



ALASKA | Year 1 Recipient Profile

The **Alaska Department of Health and Social Services (DHSS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,790,938

Category A Funding Level: \$895,469



8.7% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Community-based organizations
- Community health centers
- Medicaid
- Pharmacy association

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHSS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

For more information please contact DDTeval@cdc.gov.

DRAFT: 3/03/2020





DHSS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DHSS added two multi-site DSMES services to the state's umbrella licenses.



With support from DHSS, the Alaskan Pharmacy Association explored fiscally sustainable care models that allow for pharmacists to deliver medication therapy management.

Performance Measures

0 *New recognized/ accredited DSMES services established*

2 *New recognized/ accredited DSMES sites established*

0* *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



DHSS provided technical assistance to a Federally Qualified Health Center (FQHC) to establish a system to identify people with prediabetes and refer them to a CDC-recognized organization.



DHSS explored opportunities for a demonstration project in Medicaid Managed Care Organizations (MCOs) that cover the National DPP LCP.



With support from DHSS, the Anchorage YMCA expanded their National DPP LCP to low income Alaskans by offering enrollment scholarships.

Performance Measures

0 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *Medicaid beneficiaries who have the National DPP LCP as a covered benefit*

** Value was not included in the aggregate analysis because it is invalid*

3,561

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

918

Participants enrolled in CDC-recognized organizations



ALABAMA | Year 1 Recipient Profile

The **Alabama Department of Public Health (ADPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,278,960

Category A Funding Level: \$1,139,480



12.7% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Types of partners

- Academic institutions
- Health plans
- District health departments
- National associations
- State health plan

Diabetes Management and Type 2 Diabetes Prevention

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Improve access to and participation in recognized/accredited DSMES services in underserved areas



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ADPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 With support from ADPH, two new DSMES sites were established.

 ADPH collaborated with two schools of pharmacy to offer DSMES training and disseminate a toolkit to increase capacity for pharmacists to provide recognized/accredited diabetes management services.

Performance Measures

5 *New recognized/accredited DSMES services established*

2 *New recognized/accredited DSMES sites established*

11 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 With support from ADPH, the Jefferson County Health Department implemented an electronic self check-in process that prompts patients with questions to assess their risk of type 2 diabetes.

 ADPH discussed National DPP LCP coverage opportunities with Alabama’s Public Education Employees’ Health Insurance Plan (PEEHIP).

 ADPH collaborated with the state’s marketing division to develop training for local health departments to increase awareness of the National DPP LCP.

Performance Measures

126,183 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *State/public employees and dependents who have the National DPP LCP as a covered benefit*

13,525 *People with diabetes with at least one encounter at a recognized/accredited DSMES service.*

2,343 *Participants enrolled in CDC-recognized organizations*



ARKANSAS | Year 1 Recipient Profile

The **Arkansas Department of Health (ADH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,215,128

Category A Funding Level: \$1,107,564



12.4% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Pharmacy associations
- Academic institutions
- Community health worker association
- Health systems
- Training organizations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, ADH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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ADH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



ADH developed plans to work with Mercy Northwest Arkansas Communities to participate in the National Cardiovascular Data Registry Diabetes Collaborative Registry.



With support from ADH, several private employers trained pharmacists across 14 counties to provide diabetes assessments, counseling, and medication therapy management to their employees and local residents.

Performance Measures

3 *New recognized/ accredited DSMES services established*

0* *New recognized/ accredited DSMES sites established*

3 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



ADH developed a funding proposal to work with Arkansas Clinical Transformation clinics to incorporate prediabetes registries into their electronic health record systems to identify people with prediabetes and refer them to the National DPP LCP.



With support from ADH, 15 health care professionals were trained on the National DPP Lifestyle Coach and Master Trainer Program through Emory University's Diabetes Training and Technical Assistance Center.

Performance Measures

38,208 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs



ADH developed a 5-year strategic plan that outlines the long-term training, certification, and financial outlook for CHWs in the state.

Performance Measures

NR** *Academic and other institutions offering CHW core competency training*

NR** *CHWs who have received certification*

118 *CHWs who have received core competency training*

NR** *CHWs who are paid from sustainable statewide payment mechanisms*

*Value was not included in the aggregate analysis because it is invalid | **NR = not reported

9,701 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

1,077 *Participants enrolled in CDC-recognized organizations*



ARIZONA | Year 1 Recipient Profile

The **Arizona Department of Health Services (ADHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,311,244

Category A Funding Level: \$1,155,622



9.6% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community health centers
- Community health worker associations
- County health departments
- Diabetes coalition
- Pharmacies
- Tribal organizations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, ADHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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ADHS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from ADHS, the Association of Diabetes Care and Education Specialists (ADCES) provided technical assistance and training to organizations applying for DSMES accreditation/recognition.



With support from ADHS, the Diabetes Coalition recruited pharmacists to build capacity for clinically integrated diabetes medication therapy management and DSMES services.

Performance Measures

53* *New recognized/ accredited DSMES services established*

80* *New recognized/ accredited DSMES sites established*

6 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



ADHS submitted a Request for Grant Application for health systems to utilize electronic health record (EHR) systems to identify and refer eligible participants to the National DPP LCP.



With support from ADHS, a state vendor updated a health care provider toolkit to identify people at risk for type 2 diabetes and distributed the toolkit to high diabetes burden areas through zip code-targeted marketing.

Performance Measures

553,000 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs



ADHS submitted a Request for Grant Application to create a statewide network of CHWs and increase the number of CHWs and trained Lifestyle Coaches.

Performance Measures

2 *Academic and other institutions offering CHW core competency training*

0* *CHWs who have received certification*

NR** *CHWs who have received core competency training*

1,050 *CHWs who are paid from sustainable statewide payment mechanisms*

* Value was not included in the aggregate analysis because it is invalid | ** NR = not reported

15,149

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

4,918

Participants enrolled in CDC-recognized organizations



CALIFORNIA | Year 1 Recipient Profile

The **California Department of Public Health (CDPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$3,316,190

Category A Funding Level: \$1,658,095



9.8% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease [Los Angeles County Department of Public Health]

Types of partners

- Academic institutions
- Community health worker advisory group
- Health care organizations
- Medicare
- Pharmacy associations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, CDPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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CDPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



CDPH contacted 117 California-based National DPP organizations and identified 17 organizations interested in DSMES recognition/accreditation.



CDPH provided clinical physician-pharmacist teams with coaching, virtual training, and collaborative sessions to support comprehensive medication management at three community health centers.

Performance Measures

6 *New recognized/ accredited DSMES services established*

8 *New recognized/ accredited DSMES sites established*

7 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



CDPH worked with Intrepid Ascent and health center partners to improve and support capacities for Health Information Technology and electronic health records.



With support from CDPH, the California Prevent Diabetes STAT network surveyed providers to identify barriers and facilitators for patient enrollment and retention in the National DPP LCP and prioritize technical assistance offerings.

Performance Measures

NR** *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs



CDPH partnered with Visión y Compromiso to facilitate a collaborative approach to utilizing Promotores and CHWs within two health systems across 13 regions.

Performance Measures

NR** *Academic and other institutions offering CHW core competency training*

NR** *CHWs who have received certification*

NR** *CHWs who have received core competency training*

NR** *CHWs who are paid from sustainable statewide payment mechanisms*

** NR = not reported

58,818

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

67,716

Participants enrolled in CDC-recognized organizations



COLORADO | Year 1 Recipient Profile

The **Colorado Department of Public Health and Environment (CDPHE)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,006,692

Category A Funding Level: \$1,003,346



6.6% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Business coalitions
- Community-based Organizations
- Federally qualified health centers
- Health care organizations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, CDPHE is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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CDPHE is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from CDPHE, the Southeast Colorado Hospital District identified a program champion, identified billing requirements, and established a new DSMES service.



CDPHE released a request for proposals to identify a network of community pharmacies to establish accredited DSMES services and implement software to communicate with physicians.

Performance Measures

1 *New recognized/ accredited DSMES service established*

0* *New recognized/ accredited DSMES sites established*

0 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from CDPHE, staff from five health centers participated in a webinar on screening and referring patients with prediabetes to the National DPP LCP.



With support from CDPHE, the Colorado Business Group on Health promoted offering the National DPP LCP as a covered benefit to public and private employers.



CDPHE provided technical assistance to three health care organizations to become Medicare Diabetes Prevention Program (MDPP) providers and to implement MDPP.

Performance Measures

100 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

Strengthen infrastructure for engaging CHWs



With support from CDPHE, Otero Junior College expanded its Health Navigation training program for CHWs to 12 new counties through a partnership with two other community colleges.

Performance Measures

3 *Academic and other institutions offering CHW core competency training*

82 *CHWs who have received certification*

12 *CHWs who have received core competency training*

NR** *CHWs who are paid from sustainable statewide payment mechanisms*

**Value was not included in the aggregate analysis because it is invalid | **NR = not reported*

16,790 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

15,457 *Participants enrolled in CDC-recognized organizations*



CONNECTICUT | Year 1 Recipient Profile

The **Connecticut Department of Public Health (DPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,887,432

Category A Funding Level: \$943,716



8.3% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community-based organizations
- Health care organizations
- Pharmacists

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DPH released a request for proposals (RFP) to identify health care organizations (HCO) to establish a recognized/accredited DSMES service or establish direct referral mechanisms to existing services.



DPH released a RFP to identify HCOs to establish electronic health record (EHR) referral processes and collaborative practice agreements with pharmacists to deliver medication therapy management for people with diabetes.

Performance Measures		
0* <i>New recognized/accredited DSMES services established</i>	0* <i>New recognized/accredited DSMES sites established</i>	NR** <i>Recognized/accredited pharmacy-based DSMES services</i>

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from DPH, several HCOs established EHR protocols to identify and track patients with prediabetes, and to refer them to the National DPP LCP.



DPH developed a system to provide scholarship support and vouchers for childcare and/or transportation for participants in the National DPP LCP.

Performance Measures	
10,500 <i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>	

Strengthen infrastructure for engaging CHWs



DPH assessed the statewide CHW landscape to inform standardized training, curriculum, and certification practices.

