Diabetes Prevention and Management Programs Offered in West Virginia, 2017

Program Program Type Program Eligibility	National Diabetes Prevention Program (NDPP) Accredited by the Centers for Disease Control and Prevention (CDC). Prevention • Current age ≥ 18 years and • Most recent BMI ≥ 24 (≥22 if Asian) and • A positive lab test result within previous 12 months: • HbA1C 5.7–6.4% or • FPG 100–125 mg/dL or • OGTT 140–199 mg/dL or • High-risk for pre-diabetes using CDC or AMA Screening test or • History of gestational diabetes (may be self-reported)	Accreditation Program (DEAP) Accredited by the American Association of Diabetes Educators (AADE). Accredited by the American Diabetes Association (ADA). Individuals diagnosed with diabetes.		Everyone with Diabetes Counts Program (EDC) Supported by Quality Innovation Network (QIN)-Quality Improvement Organizations (QIO's) Insights. Management Individuals diagnosed with diabetes.	Individuals diagnosed with diabetes.	Public Employee Insurance Association (PEIA) Face To Face Program Individuals diagnosed with diabetes insured by PEIA.
Program Description	 Program Overview: An evidence-based lifestyle intervention supporting a 58% reduction in the number of new cases of diabetes overall, and a 71% reduction in new cases for those over age 60. Results are achieved through improved nutrition and increased physical activity resulting in weight loss of 5-7%. The program empowers patients with prediabetes to take charge of their health and well-being. A lifestyle coach leads the group meetings by sharing new skills, encouraging goal attainment, and maintaining motivation. No provider referral is required. Content areas include: Incorporating healthier eating and moderate physical activity, problem-solving, stress-reduction and coping skills into participants' lives. 	Program Overview: Focuses on increasing knowledge and skills to improve diabetes control. Led by a licensed health professional (i.e., nurse, dietitian, pharmacist, and/or a certified diabetes educator). Emphasizes the medical management of the disease and seven self-care behaviors including: healthy eating, being active, monitoring, taking medication, problem solving, healthy coping, and reducing risks. Content areas include: Diabetes disease process and treatment options. Incorporating nutrition management, physical activity, and appropriate medication treatments. Proper blood glucose monitoring and using results to improve glucose control to prevent diabetes-related complications. Goal setting and problem solving. Integrating psychosocial adjustment preconception care and management during pregnancy (if applicable).		 Program Overview: Incorporates the needs, goals and life experiences of the person with diabetes and is guided by evidenced-based standards. Designed to improve health outcomes and quality of life among disparate and underserved Medicare populations. Uses either the Diabetes Empowerment Education Program (DEEP) or Stanford's Diabetes Self-Management Program (DSMP). Content areas include: DEEP classes focus on understanding the human body, risk factors and complications — monitoring your body, eating for health, medications and medical care, get up and move — living with diabetes. 	Program Overview: Participants will make weekly action plans, share experiences, and help each other solve problems they encounter in creating and carrying out their self-management program. Each participant in the workshop receives a copy of the companion book, Living a Healthy Life with Chronic Conditions. Content areas include: Techniques to deal with the symptoms of diabetes, fatigue, pain, hyper/hypoglycemia, stress, and emotional problems such as depression, anger, fear and frustration; Appropriate exercise for maintaining and improving strength and endurance; Healthy eating; Appropriate use of medication; and Working more effectively with health care providers.	 Program Overview: Participants attend regularly scheduled appointments with F2F provider and physician. Provide Hemoglobin A1c to F2F provider at initial appointment ant thereafter up to 4 times per year. Active participant in improving health learning about diabetes, medications, nutrition, monitoring, and being active. F2F Provider (pharmacist) works with physician and patient to ensure the best patient diabetes self-management.
Cost to Patient (Subject to change)	Organizations in WV currently provide the NDPP as a public health service; although, Medicare expects to begin reimbursing in 2018 for eligible beneficiaries.	Medicare reimbursement allows for 10 hours (1-2 hours individual counseling; 8-9 hours in a group).		Free to Medicare, Medicare/Medicaid (dual) or Medicare Advantage beneficiaries.	No cost to patient.	Program is free and once pharmacy deductible is met diabetes supplies become free.
Duration	A yearlong program consisting of 16 weekly sessions and 6-8 monthly follow-up sessions.	1 hour individual and 9 hours group 1st year then 2 hours each following year.		Approximately 2 hours once a week for 6 weeks.	Approximately 2 hours once a week for 6 weeks.	Once a month for 3 months, then once every 3 months for 1 year, then every 6 months for 1 year. Program is 2 years total.
Туре	Group	Individual and Group		Group	Group	Individual
Website	http://www.cdc.gov/diabetes/prevention/index.html	https://www.diabetese ducator.org/	http://professional.diabe tes.org/	http://www.qualityinsights- gin.org/initiatives/Diabetes-Care.aspx	http://patienteducation.stanford.edu/ www.greenbriercountyhealthalliance.org	www.peiaf2f.com
Program Contact Information	https://nccd.cdc.gov/DDT DPRP/Programs.aspx	1-800-338-3633 or deap@aadenet.org	1-888-232-0832 or ERP@diabetes.org/	Natalie Tappe: 304-346-9864 ntappe@qualityinsights.org	Sally Hurst: 304-793-6554 <u>shurst@osteo.wvsom.edu</u> Richard Crespo: 304-634-6706 <u>crespo@marshall.edu</u>	Member enrollment/Issues: Robin Duncan: 304-558-7850 robin.g.duncan@wv.gov