

Preventive Health and Health Services Block Grant

**MAKING HEADWAY IN THE FIGHT AGAINST DIABETES IN WEST VIRGINIA**

May 21, 2015

**Public Health Problem (Issue)**

Before people develop type 2 diabetes, they usually have prediabetes, which is sometimes referred to as “borderline” diabetes. Those with prediabetes have blood glucose (blood sugar) levels higher than normal but not high enough to be classified as diabetes. Prediabetes usually has no symptoms. The vast majority of people living with prediabetes do not know they have it. Long-term damage to the body, especially the heart and circulatory system, may already be occurring. A person who has prediabetes is 5 to 15 times more likely to develop type 2 diabetes than someone with normal blood glucose is. It is estimated that almost half a million West Virginia adults aged 20 years or older have prediabetes, but only 80,000 are aware that they have it.<sup>1</sup>

**Taking Action (Intervention)**

The West Virginia Bureau for Public Health (BPH) is implementing the Diabetes Primary Prevention Project in communities throughout West Virginia. The National Diabetes Prevention Program reduces the risk of developing type 2 diabetes by encouraging the participants to lose a modest amount of weight and increase physical activity to 150 minutes per week. This project amplifies the activities being undertaken by the West Virginia Division of Health Promotion & Chronic Disease (HPCD) as part of the Centers for Disease Control and Prevention’s State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health grant. This grant seeks to improve population health through coordinated chronic disease prevention programs and projects.

In October 2014, HPCD conducted a strategic planning session facilitated by the National Association of Chronic Disease Directors and selected partners to identify specific action steps for expanding the program statewide. Areas of expansion include: Program Accessibility, Public and Provider Awareness, Physician Referrals, and Reimbursement. A second strategic planning session is planned for June 11, 2015.

Supporting actions include the development of a toll free number for quick access to program availability; a targeted media campaign to increase awareness of the program; and a special evaluation reporting system that will be used to assess costs savings for participants/health plans.

To expand the number of diabetes self-management education programs, HPCD and its partners formed the Diabetes Task Force. This group consists of representatives from the West Virginia Bureau for Public Health, West Virginia and Marshall Universities, health centers, health plan providers, and more.

The task force operates in three workgroups:

**Management Workgroup**

- Addresses public awareness of diabetes self-management education programs by working with community and professional groups to provide education and present information.
- Improves the barriers to referrals from healthcare providers by demonstrating the value of participating in diabetes self-management education programs.
- Targets nurse practitioners and pharmacists to provide education to those with diabetes and investigates reimbursement for those providers.
- External collaborators include the West Virginia Council of Churches, the Partnership for African Americans Church Institute, West Virginia Rural Health Conference, and the American Diabetes Association.

**Return on Investment Workgroup**

- Creating a return on investment document specific to West Virginia payers. This document will focus on the cost of diabetes (both medical and non-medical) and how coverage of diabetes self-management education programs can help alleviate and offset costs.
- In addition to representatives from the West Virginia Bureau for Public Health, workgroup members

include Coventry Health Care of West Virginia, Mid-Ohio Valley Health Department, WVU Office of Health Sciences Research, the Community Health Network of West Virginia, and the West Virginia Bureau for Medical Services.

### Prevention Workgroup

- Increases awareness of diabetes prevention programs by engaging community champions to raise awareness of prediabetes among those at risk, and by encouraging screening and referral to diabetes prevention programs by healthcare providers.
- Convening a meeting of diabetes prevention program coaches to determine solutions to barriers in access to classes.
- Workgroup members include representatives from the Bureau for Public Health, West Virginia University, West Virginia Medicaid, Cabell-Huntington, Kanawha-Charleston and Mid-Ohio Valley Health Departments, and healthcare providers.

**There are currently 10 sites in West Virginia with pending recognition status for the NDPP. It is our goal to expand the number of sites to 30 statewide by the end of 2015.**

The actions and activities of the Diabetes Prevention Task Force are on-going. West Virginia recognizes diabetes as a major threat to the wellness and financial stability of employers, health plans and citizens across West Virginia. Using the information and solutions from the task force will inform decision-makers, healthcare providers and influential bodies in policy development and programmatic areas to target.

### Impact

- Greater awareness among the insurance provider community about the need to establish reimbursement mechanisms for coaching and related activities of the NDPP;
- Greater enthusiasm and energy by health care providers (e.g., FQHCs, free clinics, rural health clinics, Critical Access Hospitals, etc.) community organizations (e.g., county Extension Service offices, Family Resource Networks (FRNs)) about the prospects for reaching and serving the pre-diabetes population in West Virginia;
- Renewed leadership from the DHHR Secretary's Office for prioritizing chronic disease prevention in WV, specifically, diabetes and heart disease;
- The belief among all partners that progress can finally be made to halt or slow the impact of diabetes on our adult population

### Footnotes

1. West Virginia Health Statistics Center, West Virginia Behavioral Risk Factor Surveillance System, 2013

#### Success Story Author Contact:

Jessica Wright, Director, Division of Health Promotion and Chronic Disease  
Office of Community Health Systems and Health Promotion

[jessica.g.wright@wv.gov](mailto:jessica.g.wright@wv.gov)

304-356-4229

#### Block Grant Coordinator Information:

#### West Virginia Department of Health & Human Resources

Joseph Barker, PHHS Block Grant Coordinator

350 Capitol Street, Room 515

Charleston, WV 25301-3716

Phone: 304-356-4249

E-mail: [Joseph.L.Barker@wv.gov](mailto:Joseph.L.Barker@wv.gov)

Web site: [www.dhhr.wv.gov](http://www.dhhr.wv.gov)

**Healthy People Objective**

Prevention Behaviors Among Persons with Pre-Diabetes

**PHHS Block Grant Funding**

10-49% - Partial source of funding

**PHHS Block Grant Coordinator**

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Charleston, WV 25301-3716

Phone: 304-356-4249

Web: [www.dhhr.wv.gov](http://www.dhhr.wv.gov)

**For more information on the PHHS Block Grant, go to [www.cdc.gov/phhsblockgrant](http://www.cdc.gov/phhsblockgrant)**

**For more information on Healthy People, go to [www.healthypeople.gov](http://www.healthypeople.gov)**

**PHHS Block Grant Supports West Virginia Healthy People Priorities**

The PHHS Block Grant provides flexible funding that states can use to prevent and control chronic diseases, respond quickly to outbreaks of infections and waterborne diseases, and address their specific public health needs. States can align their programs with health objectives from [Healthy People](#).

West Virginia uses its funds to address 14 health objective priorities, including

- Rapid Prehospital Emergency Care (EMS).
- Public Health Agencies Laboratory Services.
- Hepatitis C.
- School Health Education.
- Sexual Violence (Rape Prevention).

For a complete list of funded health objectives, go to <http://www.cdc.gov/phhsblockgrant/stateHPprior.htm>.