Performance Measures	
5 <i>Academic and other institutions offering CHW core competency training</i>	0 <i>CHWs who have received certification</i>
470 <i>CHWs who have received core competency training</i>	7 <i>CHWs who are paid from sustainable statewide payment mechanisms</i>

**Value was not included in the aggregate analysis because it is invalid | ** NR = not reported*

9,826 *People with diabetes with at least one encounter at a recognized/accredited DSMES service*

1,801 *Participants enrolled in CDC-recognized organizations*



The **DC Department of Health (DC Health)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,198,512

Category A Funding Level: \$1,099,256



9.2% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Communities of practice
- Health plans
- Medicaid
- National associations
- Pharmacy association

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DC Health is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DC Health is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 DC Health provided training and technical assistance on program operations and marketing to recognized/accredited DSMES services.

 DC Health conducted a landscape assessment of Medicaid coverage for diabetes management services and opportunities to promote expanded DSMES coverage.

 With support from DC Health, a group of pharmacy stakeholders developed a survey tool that assessed DSMES best practices.

Performance Measures

0* *New recognized/accredited DSMES services established*

NR** *Medicaid beneficiaries who have DSMES as a covered benefit*

1 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 DC Health convened a group of National DPP LCP providers from the District to assess the landscape of screening and referral practices, and identify future technical assistance topics.

 DC Health educated Medicaid staff on the benefits and return on investment for offering the National DPP LCP as a covered benefit, and proposed a Medicaid Managed Care Organization demonstration project.

 DC Health established partnerships with pharmacies, community-based and faith-based organizations, and health care systems, to support the delivery of the National DPP LCP.

Performance Measures

131,674* *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

NR** *Medicaid beneficiaries who have the National DPP LCP as a covered benefit*

**Value was not included in the aggregate analysis because it is invalid | **NR = not reported*

1,379 *People with diabetes with at least one encounter at a recognized/accredited DSMES service*

375 *Participants enrolled in CDC-recognized organizations*



DELAWARE | Year 1 Recipient Profile

The **Delaware Division of Public Health (DPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,888,596

Category A Funding Level: \$944,298



10.1% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Community-based organizations
- Health care organizations
- Medicaid
- Pharmacy association
- Private medical practices
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from DPH, Quality Insights developed an online DSMES recognition/accreditation toolkit for health care organizations and promoted the resource at two healthcare provider symposiums.



With support from DPH, Quality Insights assessed DSMES coverage among Medicaid payers and five insurance providers to determine coverage density and opportunities to strengthen coverage.



With support from DPH, the Delaware Pharmacists Society trained licensed pharmacists on diabetes medication management using platforms such as Mirixa.

Performance Measures

2 New recognized/
accredited DSMES
services established

235,806 Medicaid beneficiaries
who have DSMES as a
covered benefit

NR* Pharmacists using patient care
processes to promote medication
management for people with diabetes

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from DPH, the YMCA of Delaware and a private medical practice participated in an e-connect initiative to implement bi-directional referral systems between participating health care practices and the YMCA.



With support from DPH, the City of Wilmington, the Delaware Medicaid program, and the YMCA of Delaware are collaborating to expand access to and coverage for the National DPP LCP for city employees.



With support from DPH, the YMCA of Delaware was awarded a community grant to fund National DPP LCP scholarships for 180 people at high-risk for diabetes across two counties.

Performance Measures

64,408 Patients served within health care
organizations that have systems to identify
people with prediabetes and refer them
to CDC-recognized organizations

106,311 State/public employees and
dependents who have the National
DPP LCP as a covered benefit

* NR = not reported

2,763 People with diabetes with at least
one encounter at a recognized/
accredited DSMES service

2,378 Participants enrolled in CDC-
recognized organizations



FLORIDA | Year 1 Recipient Profile

The **Florida Department of Health (FDOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,700,778

Category A Funding Level: \$1,350,389



10.5% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- County health departments
- Community health worker coalitions
- Health care organizations
- Pharmacy associations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, FDOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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FDOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from FDOH, the Health Planning Council of South West Florida supported existing DSMES services with gaining recognition/accreditation and establishing satellite sites.



With support from FDOH, the Bureau of Public Health Pharmacy engaged pharmacists and pharmacy students to promote medication management for people with diabetes.

Performance Measures

0* *New recognized/ accredited DSMES services established*

0* *New recognized/ accredited DSMES sites established*

0 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from FDOH, the University of Central Florida Health ARCH assisted health care organizations with implementing standardized prediabetes screening and referral systems.



FDOH partnered with the National Association for Chronic Disease Directors (NACDD) to provide sub awards to county health departments to train additional Lifestyle Coaches, which resulted in the total number of trained Lifestyle Coaches increasing from 33 to 50.

Performance Measures

0 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs



FDOH convened multi-sector partner workgroups to develop trainings and document best practices for incorporating CHWs in DSMES services and the National DPP LCP.

Performance Measures

NR** *Academic and other institutions offering CHW core competency training*

NR** *CHWs who have received certification*

NR** *CHWs who have received core competency training*

NR** *CHWs who are paid from sustainable statewide payment mechanisms*

**Value was not included in the aggregate analysis because it is invalid | ** NR = not reported*

31,130 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

30,837 *Participants enrolled in CDC-recognized organizations*



GEORGIA | Year 1 Recipient Profile

The **Georgia Department of Health (DPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,973,450

Category A Funding Level: \$986,725



11.7% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP18-1817: Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Community health worker coalitions
- Federally qualified health centers
- Health care providers
- Health care systems
- Primary care associations
- State/public and private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





DPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DPH convened a technical assistance advisory call with DSMES services, pharmacies, hospital systems, and nonprofits to prepare them for recognition/accreditation.



DPH disseminated resources including factsheets and DSMES provider manuals to more than 50 pharmacists interested in pursuing DSMES recognition/accreditation.

Performance Measures

4 *New recognized/accredited DSMES services established*

0* *New recognized/accredited DSMES sites established*

19 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from DPH, the American Medical Association (AMA) conducted six webinars for ten hospitals to support development of policies for identifying and referring people with prediabetes to the National DPP LCP.



DPH collaborated with private and public sector employers to expand their National DPP LCP coverage benefit package.



DPH established an on-site National DPP LCP for state employees and disseminated a guide for public health districts interested in starting on-site programs.

Performance Measures

79,699* *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

754 *State/public employees and dependents have the National DPP LCP as a covered benefit*

Strengthen infrastructure for engaging CHWs



DPH convened the statewide CHW Advisory Board to develop standardized CHW training and core competencies, establish a certification process, and explore reimbursement for services.

Performance Measures

0 *Academic and other institutions offering CHW core competency training*

0 *CHWs who have received certification*

0* *CHWs who have received core competency training*

0* *CHWs who are paid from sustainable statewide payment mechanisms*

** Value was not included in the aggregate analysis because it is invalid*

23,778

People with diabetes with at least one encounter at a recognized/accredited DSMES service

8,839

Participants enrolled in CDC-recognized organizations



HAWAI'I | Year 1 Recipient Profile

The **Hawai'i Department of Health (DOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,468,850

Category A Funding Level: \$734,425



10.3% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community health worker coalitions
- Federally qualified health centers
- Health care providers
- Health care systems
- Primary care association
- State/public and private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DOH convened 50 stakeholders across all four counties to map out a statewide action plan to increase access to and participation in DSMES services.



With support from DOH, the Times Pharmacy established DSMES sites within worksites, health systems, and correctional facilities.

Performance Measures

0 New recognized/
accredited DSMES
services established

2 New recognized/
accredited DSMES sites
established

3 Recognized/accredited
pharmacy-based DSMES
services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from DOH, the National Association of Chronic Disease Directors implemented a bi-directional e-referral system that links clinical sites and community-based lifestyle-based programs.



DOH released a white paper promoting 1115 Medicaid waivers and minimum coverage benefit for the National DPP LCP for managed care organizations.

Performance Measures

49,088 Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations

1,109,000 Private sector employees and dependents who have the National DPP LCP as a covered benefit

Strengthen infrastructure for engaging CHWs



With support from DOH, the statewide CHW Coalition defined a scope of practice, created a certification program, and explored sustainable payment /reimbursement mechanisms.

Performance Measures

3 Academic and other institutions offering CHW core competency training

50 CHWs who have received certification

74 CHWs who have received core competency training

41 CHWs who are paid from sustainable statewide payment mechanisms

8,080

People with diabetes with at least one encounter at a recognized/
accredited DSMES service

1,202

Participants enrolled in CDC-
recognized organizations



IOWA | Year 1 Recipient Profile

The **Iowa Department of Public Health (IDPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,602,110

Category A Funding Level: \$801,055



8.8% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Boards of health
- Medicaid managed care organizations
- Pharmacy associations
- Public health agencies

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, IDPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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IDPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



IDPH worked with local boards of health representatives and local public health agencies in Mills, Muscatine, and Wapello Counties on the development of DSMES services.



IDPH plans to build relationships with representatives of Medicaid managed care organizations to assist with data collection, increase DSMES coverage, and increase referral of Medicaid beneficiaries to DSMES.



With funding from IDPH, the Iowa Pharmacy Association provided technical assistance to a local pharmacy and several independent pharmacists regarding DSMES programming.

3 *New recognized/
accredited DSMES
services established*

616,469 *Medicaid beneficiaries
who have DSMES as a
covered benefit*

11 *Recognized/accredited
pharmacy-based DSMES
services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With funding from IDPH, six local boards of health in Appanoose, Black Hawk, Clinton, Lucas, Muscatine, and Wapello counties trained providers to increase screening, testing, and referrals into the National DPP LCP.



IDPH regularly engaged with representatives from the Iowa Department of Administrative Services, which oversees the State of Iowa insurance plans and coverage with the state employee insurance provider.



IDPH engaged six local boards of health and public health agencies to increase referral of participants to the National DPP LCP.

1,702 *Patients served within health care
organizations that have systems to identify
people with prediabetes and refer them to
CDC-recognized organizations*

Performance Measures

NR* *State/public employees and
dependents who have the National
DPP LCP as a covered benefit*

* NR = not reported

16,825

*People with diabetes with at least
one encounter at a recognized/
accredited DSMES service*

2,395

*Participants enrolled in CDC-
recognized organizations*



IDAHO | Year 1 Recipient Profile

The **Idaho Department of Health & Welfare (IDHW)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,008,748

Category A Funding Level: \$1,004,374



9.2% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Federal assistance programs
- Federally qualified health centers
- Health care organizations
- Local public health districts
- Medicaid

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, IDHW is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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IDHW is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



IDHW created heat maps to prioritize areas with high rates of type 2 diabetes and limited access to DSMES services to identify capacity building and technical assistance.



