

The Connector



NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.

Inspiring strategic direction for diabetes prevention & control

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Board President's Message



*Susan Kansagra, MD, MBA,
NACDD Board President*

We are seeing the devastating impact of inequities in our society unfold in this moment, as we see COVID-19 hospitalization and case rates many times higher in Latinx, Black, and Native American/Indigenous communities. These disparities and others remind us that we have much work ahead of us. As we work upstream to address root causes through policy, systems, and environmental changes, we must redouble our efforts to dismantle structural racism and create equitable communities where all have the opportunity to live a healthy life. This is why we launched a President's Challenge to state Chronic Disease Directors to commit to [concrete action steps](#) on incorporating racial equity as a core component of chronic disease programs. Thus far, we have 20 states that have signed on to the challenge.

New Leaders Advance Health Equity

The National Association of Chronic Disease Directors (NACDD) welcomes the new federal administration and new leaders at the Centers for Disease Control and Prevention (CDC). The past year's events led to widespread recognition of the inequitable systems in the U.S. and engendered national momentum to advance racial and health equity. CDC leadership is further prioritizing health equity through a new [national initiative](#) and funding to address COVID-19 health disparities in high-risk and underserved areas, including communities of color and rural communities. President Biden also has issued an executive order, "[On Advancing Racial Equity and Support for Underserved Communities Through the Federal Government](#)," and the formation of a [COVID-19 Health Equity Task Force](#).

NACDD supports efforts to reduce racial and health disparities and to address the root causes of chronic disease in many ways, including by offering professional development opportunities for chronic disease leadership. In November 2020, NACDD hosted "Putting Equity at the Root of Public Health Practice," a Thought Leader Roundtable that brought together Chronic Disease Directors and other state and national leaders to converse and share with one another ways they acknowledge, incorporate, and evaluate programming to become anti-racist organizations. In December 2020, NACDD hosted "Strategies to Support State Work in Addressing Root Causes of Health," a roundtable that explored various methods that states can use to support root causes work, including addressing structural racism. To further advance these efforts NACDD held an ECHO® clinic in March 2021 to discuss ways that Chronic Disease Directors can build the mindsets, skill sets, and expertise of Chronic Disease Unit staff to address the root causes of health through professional development.

Moving forward, NACDD will continue to use its power and voice to fervently advocate for changing systems and policies so that we all have the opportunity, power, and capability to improve our health.

NACDD Addresses COVID-19 Through Innovation

The COVID-19 pandemic amplified existing chronic disease burden inequities placing Black, Latinx, and American Indian/Indigenous people at increased risk of COVID-19 complications. NACDD is committed to looking upstream and advancing racial and health equity throughout all strategic priorities. Some notable strides NACDD made toward this commitment are:

- The [NACDD President's Challenge](#) encourages each State Chronic Disease Director to incorporate advancing racial equity as a core component of state chronic disease programs.
- Hosted several webinars that explore systemic racism and its impact on health including: [Declaring Racism a Public Health Emergency: What Does That Mean?](#); [Managing Chronic Disease During COVID-19: Opportunities for State Health Departments](#); and [Redlining and Chronic Disease: The Legacy of the Built Environment on the Built Environment and on Health](#).
- Collaborated with CBS Television, Nicely Built, Hispanic Communications Network, Black Creative Network, Gallup, and Leavitt Partners to launch authentic, culturally resonant videos and a companion website, "[Your Health Beyond COVID-19 Matters!](#)" about how to stay healthy during the COVID-19 pandemic. Find these videos and more information for reaching underserved populations in both English and Spanish at [yourhealthbeyondcovid.org](#).
- Launched the [COVID Resilience Dashboard](#), a tool that provides key health insights into living with chronic diseases during the COVID-19 pandemic. Since March 2020, fueled by Gallup survey data, the Dashboard covers more than 30 indicators spanning wellbeing, health management, and access to healthcare. The tool provides flexibility in exploring national, state-level, and demographic trends.

