition Probabilities

	F0	F1	F2	F3	CC	DCC	HCC	1yPLT	PLT	LRM	CVM	BM
F0	87.05%	5.88%	3.04%	1.53%	1.03%	≠	0.04%	≠	≠	0.06%	0.64%	**0.73%**
F1	2.24%	89.74%	3.96%	2.22%	0.30%	≠	0.04%	≠	≠	0.13%	0.64%	**0.73%**
F2	1.34%	4.40%	86.12%	3.15%	2.63%	≠	0.53%	≠	≠	0.10%	1.00%	**0.73%**
F3	≠	4.09%	4.09%	77.49%	8.85%	≠	0.53%	≠	≠	1.58%	2.64%	**0.73%**
CC	≠	≠	≠	4.36%	79.01%	9.60%	1.35%	≠	≠	2.30%	2.64%	**0.73%**
DCC	≠	≠	≠	≠	≠	54.99%	2.60%	**12.00%**	≠	25.00%	4.68%	**0.73%**
HCC	≠	≠	≠	≠	≠	≠	49.00%	**15.00%**	≠	28.31%	6.96%	**0.73%**
1yPLT	≠	≠	≠	≠	≠	≠	≠	≠	**89.00%**	7.02%	3.25%	**0.73%**
PLT	≠	≠	≠	≠	≠	≠	≠	≠	90.32%	7.00%	1.95%	**0.73%**

[‡]Transition rates were multiplied by relative risk of 1.48 compared to general population

[§] Transition rates were multiplied by relative risk of 1.20 compared to general population

SUPPLEMENTARY DATA

Supplementary Table 2. Annual Transition Probabilities for Liver Transplants varied for age

Age	DCC to 1yPLT	HCC to 1yPLT	1yPLT to PLT
18-34	5%	10%	95%
35-49	8%	12%	89%
50-64	12%	15%	89%
65-74	0%	0%	80%
75+	0%	0%	0%

SUPPLEMENTARY DATA

Supplementary Table 3. Annual Background Mortality by Age Group

Age	5 year TP	1 year rate	1 year TP
15-20	0.23%	0.000452912	0.05%
20-25	0.42%	0.000837551	0.08%
25-30	0.50%	0.000997684	0.10%
30-35	0.59%	0.001174039	0.12%
35-40	0.73%	0.001473011	0.15%
40-45	1.01%	0.002022189	0.20%
45-50	1.54%	0.003105587	0.31%
50-55	2.42%	0.004909570	0.49%
55-60	3.60%	0.007328855	0.73%
60-65	5.05%	0.010370922	1.03%
65-70	7.08%	0.014688408	1.46%
70-75	10.85%	0.022960098	2.27%
75-80	16.83%	0.036853329	3.62%
80-85	26.83%	0.062488691	6.06%
85-90	41.98%	0.108863728	10.31%
90-95	60.82%	0.187384931	17.09%
95-100	78.31%	0.305699183	26.34%
100+	100.00%	2.744040075	93.57%

Supplementary Table 4. Model Deterministic Inputs and Probabilistic Parameters for Sensitivity Analysis for Patients Aged 50-64

