



NATIONAL ASSOCIATION OF CHRONIC DISEASE DIRECTORS

Promoting Health. Preventing Disease.

NATIONAL DPP PARTNERSHIP SERIES

Michigan Physicians Partner for Diabetes Prevention

Coordinated Partner Action in Michigan

- **The Michigan Department of Health and Human Services** convened Prevent Diabetes STAT: Michigan, the State Engagement Meeting; guided development of the Michigan Diabetes Prevention Action Plan, 2016-2018; provides resources and technical assistance
- **The National Association of Chronic Disease Directors** used the NACDD/CDC State Engagement Model to recruit key partners to develop and support the Michigan Action Plan; provided in-depth planning and ongoing
- **The Michigan State Medical Society** raised awareness about prediabetes and promoted screening, testing, and referral for prediabetes
- **The American Medical Association** provided technical support and resources for implementation
- **The Michigan Diabetes Prevention Network** guided stakeholder efforts to implement the Michigan Action Plan
- **The Diabetes Partners in Action Coalition** provided statewide leadership on diabetes prevention and management

Prediabetes in Michigan

An estimated 3 million Michigan residents have prediabetes. Without intervention, many of them will develop type 2 diabetes. These facts make diabetes prevention a priority and prompted the Michigan Department of Health and Human Services to convene Prevent Diabetes STAT: Michigan, a State Engagement Meeting where development of the Michigan Action Plan began and where partners from many sectors were engaged to achieve the Michigan Action Plan goals. The Michigan State Medical Society (MSMS) is a strategic partner for reaching the goal to increase screening, testing, and referral of eligible patients to National DPP lifestyle change programs.

Michigan physicians provide healthcare to many of the 10 million residents of the state, making them important potential partners for the active promotion of prevention programs such as the National Diabetes Prevention Program (National DPP). In coordination with the Michigan Department of Health and Human Services implementation of the Michigan Diabetes Prevention Action Plan, 2016-2018 (Michigan Action Plan) and with National Association of Chronic Disease Directors (NACDD) technical assistance, the Michigan State Medical Society enlisted six Michigan physician organizations or practices to develop pilot programs to screen, test, and refer patients with prediabetes to National DPP lifestyle change programs.

Raising Awareness Prompts Action

MSMS introduced the concept of diabetes prevention in the clinical setting through an initial webinar for the physician members of the MSMS Executive Council of Physician Organizations. This Council supports MSMS's physician organization members in practice transformation to promote quality, lower cost of care, and enhanced patient and physician



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clinical experiences. Through its partner channels, MSMS created and hosted awareness-building activities on the topic of the [National DPP](#) and the requirements for becoming a CDC-recognized organization. These sessions included presentations to the Third Party Payer Committee and the Blue Cross Blue Shield of Michigan Physician Group Incentive Program Quarterly Meeting; calls with member physician organizations; discussions with key medical directors; and targeted email messages. Resources from the American Medical Association/CDC Prevent Diabetes STAT toolkit supported: clinician education on the evidence base for the National DPP, on coverage for and cost of delivering National DPP lifestyle change programs, and on the important role of patient care teams in enabling prevention activities.

MSMS collaborates with the Michigan Department of Health and Human Services to support organizations and individual practices in finding established program providers in the state and setting up new lifestyle change programs. Both organizations work closely to keep the physician community in touch with the community-based programs and resources that can increase enrollment for CDC-recognized organizations delivering the National DPP lifestyle change program in the state.

The main message to physicians of Prevent Diabetes STAT is “Prediabetes is a reversible condition - screen, test, and act today.” Physicians are very receptive to this message, and as Dara Barrera, Manager, Practice Management & Health Information Technology for MSMS puts it, “*The physicians immediately perceived the benefits to their patients – it was an easy ‘sell’ in that sense.*”

A Physician Organization Responds

[Northern Physicians Organization](#) (NPO), one of the largest physician organizations in Michigan, understands the need to mitigate the impact of diabetes on the population. Deciding to implement a diabetes prevention program and to increase diabetes screening, testing, and referral wasn’t really optional. As a physician-led organization, they realized it was a necessary tool for the transition from fee-for-service to value-based care in their rural area.