Building Resilient Inclusive Communities in the Time of COVID-19

The CDC Division of Nutrition, Physical Activity, and Obesity (DNPAO) and Division of Population Health (DPH) funded NACDD to implement the [Building Resilient Inclusive Communities \(BRIC\) Program](#) to address populations that are most at-risk for adverse COVID-19 impacts due to social, environmental, and economic systemic inequities. BRIC uses innovative, interconnected strategies to increase nutrition security, improve safe and accessible physical activity and essential travel options, and promote social connectedness. NACDD, DNPAO, and DPH are working to implement BRIC in 15 of 16 State Physical Activity and Nutrition (SPAN) program states and five [Ambassador states](#) (these states do not receive SPAN program funding but receive DNPAO-provided training and connectivity support to continue to focus on obesity prevention). BRIC advances NACDD's goals of becoming an anti-racist and model public health organization by addressing upstream factors and social and racial justice, and by working with national partners and states to achieve health equity.

Many existing SPAN-funded programs are implementing "COVID Pivots" – making programmatic adjustments to meet needs raised during the COVID-19 pandemic. BRIC will document state success stories on the "COVID Pivots" and provide technical assistance to states through peer learning opportunities, national expertise, integrated programming, webinars, and resource sharing. NACDD will share these "COVID Pivots" through the development and dissemination of Resiliency Guides. Learn more by reading the [January 2021 BRIC press release](#). For more information on BRIC, contact [Jennie Hefelfinger](#).

Launch of New CHW Document Resource Center and CHW Resource Websites

Community Health Worker Document Resource Center NACHW NATIONAL ASSOCIATION OF COMMUNITY HEALTH WORKERS



Who should use the Database?

- State government officials
- CHW leaders
- Current and potential employers and payers for CHWs
- Other individuals and stakeholder organizations involved in developing and/or advocating for policies on CHWs

Types of Documents in the Database

Action Plans	Agendas	Bills
Brochures	Curriculum Outlines	Descriptions of Training Programs
Fact Sheets	Flyers	Journal Publications
Meeting Minutes	Official Reports	Policy Briefs
Presentations	Study Reports	Survey Reports
Toolkits	White Papers	Workforce Models

What is Not in the Database:

- Maps or tables showing how states compare with each other
- Topics such as "best available evidence of CHW impact" and "best practices in employing CHWs"
- Curriculum materials from specific local training programs

CDC, the National Association of Community Health Workers, and NACDD developed and recently launched the [Community Health Worker \(CHW\) Document Resource Center](#). The Resource Center is a one-stop, searchable online database of more than 800 curated documents for CHWs that cover workforce development practices and state policy advancements. State Health Departments and their partners can use the Resource Center to find information on lessons learned by other states in advancing policies that support CHWs and the infrastructure for financing and sustaining CHWs. Through the resources, organizations, payers, employers, state government officials, and CHW leaders can explore key themes that promote CHW sustainability.

CDC also recently launched the [Resources for Community Health Workers, Community Health Representatives, and Promotores de la Salud for COVID-19 webpage](#). CHWs provide critical services to communities disproportionately impacted by public health threats including COVID-19. The new webpage provides CHWs with resources to support their work, as well as information for their employers to better ensure the safety of CHWs in the community. State and local health departments also may find these resources beneficial to share with local programs and funding recipients.

Lastly, CDC offers the [CHW Resources webpage](#) to make it easier to find credible and evidence-based information relevant to CHWs across a broad range of health topics. The resources are collected from programs across CDC that host materials pertinent to CHWs.

Watch the [Dec. 2020 Chronic Disease Directors Forum](#) to learn more about these resources from CDC CHW Workgroup co-chairs Refilwe Moeti and Betsy Rodriguez.

Learning Collaborative Participants Demystify Engaging Employers Around Diabetes Prevention

The National DPP Employer Learning Collaborative (ELC) continues to support states in engaging employers and commercial insurers to increase coverage of the National DPP lifestyle change program. In October 2020, NACDD added a fourth cohort of states to the ELC, resulting in a total of 19 State Health Departments that are adopting new tools, templates, and intensive support models with employers.