Annual State Costs						
Input	**Base Case Deterministic Value (50-64 years old)**	**Source**	**Distribution**	**Alpha**	**Beta**	**Standard Error**
NAFL	$121.96	2017 Current Procedural Terminology (CPT) codes, assuming non-facility prices, global service, and no modifiers. Fibrosis costs include annual low-to-medium complexity coded physician consultations, transient elastography, lipid panel, liver profile, complete blood count, and one-time screening per patient for hepatitis B and C. F3 costs include a liver biopsy.	Gamma	9	14	*41*
F0	$137.11			9	15	*46*
F1	$159.79			9	18	*53*
F2	$159.79			9	18	*53*
F3	$1,128.43			9	125	*376*
CC	$17,969.39	Kaplan, D. E. *et al.* Healthcare Costs Related to Treatment of Hepatocellular Carcinoma Among Veterans With Cirrhosis in the United States. *Clin. Gastroenterol. Hepatol.* **16,** 106–114.e5 (2018).		9	1997	*5990*
DCC	$41,357.08	Kaplan, D. E. *et al.* Healthcare Costs Related to Treatment of Hepatocellular Carcinoma Among Veterans With Cirrhosis in the United States. *Clin. Gastroenterol. Hepatol.* **16,** 106–114.e5 (2018).		9	4595	*13786*
HCC	$89,437.40	Kaplan, D. E. *et al.* Healthcare Costs Related to Treatment of Hepatocellular Carcinoma Among Veterans With Cirrhosis in the United States. *Clin. Gastroenterol. Hepatol.* **16,** 106–114.e5 (2018).		9	9937	*29812*
1yPLT	$403,836.15	HCUP National Inpatient Sample (NIS). Cost-to-Charge Ratio Files (CCR). Healthcare Cost and Utilization Project (HCUP). 2016. Agency for Healthcare Research and Quality, Rockville, MD. www.hcup-us.ahrq.gov/ nisoverview.jsp.		9	44871	*134612*
		Bentley, T. S., Phillips, S. J. & Hanson, S. G. 2017 U.S. organ and tissue transplant cost estimates and discussion. 20				

		(2017).				
PLT	$3,836.15	2017 Current Procedural Terminology (CPT) codes, assuming non-facility prices, global service, and no modifiers. Inclusive of annual follow-up visits for transplant related care and anti-rejection medications. We did not include costs of potential transplant-related complications.		9	1426	*279*
Diabetes	$7,400.00	Yang W, Dall TM, Beronjia K, Lin J, Semilla AP, Chakrabarti R, et al. Economic costs of diabetes in the U.S. in 2017. Diabetes Care. 2018;41(5):917–28.		4	1850	*3700*
Demographics of T2DM, NAFL, NASH						
Input	**Base Case Deterministic Value (50-64 years old)**	**Source**	**Distribution**	**Lower Bound**	**Upper Bound**	**Most Likely Value**
Diagnosed T2DM Prevalence	12.4%	Centers for Disease Control and Prevention. National Diabetes Statistics Report, 2017. Atlanta, GA; 2017.	Beta PERT	8.4%	15.4%	12.4%
T2DM-NASH Incidence Factor	3.5	Assumption based on: Mantovani, A., Byrne, C. D., Bonora, E. & Targher, G. Nonalcoholic fatty liver disease and risk of incident type 2 diabetes: A meta-analysis. Diabetes Care 41, 372–382 (2018).		2	5	3.5
NAFL (Non-NASH NAFLD) Prevalence in T2DM	47%	Dai, W. et al. Prevalence of nonalcoholic fatty liver disease in patients with type 2 diabetes mellitus: A meta-analysis. Med. (United States) 96, (2017). Younossi ZM, Golabi P, de Avila L, Minhui Paik J, Srishord M, Fukui N, et al. The Global Epidemiology of NAFLD and NASH in Patients with type 2 diabetes: A Systematic Review and Meta-analysis. J Hepatol [Internet]. 2019; Available from: https://doi.org/10.1016/j.jhep.2019.06.021		27%	57%	42%
NASH Prevalence in T2DM	26%	Younossi ZM, Golabi P, de Avila L, Minhui Paik J, Srishord M, Fukui N, et al. The Global Epidemiology of NAFLD and NASH in Patients with type 2 diabetes: A Systematic Review and		18%	36%	27%