With support from IDHW, Idaho State University assessed the number of pharmacies providing services such as DSMES and medication therapy management for people with diabetes.

Performance Measures

0* *New recognized/ accredited DSMES services established*

NR** *New recognized/ accredited DSMES sites established*

0* *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from IDHW, several Federally Qualified Health Centers (FQHCs) and other partners assisted health systems in implementing diabetes screening in areas with high rates of chronic conditions and other comorbidity risk factors, such as food insecurity.



IDHW collaborated with Healthy Eating, Activity Living (HEAL) to promote the National DPP LCP as a covered benefit for private sector employees.



IDHW partnered with Health Matters and Lifestyle Coaches to enroll state employees in the National DPP LCP.

Performance Measures

1,699 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

NR** *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

** Value was not included in the aggregate analysis because it is invalid | ** NR = not reported*

7,825 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

1,730 *Participants enrolled in CDC-recognized organizations*



ILLINOIS | Year 1 Recipient Profile

The **Illinois Department of Public Health (IDPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,349,138

Category A Funding Level: \$1,174,569



9% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease [Illinois Public Health Institute]

Types of partners

- Academic institutions
- Business coalitions
- Health care organizations
- Health care systems
- Pharmacies
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, IDPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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IDPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from IDPH, several DSMES sites in underserved regions in Southern Illinois have been identified to receive technical assistance via webinars and through individual site visits.



With support from IDPH, the Illinois Public Health Association scheduled medication therapy management trainings in underserved regions in Southern Illinois.

Performance Measures

0 New recognized/ accredited DSMES services established

0 New recognized/ accredited DSMES sites established

0 Recognized/accredited pharmacy-based DSMES services

Increase prediabetes screening referral to/participation and retention in the National DPP LCP



With support from IDPH, the Midwest Business Group on Health identified private sector employers to serve as pilot sites for coverage of the National DPP LCP.



IDPH provided training and technical assistance on the National DPP LCP in targeted geographical areas to expand access to programs, certify Lifestyle Coaches, and increase participation.

Performance Measures

0 Private sector employees and dependents who have the National DPP LCP as a covered benefit

578 State/public employees and dependents who have the National DPP LCP as a covered benefit

Strengthen infrastructure for engaging CHWs



With support from IDPH, the Illinois Public Health Association worked with colleges and universities that offer CHW certification to assess the current use and need for CHWs within the state.

Performance Measures

5 Academic and other institutions offering CHW core competency training

NR* CHWs who have received certification

30 CHWs who have received core competency training

12 CHWs who are paid from sustainable statewide payment mechanisms

* NR = not reported

58,408 People with diabetes with at least one encounter at a recognized/ accredited DSMES service

4,954 Participants enrolled in CDC-recognized organizations



INDIANA | Year 1 Recipient Profile

The **Indiana State Department of Health (ISDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,789,184

Category A Funding Level: \$894,592



11.2% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community health worker associations
- Community-based organizations
- Health care organizations
- Pharmacies
- Pharmacy associations
- Public/private sector employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, ISDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





ISDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



ISDH created a telehealth implementation checklist and shared it with three DSMES services to support their expansion into underserved areas.



With support from ISDH, the State Office of Medicaid Policy and Planning began creating resources to help DSMES providers better understand Medicaid DSMES coverage and reimbursement.



ISDH began engaging with stakeholders including the Indiana Pharmacy Alliance, community pharmacies, and schools of pharmacy to understand the extent to which pharmacists provide DSMES services and medication therapy management.

Performance Measures

1 New recognized/
accredited DSMES
service established

24,855

Medicaid beneficiaries
who have DSMES as a
covered benefit

NR* Recognized/accredited
pharmacy-based DSMES
services

Increase prediabetes screening and referral to/ participation and retention in the National DPP LCP



With support from ISDH, one large employer received technical assistance to implement one National DPP LCP pilot for a worksite with 25 employees.



With support from ISDH, two health care organizations and one CHW association began working to increase the availability of the National DPP LCP in rural and Hispanic populations.

Performance Measures

NR* Private sector employees and dependents who have the National DPP LCP as a covered benefit

Strengthen infrastructure for engaging CHWs



With support from ISDH, the Governor's Health Council Workforce formalized the state's definition of CHW as well as CHW competencies and associated skills, certification process, and education and training requirements.

Performance Measures

3 Academic and other institutions offering
CHW core competency training

31 CHWs who have received certification

1,065 CHWs who have received core
competency training

NR* CHWs who are paid from sustainable
statewide payment mechanisms

* NR = not reported

20,963 People with diabetes with at least
one encounter at a recognized/
accredited DSMES service

7,416 Participants enrolled in CDC-
recognized organizations



KANSAS | Year 1 Recipient Profile

The **Kansas Department of Health and Environment (KDHE)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,974,208

Category A Funding Level: \$987,104



10.5% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Business coalitions
- Care collaboratives
- Community based-organizations
- Health care clinics
- Health plans
- Medicaid
- National associations
- Pharmacies

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, KDHE is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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KDHE is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from KDHE, the Association of Diabetes Care and Education Specialist (ADCES) provided training for DSMES quality coordinators at health care clinics serving five priority counties.



With support from KDHE, two business coalitions on health and insurance brokers identified private and public employers interested in providing DSMES as a covered benefit.

Performance Measures

0* *New recognized/ accredited DSMES services established*

0* *New recognized/ accredited DSMES sites established*

NR** *Private employees and dependents who have DSMES as a covered benefit*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



KDHE provided technical assistance to five clinics to evaluate their clinical workflows and improve their processes for identifying patients with prediabetes.



KDHE partnered with two business coalitions on health and insurance brokers to identify public and private employers interested in providing the National DPP LCP as a covered benefit.



With support from KDHE, ADCES trained additional Lifestyle Coaches to increase the availability of CDC-recognized organizations.

Performance Measures

10,911 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

NR** *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

** Value was not included in the aggregate analysis because it is invalid | **NR = not reported*

5,916

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

4,779

Participants enrolled in CDC-recognized organizations



KENTUCKY | Year 1 Recipient Profile

The **Kentucky Cabinet for Health & Family Services (CHFS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,312,080

Category A Funding Level: \$1,156,040



12.1% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 – Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Employers
- Health plans
- Local health departments
- Medicaid
- National associations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, CHFS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





CHFS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 CHFS provided technical assistance, financial support, and DSMES resource materials to 39 local diabetes coalitions.

 CHFS explored opportunities with the Kentucky Employees' Health Plan (KEHP) to reduce cost sharing for DSMES services.

Performance Measures		
3 <i>New recognized/ accredited DSMES services established</i>	NR* <i>New recognized/ accredited DSMES sites established</i>	18,059 <i>State/public employees and dependents who have DSMES as a covered benefit</i>

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 CHFS partnered with the Medicaid Diabetes Prevention Program coverage workgroup to propose legislation to expand coverage for the National DPP LCP.

 CHFS disseminated National DPP LCP site location maps to partners across the state noting expanded coverage, program delivery methods, and recognition status.

Performance Measures	
12,500 <i>Private sector employees and dependents who have the National DPP lifestyle change program as a covered benefit</i>	0 <i>Medicaid beneficiaries who have the National DPP LCP as a covered benefit</i>

Strengthen infrastructure for engaging CHWs

 CHFS championed statewide efforts to standardize training offerings and develop certification processes for CHWs.

Performance Measures	
2 <i>Academic and other institutions offering CHW core competency training</i>	0 <i>CHWs who have received certification</i>
50 <i>CHWs who have received core competency training</i>	0 <i>CHWs who are paid from sustainable statewide payment mechanisms</i>

* NR = not reported

10,278 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

6,791 *Participants enrolled in CDC-recognized organizations*



LOUISIANA | Year 1 Recipient Profile

The **Louisiana Department of Health Office of Public Health (LDH OPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,410,912

Category A Funding Level: \$1,205,456



12.9% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 – Innovative Strategies to Prevent and Manage Diabetes and heart Disease

Types of partners

- Community-based organizations
- Community health outreach network
- Health plans
- Health systems
- Medicaid

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, LDH OPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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DRAFT: 3/03/2020





LDH OPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



LDH OPH identified two DSMES sites to recruit people living with diabetes for focus groups to assess barriers to DSMES services.



LDH OPH formed a coverage workgroup for increasing Medicaid reimbursement for DSMES services.



LDH OPH identified three community pharmacies interested in providing medication therapy management services and two pharmacies interested in providing DSMES services.

Performance Measures

67* *New recognized/ accredited DSMES services established*

67* *New recognized/ accredited DSMES sites established*

0* *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



LDH OPH partnered with a health system to modify its electronic health record to screen patients for prediabetes and refer them to the National DPP LCP.



LDH OPH supported one local CDC-recognized organization through the Medicare DPP supplier enrollment process.



LDH OPH worked with the Office of Group Benefits to develop a white paper based on their National DPP LCP pilot project which will be shared with Medicaid to promote expanded coverage benefits.

Performance Measures

NR** *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

238,000 *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

Strengthen infrastructure for engaging CHWs



LDH OPH partnered with the Louisiana Community Health Outreach Network (LACHON) to offer training modules to CHWs on best practices for engaging participants in the National DPP LCP.

Performance Measures

0 *Academic and other institutions offering CHW core competency training*

0* *CHWs who have received certification*

9 *CHWs who have received core competency training*

NR** *CHWs who are paid from sustainable statewide payment mechanisms*

**Value was not included in the aggregate analysis because it is invalid | ** NR = not reported*

21,625

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

6,193

Participants enrolled in CDC-recognized organizations



MASSACHUSETTS | Year 1 Recipient Profile

The **Massachusetts Department of Public Health (DPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,026,150

Category A Funding Level: \$1,013,075



7.7% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 – Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Community-based organizations
- Federally qualified health centers
- Health care organizations
- Pharmacists
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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DRAFT: 3/03/2020





DPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 DPH surveyed Certified Diabetes Educators and people with diabetes to identify barriers and facilitators to participating in DSMES services.

 DPH convened the State Pharmacy Work Group to develop a work plan for engaging clinical and community-based pharmacists in DSMES services.

Performance Measures

0 <i>New recognized/ accredited DSMES services established</i>	0 <i>New recognized/ accredited DSMES sites established</i>	22 <i>Pharmacists using patient care processes to promote medication management for people with diabetes</i>
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Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 DPH promoted Federally Qualified Health Centers' connection to the state's prediabetes registry which identifies and refers patients with prediabetes to the National DPP LCP.