What does this mean for you? NACDD released a handful of tools for public use and gathered key learnings from ELC participants as they work with employers. Consider these tips and resources as your organization engages employers in conversations related to diabetes prevention:

- ✓ **Don't lead with coverage.** Employers first need to understand how diabetes prevention fits into their health priorities, and how the National DPP lifestyle change program is different than other wellness or health promotion programming. Consider sharing the [National DPP Overview for Employers](#) handout in early conversations with employers.
- ✓ **Calculate return on investment (ROI).** Calculating ROI can be complex, but ROI is important to employers, and with the right tools, you can use ROI to help make the business case. Many partners have indicated they aren't sure how to discuss ROI or how to most effectively use ROI calculators with employers. Check out the [Guide to ROI calculators](#) to sharpen your knowledge about calculating ROIs.
- ✓ **Understand the commercial insurer landscape and perspective.** For many ELC participants, commercial insurers are a new partnership. The [Questions for Your Health Plan](#) fact sheet can help guide conversations you want to have with commercial insurers in your market.
- ✓ **Know how to navigate perceived barriers about the National DPP lifestyle change program.** Employers' top reported barriers in 2020 included: 1) needing more information to understand the program; 2) too much going on/COVID-19 impact; 3) cost; and 4) evidence. This [Literature Review](#) can help your organization and employers demystify some of the perceived barriers to coverage.

Medicaid Demonstration Project Receives CDC Health Equity Award

The CDC's National Center for Chronic Disease Prevention and Health Promotion awarded the Medicaid Coverage for the National DPP Demonstration Project the 2020 Health Equity Award. NACDD and its partners contributed to the success of the Medicaid Demonstration Project. The award highlights NACDD's leadership on the development of the [CoverageToolkit.org](#), state technical assistance, and the Medicaid Learning Collaborative. NACDD's Coverage team, led by Kelly McCracken, facilitated the multi-year Demonstration Project in collaboration with CDC, state partners in Maryland and Oregon, and Leavitt Partners. The project was recognized for the impact Medicaid coverage will have in reducing health-related disparities by expanding access to the evidence-based National DPP lifestyle change program for populations at highest risk for type 2 diabetes. To learn more, read the [press release](#) about the award or visit the [National DPP Coverage Toolkit](#).

Find NACDD on Social



Keep up to date on the latest news, events, and more by following NACDD on [Facebook](#), [LinkedIn](#), [Twitter](#), [Vimeo](#), and [SoundCloud](#).

HALT Diabetes: Fueling the Virtual Revolution for Diabetes Prevention

The COVID-19 pandemic magnified what public health experts already knew: while widespread stay-at-home orders are an effective approach to slowing the spread of COVID-19, the strategy impacts other areas of health prevention and management. Lack of physical activity, limited social connections, and reduced support for healthy living are all repercussions of stay-at-home orders and have contributed to increasing Americans' risk for prediabetes. Recognizing this, states with in-person program delivery models for the National DPP lifestyle change program pivoted to maintain classes using virtual solutions during the COVID-19 pandemic. One delivery platform that states have turned to is the HALT Diabetes (Health And Lifestyle Training) virtual delivery platform. HALT Diabetes provides a unique solution to empower and equip CDC-recognized organizations to deliver the National DPP lifestyle change program online and thereby continue to serve at-risk populations using their existing workforce of trained coaches. State Health Departments have been able to fully customize the branding of the HALT Diabetes platform to reflect imagery from their individual state as well as the name of their program or initiative.

“In Maryland, we fortunately launched HALT Diabetes before the COVID-19 pandemic, as one state goal is to increase the accessibility of the National DPP to people who have barriers to joining in-person classes. Having HALT Diabetes in place during this time has allowed Maryland lifestyle change programs to continue to help people reduce their risk of diabetes.”