		Meta-analysis. J Hepatol [Internet]. 2019; Available from: https://doi.org/10.1016/j.jhep.2019.06.021				
Annual Transition Probabilities						
Input	**Deterministic Value**	**Source**	**Probabilistic Sensitivity Analysis**			
			Distribution	**Alpha**	**Beta**	**Standard Error**
NAFL						
NAFLNAFL	0.9868	Subtract from 1		131	2	*0.0099*
NAFLF0	0.0028	Assumption: 20% of NAFLD incidence rate (Allen AM, Therneau TM, Larson JJ, Coward A, Somers VK, Kamath PS. Nonalcoholic fatty liver disease incidence and impact on metabolic burden and death: A 20 year-community study. Hepatology. 2018;67(5):1726–36.) multipled by the T2DM-NASH incidence factor (3.5 in base-case analysis)		1	348	*0.0028*
NAFLF1	0.0001	Assumption	Dirichlet	1	19997	*0.0001*
NAFLBM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		1	166	*0.0066*
NAFLCVM	0.0030	Center for Disease Control and Prevention (CDC). National Center for Health Statistics (NCHS). Plan and Operation of the Third National Health and Nutrition Examination Survey 1988-94. https://wwwn.cdc.gov/nchs/nhanes/nhanes3/datafiles.aspx		1	330	*0.0030*
F0						
F0NAFL	0.0100	Assumption	Dirichlet	2	152	*0.0080*
F0F0	0.8605	Subtract from 1		1318	200	*0.0087*
F0F1	0.0588	Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin.*		116	1859	*0.0053*

		Gastroenterol. Hepatol. **13,** 643–654 (2015).			
F0F2	0.0304	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).	24	937	*0.0051*
F0F3	**0.0153**	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).	25	1912	*0.0025*
F0CC	**0.0103**	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).	25	2368	*0.0021*
F0HCC	**0.0004**	Younossi, Z. M. *et al.* Global epidemiology of nonalcoholic fatty liver disease—Meta-analytic assessment of prevalence, incidence, and outcomes. *Hepatology* **64,** 73–84 (2016).	1	2497	*0.0004*
F0LRM	**0.0006**	Dulai, P. S. *et al.* Increased risk of mortality by fibrosis stage in nonalcoholic fatty liver disease: Systematic review and meta-analysis. *Hepatology* **65,** 1557–1565 (2017).	1	1664	*0.0006*
F0BM	**0.0073**	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).	1	134	*0.0073*

F0CVM	**0.0064**	Center for Disease Control and Prevention (CDC). National Center for Health Statistics (NCHS). Plan and Operation of the Third National Health and Nutrition Examination Survey 1988-94. https://wwwn.cdc.gov/nchs/nhanes/nhanes3/datafiles.aspx		6	963	*0.0026*
F1						
F1NAFL	0.0050	Assumption	Dirichlet	2	308	*0.004*
F1F0	0.0224	Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin. Gastroenterol. Hepatol.* **13,** 643–654 (2015).		1	52	*0.020*
F1F1	0.8924	Subtract from 1		155	17	*0.023*
F1F2	0.0396	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).		3	78	*0.020*
F1F3	0.0222	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).		3	144	*0.011*
F1CC	0.0030	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty		2	513	*0.002*

		Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).				
F1HCC	0.0004	Younossi, Z. M. *et al.* Global epidemiology of nonalcoholic fatty liver disease—Meta-analytic assessment of prevalence, incidence, and outcomes. *Hepatology* **64,** 73–84 (2016).		1	2497	*0.000*
F1LRM	0.0013	Dulai, P. S. *et al.* Increased risk of mortality by fibrosis stage in nonalcoholic fatty liver disease: Systematic review and meta-analysis. *Hepatology* **65,** 1557–1565 (2017).		1	779	*0.001*
F1BM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		1	134	*0.007*
F1CVM	0.0064	Center for Disease Control and Prevention (CDC). National Center for Health Statistics (NCHS). Plan and Operation of the Third National Health and Nutrition Examination Survey 1988-94. https://wwwn.cdc.gov/nchs/nhanes/nhanes3/datafiles.aspx		1	153	*0.006*
F2						
F2F0	0.0134	Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin. Gastroenterol. Hepatol.* **13,** 643–654 (2015).	Dirichlet	1	72	*0.013*
F2F1	0.0440	Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin. Gastroenterol. Hepatol.* **13,** 643–654 (2015).		1	20	*0.044*
F2F2	0.8612	Subtract from 1		12	2	*0.087*
F2F3	0.0315	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009).		1	35	*0.026*
		Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty				

		Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin. Gastroenterol. Hepatol.* **13,** 643–654 (2015).				
F2CC	0.0263	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).		1	35	*0.026*
F2HCC	0.0053	Younossi, Z. M. *et al.* Global epidemiology of nonalcoholic fatty liver disease—Meta-analytic assessment of prevalence, incidence, and outcomes. *Hepatology* **64,** 73–84 (2016).		1	187	*0.005*
F2LRM	0.0010	Dulai, P. S. *et al.* Increased risk of mortality by fibrosis stage in nonalcoholic fatty liver disease: Systematic review and meta-analysis. *Hepatology* **65,** 1557–1565 (2017).		1	997	*0.001*
F2BM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		1	134	*0.007*
F2CVM	0.0100	Center for Disease Control and Prevention (CDC). National Center for Health Statistics (NCHS). Plan and Operation of the Third National Health and Nutrition Examination Survey 1988-94. https://wwwn.cdc.gov/nchs/nhanes/nhanes3/datafiles.aspx		1	97	*0.010*
F3						
F3F1	0.0409	Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin. Gastroenterol. Hepatol.* **13,** 643–654 (2015).	Dirichlet	1	34	*0.033*
F3F2	0.0409	Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty		1	22	*0.041*

		Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin. Gastroenterol. Hepatol.* **13,** 643–654 (2015).				
F3F3	0.7749	Subtract from 1		13	3	*0.099*
F3CC	0.0885	Hossain, N. *et al.* Independent predictors of fibrosis in patients with nonalcoholic fatty liver disease. *Clin. Gastroenterol. Hepatol.* **7,** 1224-1229 (2009). Singh, S. et al. Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. Clin. Gastroenterol. Hepatol. 13, 643–654 (2015).		1	14	*0.071*
F3HCC	0.0053	Younossi, Z. M. *et al.* Global epidemiology of nonalcoholic fatty liver disease—Meta-analytic assessment of prevalence, incidence, and outcomes. *Hepatology.* **64,** 73–84 (2016).		1	187	*0.005*
F3LRM	0.0158	Dulai, P. S. *et al.* Increased risk of mortality by fibrosis stage in nonalcoholic fatty liver disease: Systematic review and meta-analysis. *Hepatology* **65,** 1557–1565 (2017).		1	60	*0.016*
F3BM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		1	134	*0.007*
F3CVM	0.0264	Center for Disease Control and Prevention (CDC). National Center for Health Statistics (NCHS). Plan and Operation of the Third National Health and Nutrition Examination Survey 1988-94. https://wwwn.cdc.gov/nchs/nhanes/nhanes3/datafiles.aspx		1	73	*0.013*
CC						
CCF3	0.0436	Singh, S. *et al.* Fibrosis Progression in Nonalcoholic Fatty Liver vs Nonalcoholic Steatohepatitis: A Systematic Review and Meta-analysis of Paired-Biopsy Studies. *Clin. Gastroenterol. Hepatol.* **13,** 643–654 (2015).	Dirichlet	1	20	0.044

CCCC	0.7901	Subtract from 1		19	5	0.080
CCDCC	0.0960	Ekstedt, M. *et al.* Long-term follow-up of patients with NAFLD and elevated liver enzymes. *Hepatology* **44,** 865–873 (2006).		1	10	0.086
CCHCC	0.0135	Kanwal, F. *et al.* Risk of Hepatocellular Cancer in Patients With Non-Alcoholic Fatty Liver Disease. *Gastroenterology* **155,** 1828–1837.e2 (2018).		1	71	0.014
CCLRM	0.0230	Dulai, P. S. *et al.* Increased risk of mortality by fibrosis stage in nonalcoholic fatty liver disease: Systematic review and meta-analysis. *Hepatology* **65,** 1557–1565 (2017).		1	40	0.023
CCBM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		1	134	0.007
CCCVM	0.0264	Center for Disease Control and Prevention (CDC). National Center for Health Statistics (NCHS). Plan and Operation of the Third National Health and Nutrition Examination Survey 1988-94. https://wwwn.cdc.gov/nchs/nhanes/nhanes3/datafiles.aspx		1	73	0.013
DCC						
DCCDCC	0.5499	Subtract from 1	Dirichlet	8	9	0.120
DCCHCC	0.0260	Kanwal, F. *et al.* Risk of Hepatocellular Cancer in Patients With Non-Alcoholic Fatty Liver Disease. *Gastroenterology* **155,** 1828–1837.e2 (2018).		1	36	0.026
DCC1yPLT	0.1200	Varied by age and based on: Wong, R. J. *et al.* Nonalcoholic steatohepatitis is the second leading etiology of liver disease among adults awaiting liver transplantation in the United States. *Gastroenterology* **148,** 547–555 (2015).		3	7	0.135
DCCLRM	0.2500	Zipprich A, Garcia-Tsao G, Rogowski S, Fleig WE, Seufferlein T, Dollinger MM. Prognostic indicators of survival in patients with compensated and decompensated cirrhosis. Liver Int. 2012;32(9):1407–14.		5	24	0.069