 DPH collaborated with the Coverage Community of Practice to promote the National DPP LCP as a covered benefit for public/state employees.

 DPH initiated activities to develop and implement a culturally and linguistically appropriate communications campaign to promote the National DPP LCP to priority populations.

Performance Measures

570,093 <i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>	NR* <i>State/public employees and dependents who have the National DPP LCP as a covered benefit</i>
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Strengthen infrastructure for engaging CHWs

 DPH tracked policies on CHW funding and reimbursement to inform the Community of Practice's stakeholder engagement initiatives and conducted regional certification forums throughout the state.

Performance Measures

6 <i>Academic and other institutions offering CHW core competency training</i>	130 <i>CHWs who have received certification</i>
216 <i>CHWs who have received core competency training</i>	NR* <i>CHWs who are paid from sustainable statewide payment mechanisms</i>

* NR = not reported

37,292 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

4,455 *Participants enrolled in CDC-recognized organizations*



MARYLAND | Year 1 Recipient Profile

The **Maryland Department of Health (MDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$ 1,604,430

Category A Funding Level: \$ 802,215



10.8% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Community-based organizations
- Employers
- Faith based organizations
- Federally qualified health centers
- Health care organizations
- Medicaid

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, MDH implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





MDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



MDH initiated a contract with diabetes subject matter experts to provide training and technical assistance to up to six Federally Qualified Health Centers and pharmacies to develop their own DSMES services.



MDH started the process of formalizing the pharmacy student curricula at two schools of pharmacy to include medication therapy management skill building for chronic conditions.

Performance Measures

12* *New recognized/ accredited DSMES services established*

33* *New recognized/ accredited DSMES sites established*

2 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



MDH executed a contract to enhance a health systems digital infrastructure to support bi-directional referrals to the National DPP LCP.



MDH provided funding and training opportunities to enhance CDC-recognized organizations' readiness to serve Medicaid beneficiaries.



MDH partnered with a health insurance broker, community-based organizations, employers, and faith-based organizations to develop and disseminate culturally appropriate messaging promoting the National DPP LCP to priority populations.

Performance Measures

0 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *Medicaid beneficiaries who have the National DPP LCP as a covered benefit*

**Value was not included in the aggregate analysis because it is invalid*

11,403

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

5,296

Participants enrolled in CDC-recognized organizations



MAINE | Year 1 Recipient Profile

The **Maine Department of Health and Human Services (DHHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,575,268

Category A Funding Level: \$787,634



8.7% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Community-based organizations
- Diabetes alliances
- Health systems
- Health information exchange
- National associations
- Primary care associations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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DRAFT: 3/03/2020





DHSS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DHSS offered a Professional Diabetes Educator Program (PDEP) training and provided support to Maine’s Diabetes Educators to build capacity for DSMES services.



DHSS convened an employer stakeholder workgroup to identify and engage employers that are supportive of expanding the use of DSMES as a covered benefit.

Performance Measures

0 *New recognized/ accredited DSMES services established*

0 *New recognized/ accredited DSMES sites established*

639,100 *Private sector employees and dependents who have DSMES as a covered benefit*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



DHSS contracted BowLink Technologies to develop a Community Clinical Linkages Registry (CCLR) to identify individuals with prediabetes and refer them to the National DPP LCP.



DHSS convened a multidisciplinary employer stakeholder workgroup to identify strategies to increase coverage for the National DPP LCP.



DHSS partnered with the YMCA Alliance of Maine to increase access to the National DPP LCP across the state.

Performance Measures

0 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

31,955 *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

4,919 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

2,902 *Participants enrolled in CDC-recognized organizations*



MICHIGAN | Year 1 Recipient Profile

The **Michigan Department of Health and Human Services (MDHHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,883,842

Category A Funding Level: \$958,021



10.1% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Federally qualified health centers
- Health care organizations
- Health plans
- Medicaid
- Pharmacy association
- Primary care association

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, MDHHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





MDHHS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 MDHHS implemented a Behavioral Risk Factor Surveillance System module to determine the percent of adults with diabetes who attended a diabetes management course.

 MDHHS worked with Michigan Medicaid to engage Medicaid managed care plans to identify existing processes to provide diabetes education to beneficiaries living with diabetes.

 With support from MDHHS, MI Pharmacist Association surveyed 5,087 pharmacists to identify gaps in DSMES services.

Performance Measures

0* *New recognized/ accredited DSMES services established*

85,530 *Medicaid beneficiaries who have DSMES as a covered benefit*

2 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 With support from MDHHS, the MI Primary Care Association created a dashboard to help Federally Qualified Health Centers identify and refer patients to the National DPP LCP.

 MDHHS developed survey tools to assess the Michigan Association of Health Plan's efforts around diabetes prevention and promotion of the National DPP LCP.

 MDHHS engaged two health care organizations to refer patients to the National DPP LCP which resulted in 20 new enrollments.

Performance Measures

0 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *Medicaid beneficiaries who have the National DPP LCP as a covered benefit*

Strengthen infrastructure for engaging CHWs

 MDHHS developed a policy brief on sustaining CHW financing and distributed it to stakeholders, together with resources detailing the positive impact of CHWs on diabetes prevention and management.

Performance Measures

1 *Academic and other institutions offering CHW core competency training*
488 *CHWs who have received core competency training*

NR** *CHWs who have received certification*
NR** *CHWs who are paid from sustainable statewide payment mechanisms*

*Value was not included in the aggregate analysis because it is invalid | **NR= Not reported

35,759 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

14,876 *Participants enrolled in CDC-recognized organizations*



MINNESOTA | Year 1 Recipient Profile

The **Minnesota Department of Health (MDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,953,594

Category A Funding Level: \$976,797



7.9% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Types of partners

- Community-based organizations
- Federally qualified health centers
- Health care organizations
- Medicaid
- Pharmacies
- Professional associations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, MDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





MDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



MDH provided technical assistance and support to the state’s only accredited pharmacy-based DSMES service and explored ways to develop a practice model to share with other pharmacies.



MDH provided technical assistance to support a regional pharmacy chain to implement billing procedures to support medication therapy management services across its 57 sites.

Performance Measures

0 *New recognized/ accredited DSMES services established*

0 *New recognized/ accredited DSMES sites established*

1 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



MDH executed a contract with a consortium of Federally Qualified Health Centers to improve screening and referral of people with prediabetes to the National DPP LCP by implementing a clinical decision support tool at select sites.



MDH piloted a Medicaid payment guide aimed at increasing provider knowledge of the National DPP LCP benefits and the process for reimbursement for services.



MDH convened quarterly webinars for members of the National DPP Lifestyle Coach Community of Practice to facilitate sharing of best practices on increasing enrollment and retention.

Performance Measures

NR* *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

510,316 *Medicaid beneficiaries who have the National DPP LCP as a covered benefit*

*NR= Not reported

68,480 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

25,111 *Participants enrolled in CDC-recognized organizations*



MISSOURI | Year 1 Recipient Profile

The **Missouri Department of Health and Senior Services (DHSS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,774,142

Category A Funding Level: \$887,071



10.2% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 – Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Business coalitions
- Community-based organizations
- Federally qualified health centers
- Health systems
- Pharmacies
- Pharmacist care network

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHSS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





DHSS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 DHSS connected the YMCA, a medical center, and a major hospital to an e-referral platform to increase referral and enrollment to DSMES services.

 DHSS partnered with universities to train pharmacy technicians and pharmacy delivery drivers as CHWs to make DSMES referrals.

Performance Measures

24* *New recognized/ accredited DSMES services established*

29* *New recognized/ accredited DSMES sites established*

61* *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 DHSS disseminated information on the National DPP LCP to clinic administrators, medical directors, and quality improvement staff to increase referrals.

 DHSS met with business health coalitions in two major cities to discuss including the National DPP LCP as a covered benefit in their employer-sponsored health plans.

 DHSS expanded a communications campaign to establish the National DPP LCP in high-burden communities.

Performance Measures

NR** *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

NR** *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

Strengthen infrastructure for engaging CHWs

 With support from DHSS, twenty-six community health centers hired CHWs to work with Medicaid and Medicare beneficiaries to assess social determinants of health.

Performance Measures

5 *Academic and other institutions offering CHW core competency training*

111 *CHWs who have received core competency training*

0 *CHWs who have received certification*

0 *CHWs who are paid from sustainable statewide payment mechanisms*

**Value was not included in the aggregate analysis because it is invalid | **NR = not reported*

20,194 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

9,154 *Participants enrolled in CDC-recognized organizations*



MISSISSIPPI | Year 1 Recipient Profile

The **Mississippi State Department of Health (MSDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington, DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,396,150

Category A Funding Level: \$1,198,075



13.0% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community-based organizations
- Health care organizations
- Medicaid

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, MSDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





MSDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



MSDH and the State Office of Health Data and Research mapped existing DSMES services and diabetes prevalence to identify priority areas for new DSMES services and sites.



MSDH engaged MS Medicaid to explore the feasibility of using a fee-for-service reimbursement model for community-based DSMES classes to increase beneficiaries' use of this covered benefit.

42* *New recognized/
accredited DSMES
services established*

NR** *New recognized/
accredited DSMES sites
established*

NR** *Medicaid beneficiaries
who have DSMES as a
covered benefit*

Performance Measures

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



MSDH provided technical assistance to help six organizations earn CDC recognition for offering the National DPP LCP.



MSDH began offering the National DPP LCP as a covered benefit to MSDH employees and began planning for expanding coverage to all state employees, retirees, and dependents.



MSDH is developing a marketing campaign to increase awareness of prediabetes and promote health care provider referrals to the National DPP LCP.

45 *Patients served within health care
organizations that have systems to identify
people with prediabetes and refer them
to CDC-recognized organizations*

NR** *State/public employees and dependents
who have the National DPP LCP as a
covered benefit*

Performance Measures

**Value was not included in the aggregate analysis because it is invalid | **NR = not reported*

3,016

*People with diabetes with at least
one encounter at a recognized/
accredited DSMES service*

1,585

*Participants enrolled in CDC-
recognized organizations*



MONTANA | Year 1 Recipient Profile

The **Montana Department of Public Health and Human Services (MDPHHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,610,090

Category A Funding Level: \$805,045



8% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 – Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institution
- Community health centers
- County health department
- Health care organizations
- Pharmacists
- Primary care associations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, MDPHHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





MDPHHS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



MDPHHS provided technical assistance and financial support to DSMES sites in underserved/high burden areas interested in attaining accreditation/recognition.