Sue Vaeth
Maryland Department of Health

The goal of HALT Diabetes is to radically expand availability and affordability of the National DPP lifestyle change program. The platform can be used by any CDC-recognized organization to offer the National DPP lifestyle change program including

State Health Departments, health systems, primary care practices, business groups on health, and national nonprofits to name a few.

How Does it Work?

HALT's mantra is simplicity. State Health Departments or other organizations can procure a master license and, through this license, any CDC-recognized organization in their state can access and use the platform free of charge to deliver their program virtually. The annual licensing fee includes the platform itself, replete with video curriculum, dashboards, food logging, text messaging and data collection as well as hosting, technical support, training, and software updates. To date, 12 states and more than 60 CDC-recognized organizations offer the National DPP lifestyle change program using the HALT Diabetes platform. Unique to HALT Diabetes is its universal application and built-in sustainability model. As states and payers become more flexible with program delivery modalities for reimbursement, more CDC-recognized organizations are leveraging this platform to gain revenue to sustain their organizations. HALT Diabetes allows unlimited sublicenses of its platform, as such, it is possible for master license holders to charge a nominal fee for sublicenses to sustain the license. Costs are substantially reduced so that no one organization will be required to pay for on-going licensing after state funds have expired. This is especially valuable for organizations that are enrolling to become Medicaid and/or Medicare DPP providers.

“This National DPP solution is cost effective, accessible, and supports long-term sustainability for CDC-recognized organizations. It is an absolute game-changer for delivering this evidence-based intervention that could help reach the 88 million people with prediabetes nationwide,” says John Patton, Director of Program Relations at NACDD and Executive Director of [ProVention Health Foundation](#). NACDD's ProVention Health Foundation invested in the platform with State Health Departments and their partners in mind. To learn more about HALT Diabetes and how the platform can support your organization's diabetes prevention strategy, contact [John Patton](#).

HALT Diabetes Features

- CDC-approved video-based curriculum to assist lifestyle coaches
- Self-paced video lessons are available on desktop and mobile, on a weekly basis for the first six months, and then monthly for the remaining six months
- Online small group community to share experience with other participants and lifestyle coaches
- Dedicated lifestyle coach to lead the group and give personal feedback
- Meal photo-journaling, activity tracking, and technical assistance
- Participant and coaching dashboards
- Data collection and reporting functionality
- Module add-ins to date include diabetes self-management education and support (DSMES) and Spanish language; curriculum for the Native American populations is coming soon
- Closed captioning



1705 Grantees Using HALT Diabetes in Five States

NACDD, a 1705 recipient, recently purchased a master license to support its [1705 grantees](#) in five states: Alaska, Iowa, Florida, New York, and Pennsylvania.

“Many of our grantee coaches are still working from home and will do so for the foreseeable future. They are excited about this new innovative method of offering the program from their own homes. One of the silver linings to the public health emergency is that it truly shined the light on virtual learning and how effective it can be for public health.”

Ali Jaglowski
NACDD Senior Public Health Consultant and
1705 Program Manager

Diabetes Council



The following stories highlight the work of NACDD [Diabetes Council](#) Members and the Diabetes Council Leadership Group.

Uplift Your Peers, Your Work, and Yourself: Join the Diabetes Council’s Workgroups

The Diabetes Council Professional Development Workgroup and Mentoring Workgroup are recruiting new members. State Health Department diabetes staff who are passionate about supporting their public health peers across the U.S. are encouraged to join a workgroup. Participating in the workgroups will support the state’s diabetes prevention and management activities and individual professional development goals.

Diabetes Council workgroups are co-chaired by members of the Diabetes Council Leadership Group and are a great steppingstone for those interested in serving on the Leadership Group in the future. Workgroups meet monthly to provide input on webinars, organize conference scholarships, guide the Peg Adams Peer-to-Peer Program, and facilitate various mentoring opportunities.

Contact [April Reese](#) to learn more or to join a workgroup.