DCCBM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		1	134	0.007
DCCCVM	0.0468	Assumption made from: Zipprich A, Garcia-Tsao G, Rogowski S, Fleig WE, Seufferlein T, Dollinger MM. Prognostic indicators of survival in patients with compensated and decompensated cirrhosis. Liver Int. 2012;32(9):1407–14		1	61	0.016
HCC						
HCCHCC	0.4900	Golabi, P. *et al.* Mortality assessment of patients with hepatocellular carcinoma according to underlying disease and treatment modalities. *Med. (United States)* **96,** (2017).		4	38	*0.043*
HCC1yPLT	0.1500	Varied by age and based on: Wong, R. J. *et al.* Nonalcoholic steatohepatitis is the second leading etiology of liver disease among adults awaiting liver transplantation in the United States. *Gastroenterology* **148,** 547–555 (2015).	Dirichlet	15	22	*0.080*
HCCLRM	0.2831	Subtract from 1		5	5	*0.147*
HCCBM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		1	134	*0.007*
HCCCVM	0.0696	Golabi, P. *et al.* Mortality assessment of patients with hepatocellular carcinoma according to underlying disease and treatment modalities. *Med. (United States)* **96,** (2017).		1	66	*0.016*
1yPLT						
1yPLTPLT	0.8900	Pais, R. *et al.* NAFLD and liver transplantation: Current burden and expected challenges. *J Hepatol* **65,** 1245–1257 (2016).	Dirichlet	1448	1499	*0.009*
1yPLTLRM	0.0702	Subtract from 1		334	348	*0.006*
1yPLTBM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).		14	9927	*0.000*
1yPLTCVM	0.0325	Pais, R. *et al.* NAFLD and liver transplantation: Current burden and expected challenges. *J Hepatol* **65,** 1245–1257		145	122	*0.001*

		(2016).				
PLT						
PLTPLT	0.9032	Subtract from 1		13	8	*0.091*
PLTLRM	0.0700	Sadler, E. M. *et al.* Liver transplantation for NASH-related hepatocellular carcinoma versus Non-NASH etiologies of hepatocellular carcinoma. *Transplantation* **102,** 640–647 (2018).		1	1	*0.078*
PLTBM	0.0073	Arias, E., Heron, M. & Xu, J. *United States Life Tables*. *National Vital Statistics Reports* (2017).	Dirichlet	0	1	*0.007*
PLTCVM	0.0195	Surabhi, M. Is liver transplantation a risk factor for cardiovascular disease? *Liver Transplant.* **18,** 1140–1146 (2012).		0	1	*0.015*

SUPPLEMENTARY DATA

Supplementary Table 5. Average Results from 10,000 Monte Carlo microsimulations in Probabilistic Sensitivity Analysis Compared to Deterministic Results (Base Case 50-64 Years Old)

Incidence Module

Model	Lifetime Costs*	NAFL Costs*	NASH Costs*	NAFL Diabetes Costs*	NASH Diabetes Costs*	LT	LRM	CVM	DCC Person Years	HCC Person Years
Deterministic	$363,239	$353,277	$9,962	$347,549	$8,358	155	8,869	203,522	14,155	5,200
Probabilistic	$346,582	$333,991	$12,591	$328,582	$10,485	117	5,511	435,797	12,119	2,570