MDPHHS transitioned partner DSMES sites to an enhanced web-based system to improve DSMES data submission and related quality improvement work, such as improved billing.



MDPHHS partnered with a pharmacist consultant to record and transcribe educational webinars targeted to pharmacists to engage them in medication therapy management.

Performance Measures

0 New recognized/
accredited DSMES
services established

160,529 Medicaid beneficiaries
who have DSMES as a
covered benefit

141 Pharmacists using patient care
processes to promote
medication management for
people with diabetes

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



MDPHHS created a website widget that helps people with prediabetes self-refer to the National DPP LCP.



MDPHHS worked with MT Medicaid to help enroll seventy-seven Medicaid beneficiaries in the National DPP LCP, the highest ever achieved since MT provided the National DPP LCP as a covered benefit.



MDPHHS included the Ad Council prediabetes campaign and the MT DPP Story Map to the MT Diabetes Program website to encourage people to take the Risk Test and promote enrollment.

Performance Measures

264 Patients served within health care
organizations that have systems to identify
people with prediabetes and refer them to
CDC-recognized organizations

86,843 Medicaid beneficiaries who have
the National DPP LCP as a covered
benefit

7,006

People with diabetes with at least
one encounter at a recognized/
accredited DSMES service

3,158

Participants enrolled in CDC-
recognized organizations



DP18-1815
Category A

Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke

NORTH CAROLINA | Year 1 Recipient Profile

The **North Carolina Division of Public Health (NCDPH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,941,614

Category A Funding Level: \$970,807



11% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Diabetes advisory council
- Community-based organizations
- Health systems
- Health plans
- Pharmacies

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, NCDPH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

For more information please contact DDTeval@cdc.gov.

DRAFT: 3/03/2020





NCDPH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



NCDPH worked with twenty-seven DSMES sites to help them complete their American Diabetes Association (ADA)-recognition renewal application under the state's umbrella license.



NCDPH provided technical assistance to two pharmacies on becoming ADA-recognized DSMES sites under the state's umbrella license.

Performance Measures

1 *New recognized/ accredited DSMES services established*

3 *New recognized/ accredited DSMES sites established*

2 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



NCDPH developed a request for applications for a practice transformation contractor to assist in identifying and recruiting practices that will screen for prediabetes and refer individuals to the National DPP LCP.



NCDPH coordinated with the Blue Cross Blue Shields of NC - Diabetes Free NC Initiative to identify employers to participate in a pilot offering the National DPP LCP to their employees free of charge.



NCDPH funded six pharmacies to become CDC-recognized organizations and offer the National DPP LCP to priority populations.

Performance Measures

NR* *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

19,740 *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

** NR = not reported*

26,902

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

10,217

Participants enrolled in CDC-recognized organizations



NORTH DAKOTA | Year 1 Recipient Profile

The **North Dakota Department of Health (NDDoH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,820,064

Category A Funding Level: \$910,032



8.7% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Federally qualified health centers
- Health plans
- Medicaid managed care organizations
- Pharmacies/pharmacists
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, NDDoH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





NDDoH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



NDDoH surveyed Critical Access Hospitals to identify organizations interested in starting new DSMES services.



NDDoH disseminated a pharmacy assessment to 170 pharmacies to assess pharmacists' provision of medication management services across the state.

<i>Performance Measures</i>		
0 <i>New recognized/ accredited DSMES services established</i>	48* <i>New recognized/ accredited DSMES sites established</i>	17 <i>Pharmacists using patient care processes to promote medication management for people with diabetes</i>

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



NDDoH developed a website to track referrals to and cohorts of enrolled participants in the National DPP LCP.



NDDoH began a National DPP LCP pilot program to evaluate the efficacy of offering the National DPP LCP for North Dakota Public Employees Retirement System beneficiaries.



NDDoH increased the number of trainings for National DPP Lifestyle Coaches in underserved areas through a partnership with North Dakota State University Extension.

<i>Performance Measures</i>	
208,255 <i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>	42,701 <i>State/public employees and dependents who have the National DPP LCP as a covered benefit</i>

**Value was not included in the aggregate analysis because it is invalid*

15,533 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

1,163 *Participants enrolled in CDC-recognized organizations*



NEBRASKA | Year 1 Recipient Profile

The **Nebraska Department of Health and Human Services (DHHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,552,328

Category A Funding Level: \$ 776,164



8.8% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community-based organizations
- Health care organizations
- Medicaid
- Medicaid managed care organizations
- Pharmacists
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





DHHS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DHHS provided technical assistance to two health care organizations on becoming a DSMES site and increasing participation in DSMES.



DHHS partnered with Medicaid to identify opportunities to educate managed care organizations about DSMES coverage and explore the feasibility of expanding coverage for Medicaid beneficiaries.



DHHS worked with a network of 36 independent community pharmacy practices to support DSMES services and promote the adoption of tools to facilitate two-way communication with physicians.

Performance Measures

0* *New recognized/ accredited DSMES sites established*

0 *Medicaid beneficiaries who have DSMES as a covered benefit*

0 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



DHHS developed a funding proposal to help health care organizations improve their referral pathways to CDC-recognized organizations offering the National DPP LCP.



DHHS identified 14 private businesses with the potential to offer the National DPP LCP as a covered benefit or worksite wellness program for 2,800 employees.



DHHS provided training to nine CDC-recognized organizations on marketing strategies to increase enrollment in the National DPP LCP.

Performance Measures

0 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

* Value was not included in the aggregate analysis because it is invalid

10,920 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

2,694 *Participants enrolled in CDC-recognized organizations*



NEW HAMPSHIRE | Year 1 Recipient Profile

The **New Hampshire Department of Health and Human Services (DHHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,392,190

Category A Funding Level: \$696,095



8.6% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institution
- Community-based organizations
- Health care organizations
- Health systems
- Pharmacists

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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DRAFT: 3/03/2020





DHHS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 DHHS executed a contract with the Community Health Access Network (CHAN) to work with federally qualified health centers and the Healthcare for the Homeless program at Catholic Medical Center to expand accredited DSMES services.

 DHHS disseminated a survey to 2,500 pharmacists to assess their provision of DSMES, medication therapy management, and use of collaborative practice agreements.

Performance Measures

17* *New recognized/ accredited DSMES services established*

NR** *New recognized/ accredited DSMES sites established*

418 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 DHHS identified health systems to support workflow redesign and referrals to the National DPP LCP.

 DHHS partnered with the State of NH Risk Management to increase enrollment of state employees and retirees in the National DPP LCP.

 DHHS held a meeting with the Manchester Health Department and CHAN to assess the diabetes prevention environment and develop a plan to increase participation in the National DPP LCP.

Performance Measures

NR** *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

27,861 *State/public employees and dependents who have National DPP LCP as a covered benefit*

Strengthen infrastructure for engaging CHWs

 DHHS did not report progress on this strategy in Year 1.

Performance Measures

1 *Academic and other institutions offering CHW core competency training*

NR** *CHWs who have received certification*

140 *CHWs who have received core competency training*

NR** *CHWs who are paid from sustainable statewide payment mechanisms*

**Value was not included in the aggregate analysis because it is invalid | ** NR = not reported*

9,782 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

2,922 *Participants enrolled in CDC-recognized organizations*



NEW JERSEY | Year 1 Recipient Profile

The **New Jersey Department of Health (NJDOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,713,264

Category A Funding Level: \$856,632



9.5% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community-based organizations
- Health care organizations
- Health plans
- Hospital association
- Medicaid
- Pharmacy association

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, NJDOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





NJDOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



NJDOH funded four health care organizations to support DSMES capacity building, including implementing electronic health record screening and referral tools.



NJDOH partnered with the NJ Academy of Family Physicians to conduct focus groups on barriers to providing medication therapy management for people with diabetes.

Performance Measures

0* *New recognized/ accredited DSMES services established*

0* *New recognized/ accredited DSMES sites established*

0* *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



NJDOH funded two healthcare organizations to implement EHR screening and referral tools for the National DPP LCP.



NJDOH partnered with Medicaid to draft an action plan to promote awareness of the Medicaid Diabetes Prevention (MDPP) reimbursement model.



NJDOH identified three YMCA locations in targeted geographic regions to train staff on becoming certified Lifestyle Coaches to increase access to the National DPP LCP.

Performance Measures

NR** *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

NR** *Medicaid beneficiaries who have the National DPP LCP as a covered benefit*

** Value was not included in the aggregate analysis because it is invalid | **NR = not reported*

20,008

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

2,886

Participants enrolled in CDC-recognized organizations



NEW MEXICO | Year 1 Recipient Profile

The **New Mexico Department of Health (NMDOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,861,165

Category A Funding Level: \$930,578



11.2% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Community-based organizations
- Community health worker association
- Federally qualified health centers
- Health systems
- National associations
- Pharmacy association
- Primary care association

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, NMDOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





NMDOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



NMDOH partnered with the American Association of Diabetes Care and Education Specialists (ADCES) to develop DSMES training opportunities for health administrators and health care professionals.



NMDOH engaged with pharmacies and pharmacy associations to assess medication management and DSMES services being provided by pharmacists.

Performance Measures

0 *New recognized/ accredited DSMES services established*

1 *New recognized/ accredited DSMES sites established*

0 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



NMDOH partnered with Health Insight to develop an e-referral workflow process to assist health care organizations with prediabetes screening and referral to CDC-recognized organizations.



NMDOH provided technical assistance to Lifestyle Coaches at three CDC-recognized organizations to identify solutions for barriers related to delivering the National DPP LCP.

Performance Measures

111 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs



NMDOH engaged community-based organizations to promote CHW core competency training delivery to tribal communities.

Performance Measures

9 *Academic and other institutions offering CHW core competency training*

352 *CHWs who have received certification*

415 *CHWs who have received core competency training*

NR* *CHWs who are paid from sustainable statewide payment mechanisms*

* NR = not reported

4,866

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

1,610

Participants enrolled in CDC-recognized organizations



NEVADA | Year 1 Recipient Profile

The **Nevada Department of Health and Human Services (DHHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,065,826

Category A Funding Level: \$1,032,913



9.6% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Community-based organizations
- Federally qualified health centers
- Health care organizations
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





DHSS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DHSS provided support for a health care network's Association of Diabetes Care and Education Specialists (ADCES) accreditation application for its DSMES services.