NPO piloted the National DPP lifestyle change program in patient-centered medical home practices, a key move because

Raising Awareness to Prompt Action among Physicians

Physicians can be influential in motivating their patients to participate in lifestyle change programs. For example, primary care physician exercise counseling has been shown to increase patients’ participation in physical activity, however, only about 56% of adults with diabetes who saw a physician or other health professional were advised to exercise (CDC 2010).

Raising awareness among primary care physicians about proven diabetes prevention programs and providing convenient ways for them to promote their use can increase identification of patients with prediabetes and prompt referrals to CDC-recognized organizations delivering the National DPP lifestyle change program.

“Prediabetes is a reversible condition - screen, test, and act today.”



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NACDD's Important Role in Diabetes Prevention

An NACDD team leads the national effort to apply the NACDD/CDC State Engagement Model to catalyze commitment for collective action on preventing type 2 diabetes. A central feature of the model is a State Engagement Meeting where NACDD facilitates stakeholders in drafting an action plan. NACDD's 12 to 18 months of strategic consultation and support for State Health Departments enhances partner engagement - bringing in CDC and national partners at strategic points in the process helps maximize results.

This work helps states increase access to and enrollment in National DPP lifestyle change programs. Adherence to an intensive lifestyle change program and modest behavior changes can help adults with prediabetes lose 5% to 7% of their body weight and reduce their risk of developing type 2 diabetes by 58%. Yet many people with prediabetes are not participating in these programs because healthcare providers may not screen or test their patients for prediabetes or refer those identified as having prediabetes to National DPP lifestyle change programs.

these practices emphasize the implementation of quality care measures and most have patient registries that can help them identify eligible patients.

To gain CDC recognition for their organization, NPO needed to show that it could meet CDC standards. One of these standards is the availability of trained lifestyle coaches for program implementation. With funding help from the American Medical Association, NPO trained its first two lifestyle coaches. NPO's relationship with a counseling and case management company provides an ongoing source of trained coaches to support program expansion. To help understand the program work from the end-user perspective, NPO's diabetes prevention program coordinator trained as a lifestyle coach and coached the initial cohort. NPO now is a CDC-recognized organization under the [Diabetes Prevention Recognition Program](#).

Physicians Make it Work

The administrative load of the National DPP lifestyle change program can create barriers to implementation in a clinical environment. NPO assumed the administrative work, leaving the individual practices with the simpler task of identifying a meeting space and recruiting eligible participants from their patient population. The significant barrier of reimbursement was set aside initially in favor of refining the process and allowing the program to develop while reimbursement complexities were worked on at a higher organizational level. Registration data is aggregated on a specially designed spreadsheet and quarterly reports provided to the referring provider update them on their patient's progress. These reports keep providers focused on meeting the needs of the patient and supporting their success.

To promote enrollment, physicians broach the subject of lifestyle change with their patients and provide a warm handoff to another team member to explain the program and provide take home materials to patients showing interest. Referring providers occasionally attend and participate in class sessions, an activity that shows patients that the practice is invested in their success. Since all program marketing materials display the practice logo without referencing the umbrella physician organization, NPO, the patient views the program as an offering from the medical practice that they know and trust. Once sites

are up and running, results are disseminated to providers via regular committee and care manager meetings.

Early-adopting practices are now on their second or third patient cohorts, while other practices will soon introduce the program.

Overall, eight cohorts of patients have enrolled in the program with a ninth scheduled. Hosting the National DPP lifestyle change program within these physician practices clearly demonstrated to physicians the value added to their daily practice. This positive experience encourages the participating physicians to interact with the umbrella physician organization on other population health initiatives that also may benefit their patients.

Tips for Success in Increasing Physician Screening, Testing, and Referral to National DPP Lifestyle Change Programs

- Implement National DPP lifestyle change programs in patient-centered medical home practices because these practices already work on quality improvement and most have registries that help them identify eligible participants.
- Have an organization-minded person walk the practice's office manager through a workable program implementation scenario.
- Connect physician organizations or practice representatives with State Health Department staff who can provide technical assistance on locating community-based National DPP lifestyle change programs, on starting new programs, and on building capacity in existing programs.

November 2018

Since 1988, the National Association of Chronic Disease Directors and its more than 7,000 Members have worked to strengthen state-based leadership and expertise for chronic disease prevention and control in all states, territories, and nationally. Learn more at chronicdisease.org.



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