Diabetes Council Leadership Group 2021 Election is Coming Up

Each year, the Diabetes Council Leadership Group election season kicks off with nominations in April, the election in May, and new terms beginning in July. The Leadership Group expects to have seven open positions this year. Serving on the Diabetes Council Leadership Group is an excellent way to gain leadership experience, have an impact on a national scale, and work with peers to navigate opportunities and challenges in the diabetes prevention and management realm. But don't just take our word for it. In these short clips (click the images below), hear how the Diabetes Council Leadership Group has brought value to individual Leaders, State Health Departments, and CDC.



Brittany Ly, MPH
Chair
Utah Department
of Health



Rebecca O'Reilly, MPH
Chair Elect
Vermont Department
of Health



Pat Schumacher, MS, RD
CDC Division of
Diabetes Translation



Visit NACDD's Vimeo channel for more short clips about why Leaders love the Diabetes Council Leadership Group

Don't delay! This could be your year to run for a position. An email announcement about open nominations will go out in April. Both colleague-nominations and self-nominations are accepted. To learn more about the requirements for each position, refer to the [Leadership Group Roles and Responsibilities](#).

Scholarship Recipients Share Insights from National Conferences

Last fall, the Diabetes Council Professional Development Workgroup awarded several conference scholarships to Diabetes Council Members. Recipients virtually attended a conference of their choice to support their state's diabetes prevention and management activities and to contribute to their individual professional development as it pertains to NACDD's [chronic disease competencies](#). Teirra Riggs from Indiana State Department of Health attended American College of Lifestyle Medicine's annual conference (LM2020) and Tamah Gustafson from Michigan Department of Health and Human Services attended the American Public Health Association's Annual Meeting and Expo (APHA 2020). Teirra and Tamah graciously agreed to share some of their key takeaways with The Connector readers, so read on to learn more.



Congratulations to the winter/spring 2021 scholarship recipients!

Winners have been notified. The next round of 2021 scholarships will open later this summer and will be announced via email. Start searching for educational opportunities now. Diabetes Council conference scholarships are available twice per year and are an excellent way to strengthen your professional goals, support your CDC cooperative agreement efforts, and connect with other Diabetes Council Members.

Scholarship Recipient Insight



Teirra Riggs,
Indiana State
Department of Health

“I would recommend the American College of Lifestyle Medicine conference to any individual in the public health field. A wide array of topics and speakers would appeal to any public health professional’s topic/issue of interest. At the end of the conference, I felt refreshed and inspired!”

Teirra wanted to gain a deeper understanding about prevention research and found that the American College of Lifestyle Medicine conference fit the bill. One interesting session shared guidelines to optimize engagement and create lasting change. Teirra thinks the following points will be particularly helpful for planning Indiana’s launch of a custom branded version of HALT Diabetes, called INspire Health:

- Look for understanding of programs where they are now regarding participation and retention and meet them there.
- Make it easy. Design communication materials and products with the audience in mind.
- Remove objections early in the process by putting them on the table in the beginning and addressing them upfront.
- Practice actions that improve strategy, retention, and participation.

Scholarship Recipient Insight



Tamah Gustafson,
Michigan Department of
Health and Human Services

“As a first-time attendee of the APHA conference, I would absolutely recommend it. Regardless of professional expertise, this organic experience will expand your knowledge base and encourage you to think outside of the box. It presented interesting and concrete ways to engage patients and employers by using influence, persuasion, and expertise.”

Tamah shared that the COVID-19 pandemic was an underlying theme in every session at APHA. She felt comforted by speakers’ emphases that all of us are in this pandemic together; no one is alone. A few of Tamah’s takeaways from the conference include:

- Utilize electronic health records with CHWs.
- When encouraging providers to promote programming, assure them they will have support and access to existing tools through the State Health Department.
- Telehealth was a key topic at APHA where they discussed the importance of ensuring participants are comfortable with the telehealth intervention, not just that telehealth is available.
- Use regular and consistent communication messages about programming to stay in front of providers and to encourage referrals.