DHSS provided technical assistance to a federally qualified health center implementing medication therapy management protocols within its electronic health record, which contributed to 288 people with diabetes being referred to a pharmacist for medication management services.

Performance Measures

2 New recognized/
accredited DSMES
services established

2 New recognized/
accredited DSMES sites
established

10 Pharmacists using patient care processes to
promote medication management for
people with diabetes

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



DHSS partnered with Access to Healthcare Network (AHN) and St. Mary's Regional Medical Center to refer people with prediabetes to AHN's National DPP LCP.



DHSS provided technical assistance to a health system which successfully secured an agreement to provide the National DPP LCP as a covered benefit for their employees.



DHSS provided technical assistance to a health system to integrate community health workers (CHWs) into care teams and promote referral of people with prediabetes to the National DPP LCP.

Performance Measures

500 Patients served within health care organizations
that have systems to identify people with
prediabetes and refer them to CDC-recognized
organizations

0 Private sector employees and dependents who
have the National DPP LCP as a covered
benefit

5,732 People with diabetes with at least
one encounter at a recognized/
accredited DSMES service

1,125 Participants enrolled in CDC-
recognized organizations



NEW YORK | Year 1 Recipient Profile

The **New York State Department of Health** (NYSDOH) is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,671,258

Category A Funding Level: \$1,335,629



9.8% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Medicaid
- Community-based organizations
- Medical society
- Health plans

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, NYSDOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





NYSDOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



NYSDOH administered a survey to 6,000 Medicaid beneficiaries with diabetes to identify barriers and facilitators to participation in DSMES services.



NYSDOH hosted a training for over 300 pharmacists and public health practitioners on the role of pharmacists in the provision of medication management for people with diabetes.

Performance Measures

0 *New recognized/ accredited DSMES services established*

0 *New recognized/ accredited DSMES sites established*

22 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



NYSDOH provided technical assistance to partners and programs on developing referral protocols, building workforce capacity, and selecting locations for community delivery of the National DPP LCP.



NYSDOH collaborated with Medicaid and other state partners to successfully include coverage for the National DPP LCP in the Governor's 2019-2020 Executive Budget.



NYSDOH translated the National DPP Prevent T2 curriculum into seven additional languages to expand access for people in high-need communities.

Performance Measures

9,827 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *Medicaid beneficiaries have the National DPP LCP as a covered benefit*

59,235

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

15,079

Participants enrolled in CDC-recognized organizations



OHIO | Year 1 Recipient Profile

The **Ohio Department of Health (ODH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$ \$1,947,406

Category A Funding Level: \$973,703



10.7% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Federally qualified health centers
- Health care organizations
- Health plans
- Medicaid managed care organizations
- Pharmacists
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, ODH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





ODH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



ODH developed a contract to support the implementation of a federally qualified improvement project to identify and refer people with diabetes to DSMES services.



ODH engaged a pharmacy management group to implement in-patient pharmacist referrals to DSMES services and to promote scheduling appointments for medication management during DSMES classes.

Performance Measures

0* *New recognized/ accredited DSMES services established*

0* *New recognized/ accredited DSMES sites established*

5 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



ODH partnered with the Buckeye Health Plan on a pilot project to increase physician awareness of prediabetes and the National DPP LCP using a new resource tool: "Screen, Test, Refer. Addressing Prediabetes in Ohio: Action Steps for the Healthcare Team"



ODH worked with the Buckeye Health Plan to pilot a protocol for enrolling dually-eligible Medicare and Medicaid beneficiaries in the National DPP LCP.



ODH provided stipends, childcare vouchers, and transportation vouchers to twelve CDC-recognized organizations to increase enrollment of priority populations in the National DPP LCP.

Performance Measures

66,776 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

0 *Medicaid beneficiaries who have the National DPP LCP as a covered benefit*

** Value was not included in the aggregate analysis because it is invalid*

29,953

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

14,746

Participants enrolled in CDC-recognized organizations



OKLAHOMA | Year 1 Recipient Profile

The **Oklahoma State Department of Health (OSDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,795,560

Category A Funding Level: \$897,780



11.4% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Community health centers
- Federally qualified health centers
- Indian Health Service/tribes
- Local health departments
- Pharmacies
- State agencies
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, OSDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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DRAFT: 3/03/2020





OSDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 With support from OSDH, five behavioral health homes received technical assistance to offer DSMES services and implement clinical workflows to refer people to DSMES sites.

 OSDH collaborated with partners to inform private insurers on the return on investment of DSMES coverage benefit for employees and their dependents.

 With support from OSDH, Southwestern Oklahoma State University's Rural Health Center trained staff in four rural community pharmacies to offer DSMES services for people with diabetes.

Performance Measures

0 *New recognized/ accredited DSMES services established*

NR* *Private sector employees and dependents who have DSMES as a covered benefit*

13 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 With support from OSDH, Choctaw Nation Health Services expanded a team-based care program to enable pharmacists to refer people with prediabetes to the National DPP LCP.

 OSDH worked with the State Engagement Meeting workgroups to address accessibility and referrals to the National DPP LCP.

Performance Measures

NR* *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs

 OSDH convened a CHW advisory group which included members of the CHW Taskforce, tribal health services, and other stakeholders to commission a study to assess the value of CHWs.

Performance Measures

NR* *Academic and other institutions offering CHW core competency training*

NR* *CHWs who have received certification*

NR* *CHWs who have received core competency training*

NR* *CHWs who are paid from sustainable statewide payment mechanisms*

* NR = not reported

12,532 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

2,820 *Participants enrolled in CDC-recognized organizations*



OREGON | Year 1 Recipient Profile

The **Oregon Health Authority (OHA)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,071,748

Category A Funding Level: \$1,035,874



10% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Community-based organizations
- Community health worker associations
- Health care quality improvement
- Indian Health Service/tribes
- Medicaid
- State/public or private employers
- Local health departments

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, OHA is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





OHA is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 With support from OHA, HealthInsight established DSMES services at two dialysis clinics and implemented a pilot program in the Oregon Department of Corrections.

 OHA facilitated a strategic planning meeting for Oregon’s Public Employees Benefit Board, during which diabetes was identified as a strategic priority for the Board’s annual wellness initiatives in the coming year.

Performance Measures		
0 <i>New recognized/ accredited DSMES services established</i>	0 <i>New recognized/ accredited DSMES sites established</i>	NR* <i>State/public employees and dependents who have DSMES as a covered benefit</i>

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 With support from OHA, HealthInsight provided technical assistance to three health systems in rural Oregon to optimize their EHR workflows for identifying and referring people with prediabetes to the National DPP LCP.

 The Health Evidence Review Commission voted to expand Medicaid members’ eligibility for National DPP LCP coverage to include diagnosed obesity and diagnosed prediabetes.

 With funding from OHA, Oregon Health Sciences University trained nine tribal health partners on recruitment, enrollment, and retention strategies for the National DPP LCP.

Performance Measures		
36,466 <i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>	567,202 <i>Medicaid beneficiaries have the National DPP LCP as a covered benefit</i>	

Strengthen infrastructure for engaging CHWs

 With support from OHA, the Oregon CHW Association began recruiting federally qualified health centers and other health systems to develop payment mechanisms to integrate CHWs into clinical team-based care.

Performance Measures		
6 <i>Academic and other institutions offering CHW core competency training</i>	512 <i>CHWs who have received certification</i>	
512 <i>CHWs who have received core competency training</i>	365 <i>CHWs who are paid from sustainable statewide payment mechanisms</i>	

* NR = not reported

22,698 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

7,175 *Participants enrolled in CDC-recognized organizations*



PENNSYLVANIA | Year 1 Recipient Profile

The **Pennsylvania Department of Health (PDOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,917,642

Category A Funding Level: \$958,821



9.9% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Community-based organizations
- Federally qualified health centers
- Health care quality improvement organizations
- Medicaid managed care organizations
- Pharmacies/pharmacists
- Private medical practices

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, PDOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening, and referral to/, participation, and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





PDOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from PDOH, the Pennsylvania Pharmacists Association (PPA) provided technical assistance to seven pharmacies, three of which are in counties with a high diabetes burden, to begin the accreditation process for their DSMES services.



With support from PDOH, the PPA convened regular meetings for pharmacies with Association of Diabetes Care and Education (ADCES)-accredited DSMES services to help them maintain accreditation by sharing successes and identifying challenges, such as billing.

Performance Measures

7 *New recognized/
accredited DSMES
services established*

16 *New recognized/
accredited DSMES
sites established*

7 *Recognized/accredited
pharmacy-based DSMES
services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from PDOH, Quality Insights identified health systems and private medical practices with clinical decision support capabilities to refer people with prediabetes to the National DPP LCP.



With support from PDOH, the PA Employees Benefit Trust Fund and the YMCA began a pilot to offer the National DPP LCP as a covered benefit to state employees at two sites in Harrisburg.



With support from PDOH, the Health Promotion Council piloted an online platform among four National DPP Master Trainers and 170 Lifestyle Coaches to facilitate information sharing on increasing participation in the National DPP LCP.

Performance Measures

58,876* *Patients served within health care
organizations that have systems to identify
people with prediabetes and refer them to
CDC-recognized organizations*

0 *State/public employees and dependents
who have the National DPP LCP as a
covered benefit*

**Value was not included in the aggregate analysis because it is invalid*

49,103

*People with diabetes with at least
one encounter at a recognized/
accredited DSMES service*

3,587

*Participants enrolled in CDC-
recognized organizations*



RHODE ISLAND | Year 1 Recipient Profile

The **Rhode Island Department of Health (RIDOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,606,580

Category A Funding Level: \$803,290



9.5% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Accountable care organizations
- Business coalitions
- Federally qualified health centers
- Local health departments
- Medicaid managed care organizations
- Neighborhood coalitions

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, RIDOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase or strengthen Medicaid and employer DSMES coverage

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





RIDOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from RIDOH, Diabetes Education Partners identified two urban pharmacies and one hospital in underserved areas to receive technical assistance to begin offering accredited DSMES services.



RIDOH organized a day-long workshop to provide existing Association of Diabetes Care and Education (ADCES)-accredited and American Diabetes Association (ADA)-recognized DSMES sites with technical assistance on receiving Medicare reimbursement.