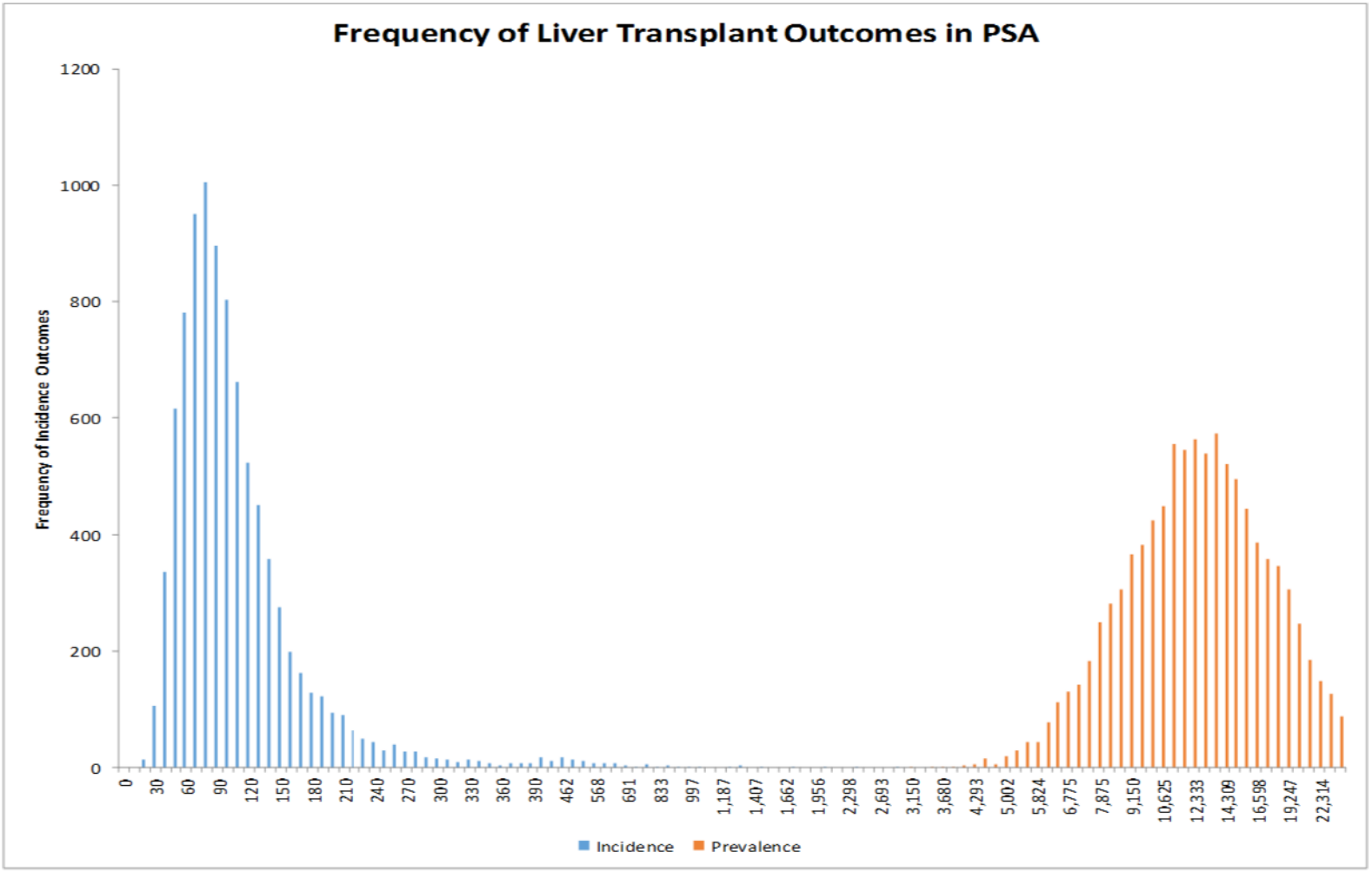
Prevalence Module

Model	Lifetime Cost*	Diabetes Costs*	LT	LRM	CVM	DCC Person Years	HCC Person Years
Deterministic	$238,878	$168,019	29,478	352,785	372,621	566,438	198,259
Probabilistic	$227,797	$166,698	13,872	127,728	510,993	370,867	58,423