Performance Measures

1 New recognized/
accredited DSMES
service established

0* New recognized/
accredited DSMES
sites established

153,700 Medicaid beneficiaries
who have DSMES as a
covered benefit

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from RIDOH, 18 Federally Qualified Health Centers (FQHCs) and community health centers began enacting systems to screen and refer people with prediabetes to the National DPP LCP.



With support from RIDOH, the RI DPP Stakeholder Network, which promotes National DPP enrollment, diversified its members to include the YMCA, private insurers, and accountable care organizations.

Performance Measures

50,912 Patients served within health care
organizations that have systems to identify
people with prediabetes and refer them to
CDC-recognized organizations

1,500 Private sector employees and
dependents who have the National
DPP LCP as a covered benefit

Strengthen infrastructure for engaging CHWs



With support from RIDOH, the CHW Association of RI launched a program to train and certify CHWs in diabetes management.

Performance Measures

1 Academic and other institutions offering
CHW core competency training

108 CHWs who have received core
competency training

256 CHWs who have received certification

65 CHWs who are paid from sustainable
statewide payment mechanisms

* Value was not included in the aggregate analysis because it is invalid

591

People with diabetes with at least
one encounter at a recognized/
accredited DSMES service

1,654

Participants enrolled in CDC-
recognized organizations



SOUTH CAROLINA | Year 1 Recipient Profile

The **South Carolina Department of Health and Environmental Control (SCDHEC)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,793,280

Category A Funding Level: \$896,640



11.6% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Federally qualified health centers
- Health plans
- Medicaid managed care organizations
- Pharmacies and pharmacy associations
- Rural health centers
- Professional associations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, SCDHEC is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





SCDHEC is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



SCDHEC drafted a tool to identify partners from 48 RHCs and FQHCs to potentially offer DSMES services.



With support from SCDHEC, the SC Pharmacy Association presented a hybrid model of care for engaging pharmacists in DSMES and medication therapy management for people with diabetes at the statewide chronic disease conference.

<i>Performance Measures</i>		
0 <i>New recognized/ accredited DSMES services established</i>	NR* <i>New recognized/ accredited DSMES sites established</i>	NR* <i>Recognized/accredited pharmacy-based DSMES services</i>

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



SCDHEC developed an assessment to identify up to six health care organizations to receive assistance on integrating prediabetes screening and referral workflows into their EHRs.



SCDHEC, the Diabetes Advisory Council, and the South Carolina Business Coalition on Health collaboratively developed a business case to expand coverage of the National DPP LCP among private employers and insurers.



With support from SCDHEC, the Diabetes Advisory Council drafted action plans to increase access to and enrollment in CDC-recognized organizations.

<i>Performance Measures</i>	
11,420 <i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>	8,584 <i>Private sector employees and dependents who have the National DPP LCP as a covered benefit</i>

* NR = not reported

12,489 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

4,751 *Participants enrolled in CDC-recognized organizations*



SOUTH DAKOTA | Year 1 Recipient Profile

The **South Dakota Department of Health (DOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,938,042

Category A Funding Level: \$969,02123



8.2% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Clinics
- Community-based organizations
- Health systems
- Medicaid
- Tribal organizations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DOH funded the Sanford USD Medical Center to increase access to diabetes management services by offering telehealth DSMES services to three rural clinics.



DOH collaborated with South Dakota State University to conduct a landscape analysis of DSMES services provided by pharmacists and identify opportunities to expand DSMES services.

Performance Measures

0 New recognized/
accredited DSMES
services established

4 New recognized/
accredited DSMES sites
established

0 Recognized/accredited
pharmacy-based DSMES
services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



DOH developed a health care organization-focused model policy for prediabetes screening and referral.



DOH collaborated with the University of South Dakota to assess diabetes coverage across the state and identified payers to engage around expanded coverage for the National DPP LCP.



With support from DOH, the Great Plains Tribal Chairmen's Health Board developed culturally relevant promotional materials and curricula for the National DPP LCP.

Performance Measures

283,866 Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations

0 Private sector employees and dependents who have the National DPP LCP as a covered benefit

Strengthen infrastructure for engaging CHWs



DOH developed a CHW reference document to provide education to providers on the role of CHWs and provide guidance on Medicaid reimbursement for CHW services.

Performance Measures

1 Academic and other institutions offering CHW core competency training

NR* CHWs who have received certification

0 CHWs who have received core competency training

NR* CHWs who are paid from sustainable statewide payment mechanisms

* NR = not reported

3,184

People with diabetes with at least one encounter at a recognized/accredited DSMES service

857

Participants enrolled in CDC-recognized organizations



TENNESSEE | Year 1 Recipient Profile

The **Tennessee Department of Health (TDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,273,138

Category A Funding Level: \$1,136,569



12.2% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Types of partners

- Academic institutions
- Community-based organizations
- Local health departments
- Primary care association
- Pharmacy association

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, TDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





TDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from TDH, the Tennessee Primary Care Association (TPCA) developed a referral resource workflow guide for community health centers to increase referrals to DSMES services.



With support from TDH, the Tennessee Pharmacy Association (TPA) developed an electronic referral and tracking tool for pharmacies in high need areas to refer people with diabetes to diabetes management services.

Performance Measures

0 *New recognized/ accredited DSMES services established*

0 *New recognized/ accredited DSMES sites established*

35 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from TDH, Meharry Medical College integrated a screening and referral process within its EHR to refer people with prediabetes to CDC-recognized organizations offering the National DPP LCP.



With support from TDH, the TPA engaged Medicaid to discuss reimbursement for pharmacies providing diabetes prevention programs and services.



With support from TDH, local health departments have trained Lifestyle Coaches to offer the National DPP LCP and are working to promote referrals to CDC-recognized organizations offering the National DPP LCP.

Performance Measures

NR* *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

NR* *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

* NR = not reported

13,642

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

6,529

Participants enrolled in CDC-recognized organizations



TEXAS | Year 1 Recipient Profile

The **Texas Department of State Health Services (DSHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,985,696

Category A Funding Level: \$1,492,848



12.1% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Coverage workgroup
- National associations
- Pharmacy association
- Wellness coordinators

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DSHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





DSHS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DSHS provided technical assistance to non-recognized/accredited DSMES services to assist them in applying for recognition/accreditation.



DSHS contracted with the Texas Pharmacy Association (TPA) to address pharmacy capacity in providing medication management and DSMES services to people with diabetes.

Performance Measures

NR* *New recognized/accredited DSMES services established*

NR* *New recognized/accredited DSMES sites established*

NR* *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



DSHS collaborated with the state Oral Health Program to identify opportunities to leverage dental hygienists in promoting prediabetes risk screening and referral to CDC-recognized organizations offering the National DPP LCP.



DSHS worked with employer wellness coordinators to host a National DPP Coverage Workshop promoting expanded coverage.



DSHS mapped the geographic locations of the state's Lifestyle Coaches, prediabetes prevalence, and available resources to inform future Lifestyle Coach trainings.

Performance Measures

1,923,516 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

NR* *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

*NR = not reported

39,226 *People with diabetes with at least one encounter at a recognized/accredited DSMES service*

14,074 *Participants enrolled in CDC-recognized organizations*



UTAH | Year 1 Recipient Profile

The **Utah Department of Health (UDOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,541,326

Category A Funding Level: \$770,663



8.7% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Community-based organizations
- Medicare
- Pharmacies
- Pharmacy association
- Private insurers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, UDOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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DRAFT: 3/03/2020





UDOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



UDOH engaged the Association for Utah Community Health and local health departments to provide technical assistance to DSMES providers resulting in the establishment of five new accredited DSMES services.



UDOH collaborated with the Utah Pharmacy Association to provide training to pharmacists on patient care processes and medication management and to offer technical assistance to two pharmacies interested in providing DSMES services.

Performance Measures

5 *New recognized/ accredited DSMES services established*

0* *New recognized/ accredited DSMES sites established*

1 *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



UDOH conducted a survey of health systems to assess current referral systems, identify opportunities to improve workflow policies, and promote referral to CDC-recognized organizations.



UDOH identified private sector employee wellness programs to promote the Prediabetes Risk Test to their employees.



UDOH hosted a statewide training for eleven Lifestyle Coaches from six organizations around the state.

Performance Measures

610,350 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

42,500 *Private sector employees and dependents who have the National DPP LCP as a covered benefit*

Strengthen infrastructure for engaging CHWs



UDOH developed recommendations for the structure of CHW supervision in clinical settings to promote long term financial support for CHWs.

Performance Measures

1 *Academic and other institutions offering CHW core competency training*

NR** *CHWs who have received certification*

5 *CHWs who have received core competency training*

0 *CHWs who are paid from sustainable statewide payment mechanisms*

* Value was not included in the aggregate analysis because it is invalid | **NR = not reported

11,991 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

3,536 *Participants enrolled in CDC-recognized organizations*



VIRGINIA | Year 1 Recipient Profile

The **Virginia Department of Health (VDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,721,810

Category A Funding Level: \$860,905



9.5% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Complementary diabetes programs

DP1817 - Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Community-based organizations
- Health care organizations
- Pharmacists

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, VDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

For more information please contact DDTeval@cdc.gov.
DRAFT: 3/03/2020





VDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



VDH convened monthly workgroup meetings to share resources and plan activities to assist existing DSMES services achieve or maintain accreditation.



VDH facilitated interconnectivity between five pharmacists and five pharmacy care practices to test a chronic care management model to engage pharmacists in diabetes management.

Performance Measures

45* *New recognized/ accredited DSMES services established*

2 *Recognized/accredited pharmacy-based DSMES services*

379 *Pharmacists using patient care processes to promote medication management for people with diabetes*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



VDH received commitment from the Medical Society of Virginia Foundation to support forums and trainings to promote prediabetes screening and referral to CDC-recognized organizations offering the National DPP LCP.



With support from VDH, the Virginia Diabetes Council promoted the National DPP LCP through media, radio, and television channels to support participant engagement, particularly in high-burden areas.

Performance Measures

0 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs



VDH established a CHW training and curricula subcommittee to develop a standard review process for statewide training programs.

Performance Measures

7 *Academic and other institutions offering CHW core competency training*

55 *CHWs who have received certification*

130 *CHWs who have received core competency training*

NR** *CHWs who are paid from sustainable statewide payment mechanisms*

* Value was not included in the aggregate analysis because it is invalid | **NR = not reported

18,610 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

6,882 *Participants enrolled in CDC-recognized organizations*



VERMONT | Year 1 Recipient Profile

The **Vermont Department of Health (VDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,516,606

Category A Funding Level: \$758,303



7.6% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Types of partners

- Academic institutions
- Federally qualified health centers
- Hospital systems
- Medicaid
- Pharmacist associations
- Tribal organizations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, VDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (the National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

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VDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



VDH executed contracts with eight Federally Qualified Health Centers (FQHCs) and two hospital systems to implement Diabetes Self-Management Program (DSMP) referral protocols.



VDH supported one FQHC and two hospital practices to engage their embedded pharmacists in DSMES care coordination and medication therapy management for people with diabetes.

Performance Measures

19 *New DSMP workshops offered*

19 *New recognized/ accredited DSMES sites established*

NR* *Recognized/accredited pharmacy-based DSMES services*

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



VDH collaborated with partners to assess the capacity for implementing an e-referral system between the state's care coordination platform and CDC-recognized organizations offering the National DPP LCP.



VDH developed two pilot programs focused on distance learning platforms for the National DPP LCP.

Performance Measures

84,982 *Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations*

Strengthen infrastructure for engaging CHWs



VDH convened stakeholders to review the state's CHW landscape; classify core competencies; and identify training needs, strategies to grow the workforce, and sustainable reimbursement and billing mechanisms.

Performance Measures

NR* *Academic and other institutions offering CHW core competency training*

NR* *CHWs who have received certification*

NR* *CHWs who have received core competency training*

NR* *CHWs who are paid from sustainable statewide payment mechanisms*

**NR = not reported*

1,162

People with diabetes with at least one encounter at a recognized/ accredited DSMES service

222

Participants enrolled in CDC-recognized organizations



WASHINGTON | Year 1 Recipient Profile

The **Washington State Department of Health (DOH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$2,080,468

Category A Funding Level: \$1,040,234



9% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Community-based organizations
- Federally qualified health centers
- Health care organizations
- Pharmacists/pharmacy associations
- State/public and private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DOH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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DRAFT: 3/03/2020





DOH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services

 DOH supported 10 state-recognized DSMES services and continued to work towards increasing the number of available sites.

 With funding from DOH, Washington State Pharmacy Association developed a certificate course to train pharmacists to work on multi-disciplinary care teams that manage diabetes.

<i>Performance Measures</i>		
9 <i>New recognized/ accredited DSMES services established</i>	9 <i>New recognized/ accredited DSMES sites established</i>	NR* <i>Recognized/accredited pharmacy-based DSMES services</i>

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP

 DOH developed a contract with the Washington State Health Care Authority to support Federally Qualified Health Centers (FQHCs) in offering prediabetes screenings and supporting referrals to CDC-recognized organizations delivering the National DPP LCP.

 With support from DOH, the Employer/Workplace Workgroup initiated development of a toolkit for use by employers in offering the National DPP LCP onsite.

<i>Performance Measures</i>	
NR*	<i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>

Strengthen infrastructure for engaging CHWs

 With support from DOH, the CHW Training System (CHWTS) created a SharePoint site to facilitate partner communication and share information on the CHW Proviso and the CHW Task Force.

<i>Performance Measures</i>	
NR* <i>Academic and other institutions offering CHW core competency training</i>	NR* <i>CHWs who have received certification</i>
NR* <i>CHWs who have received core competency training</i>	NR* <i>CHWs who are paid from sustainable statewide payment mechanisms</i>

** NR = not reported*

28,429 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

18,116 *Participants enrolled in CDC-recognized organizations*



WISCONSIN | Year 1 Recipient Profile

The **Wisconsin Department of Health Services (DHS)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,679,650

Category A Funding Level: \$839,825



7.4% of adults have been told by a doctor they have diabetes (2018, [BRFSS/CDI](#))

Complementary diabetes programs

DP1817 – Innovative Strategies to Prevent and Manage Diabetes and Heart Disease

Types of partners

- Academic institutions
- Health care organizations
- Health plans
- Health systems
- Pharmacy associations
- Tribal organizations

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHS is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

Strengthen infrastructure for engaging Community Health Workers (CHWs)



Strengthen statewide infrastructure to support long-term sustainability of CHWs

This Profile provides an overview of activities and key achievements during Year 1 (Sept 2018 – June 2019) of the DP18-1815 program (as reported within the Year 1 annual performance report and performance measure report).

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DRAFT: 3/03/2020





DHS is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



With support from DHS, the WI Institute for Healthy Aging provided technical assistance to existing recognized/accredited DSMES services to increase provider referrals of people with diabetes.



With support from DHS, the Pharmacy Society of Wisconsin began planning a pilot to refer people with diabetes to a pharmacist for medication therapy management services.

Performance Measures

4 <i>New recognized/accredited DSMES services established</i>	9 <i>New recognized/accredited DSMES sites established</i>	241 <i>Pharmacists using patient care processes to promote medication management for people with diabetes</i>
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Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



With support from DHS, one health system established processes for providers to identify and refer persons with prediabetes to CDC-recognized organizations offering the National DPP LCP.



With support from DHS, the state agency that oversees benefits for state employees and their dependents is preparing a proposal and business case to expand coverage for the National DPP LCP.



With support from DHS, Bellin Health attained preliminary CDC-recognition and will pursue full recognition, which would make it the only CDC-recognized organization in Brown County open to people with prediabetes who are not members of the Oneida Nation.

Performance Measures

0 <i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>	0 <i>State/public employees and dependents who have the National DPP LCP as a covered benefit</i>
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Strengthen infrastructure for engaging CHWs



With support from DHS, tribal organizations created a protocol to reimburse Community Health Representatives as care coordinators for referring people with diabetes to recognized/accredited DSMES services.

Performance Measures

2 <i>Academic and other institutions offering CHW core competency training</i>	0 <i>CHWs who have received certification</i>
230 <i>CHWs who have received core competency training</i>	1 <i>CHWs who are paid from sustainable statewide payment mechanisms</i>

47,682 *People with diabetes with at least one encounter at a recognized/accredited DSMES service*

6,147 *Participants enrolled in CDC-recognized organizations*



DP18-1815
Category A

Improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stroke

WEST VIRGINIA | Year 1 Recipient Profile

The **West Virginia Department of Health and Human Resources (DHHR)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,807,428

Category A Funding Level: \$903,714



16.2% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Critical access hospitals
- Health care organizations
- Health plans
- Managed care organizations
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, DHHR is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Increase or strengthen Medicaid and employer DSMES coverage

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/03/2020





DHHR is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



DHHR and Quality Insights conducted a statewide landscape assessment of DSMES coverage among private insurers and Managed Care Organizations.

Performance Measures

0 Private employees and dependents have DSMES as a covered benefit

0 State/public employees and dependents have DSMES as a covered benefit

0 Medicaid beneficiaries have DSMES as a covered benefit

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



DHHR provided technical assistance to two health systems on redesigning clinical workflows to better identify patients with prediabetes and refer them to CDC-recognized organizations offering the National DPP LCP.



With support from DHHR, the WV Public Employees Insurance Agency participated in informational sessions focused on expanding the National DPP LCP coverage benefit for their beneficiaries.



DHHR engaged with critical access hospitals in rural areas to implement strategies aimed at increasing enrollment of people with prediabetes in CDC-recognized organizations.

Performance Measures

28,235 Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations

0 State/public employees and dependents have the National DPP LCP as a covered benefit

4,696 People with diabetes with at least one encounter at a recognized/ accredited DSMES service

1,449 Participants enrolled in CDC-recognized organizations



WYOMING | Year 1 Recipient Profile

The **Wyoming Department of Health (WDH)** is a recipient of the CDC-funded DP18-1815 cooperative agreement, which supports all 51 state health departments (including Washington DC) to strengthen efforts to prevent and manage diabetes (Category A) and cardiovascular disease (Category B).

Total Y1 Award: \$1,499,934

Category A Funding Level: \$749,967



7.9% of adults have been told by a doctor they have diabetes (2018, BRFSS/CDI)

Types of partners

- Academic institutions
- Community-based organizations
- Health care quality improvement organizations
- Health plans
- Rural health centers
- State/public or private employers

Diabetes Management and Type 2 Diabetes Prevention

Under **Category A** of DP18-1815, WDH is implementing the following strategies to improve care and management of people with diabetes and increase access to, participation in, and coverage for the National Diabetes Prevention Program (National DPP) lifestyle change program (LCP).

Expand access to and participation in diabetes self-management education and support (DSMES) services



Improve access to and participation in recognized/accredited DSMES services in underserved areas



Increase engagement of pharmacists in the provision of medication management or DSMES services

Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



Implement systems within health care organizations to identify people with prediabetes and refer them to CDC-recognized organizations



Expand availability of the National DPP LCP as a covered benefit



Increase enrollment in the National DPP LCP

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DRAFT: 3/3/2020





WDH is working with partners to promote diabetes management and type 2 diabetes prevention. Below are highlights of key activities and accomplishments from Year 1.

Expand access to and participation in DSMES services



WDH and the WY Association of Diabetes Educators provided technical assistance to support two DSMES sites with their recognition and accreditation renewals.



WDH collaborated with the University of WY School of Pharmacy to integrate patient care processes for medication management into the school's coursework.

Performance Measures

1 <i>New recognized/ accredited DSMES services established</i>	1 <i>New recognized/ accredited DSMES site established</i>	16 <i>Pharmacists using patient care processes to promote medication management for people with diabetes</i>
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Increase prediabetes screening and referral to/participation and retention in the National DPP LCP



WDH promoted type 2 diabetes prevention resources from the American Medical Association to federally qualified health centers and rural health centers through technical assistance webinars.



WDH partnered with the National Association of Chronic Disease Directors and two CDC-recognized organizations to implement coverage expansion pilot projects in two health systems.



WDH and the Office of Rural Health developed tailored National DPP recruitment materials to reach Spanish-speaking populations and pregnant women.

Performance Measures

22 <i>Patients served within health care organizations that have systems to identify people with prediabetes and refer them to CDC-recognized organizations</i>	0* <i>Private sector employees and dependents who have the National DPP LCP as a covered benefit</i>
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*Value was not included in the aggregate analysis because it is invalid

2,042 *People with diabetes with at least one encounter at a recognized/ accredited DSMES service*

133 *Participants enrolled in CDC-recognized organizations*