*Costs in millions

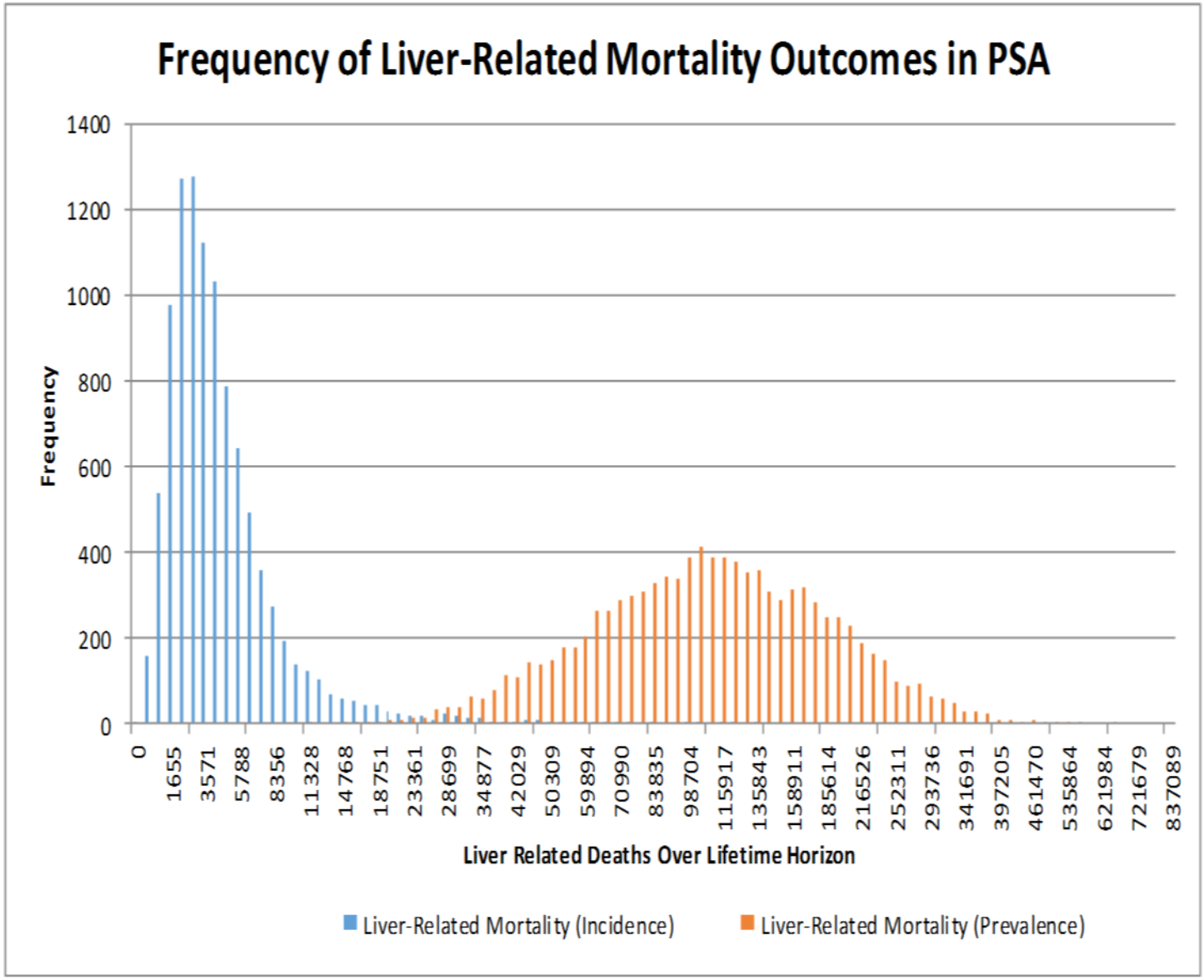
SUPPLEMENTARY DATA

Supplementary Figure 1A



SUPPLEMENTARY DATA

Supplementary Figure 1B



SUPPLEMENTARY DATA

Supplementary Figure 1C