Diabetes Council Comings and Goings

Welcome

Christina Edgar, MS, is **Texas** Health and Human Services' new Diabetes Special Projects Coordinator and has many years of public health experience. Most recently, she worked with the American Cancer Society to assist patients diagnosed with various types of cancers by helping them with treatment options including support for patients.

Help keep NACDD's Diabetes Council Membership current by sending changes in State Health Department diabetes staff to [Lanae Caulfield](#).

Lainey Faulkner, CPTA, joined the **Kansas** diabetes team as the new Community-Clinical Linkages Program Manager. Lainey previously worked as the Program Manager for the Kansas Department of Health and Environment's Arthritis Program. She is excited to advance the work happening around diabetes prevention and management in Kansas.

Caitlin Moroney, MA, joined the **Vermont** Department of Health as a Public Health Specialist. She is a certified Health Coach with a background in disease prevention/management as well as behavior modification. She looks forward to learning more about diabetes and immersing herself in the work of public health for the state of Vermont.

Kyle Southerland joined the **Georgia** Department of Public Health as the new Diabetes Program Coordinator. Kyle was initially brought on as a contractor to assist with developing and implementing a statewide DSMES umbrella recognition program. He worked previously as a project manager for a rural health system, implementing and offering the National DPP as a Certified Lifestyle Coach. Kyle is excited to be joining the chronic disease prevention team.

Farewell

Tamika Rowe-Maloney, MPH, resigned from her role on the Diabetes Council Leadership Group. As the Liaison to NACDD's Cardiovascular Health Council, Tamika brought a wealth of leadership, expertise, and passion to both Councils. We wish her the best of luck in her new role with **Georgia's** Cancer program.

Miranda Ouellette, MPH, Diabetes Coordinator at the **Georgia** Department of Public Health, recently resigned from her position. We are grateful for Miranda's contributions to advancing employer coverage of the National DPP lifestyle change program in Georgia and her involvement in many other NACDD diabetes projects.

Lauren Lauridsen, MPH, Community-Clinical Linkages Program Manager at the **Kansas** Department of Health & Environment's Bureau of Health Promotion, recently resigned from her position and moved to Los Angeles. Lauren was an active participant in NACDD's Employer Learning Collaborative.

Paula Jimenez, RN, Assistant Division Chief at the **Illinois** Department of Public Health, recently retired from her role. Through NACDD's Employer Learning Collaborative, Paula actively worked to advance employer coverage of the National DPP lifestyle change program in Illinois.

Courtney Michel, MA, resigned from her role as the Diabetes Program Manager at the **Illinois** Department of Public Health. Courtney was an active participant in many of NACDD's diabetes projects including the Employer Learning Collaborative and most recently the launch of Illinois' State Engagement Model. Illinois was the first state in the country to host their State Engagement Meeting virtually.

Announcements and Resources

CDC Path 2 Prevention Leads to Enrollment

[Path 2 Prevention \(P2P\)](#) bridges the gap between CDC's [Prediabetes Risk Test](#) and enrollment in the National DPP lifestyle change program. Making the commitment to behavior change can be overwhelming. P2P offers step-by-step support and resources to build confidence and inspire enrollment and active participation. Learn more and find tools to help you share this resource at the [National DPP Customer Service Center](#).

Utah Promotes Diabetes Self-Management Education in Waiting Rooms

NACDD, in collaboration with Screenvision Media and Outcome Health, is working with the Utah Department of Health to promote DSMES across the state. A company called Outcome Health Network offers a variety of short, creative video messages that can be played in physician or hospital waiting rooms. Utah has branded the [DSMES video](#) with their own logo and is running ads for 15 weeks in 67 physician offices across the state. For more information, contact [John Patton](#).

CDC Foundation Launches New Public-Private Coalition for Cardiovascular Disease

CDC Foundation's [new public-private coalition](#) is part of a national campaign to confront the nation's #1 killer – cardiovascular disease. Deaths from heart disease and stroke have increased during the pandemic. The potential long-term effects of COVID-19 on cardiovascular disease are unknown at this time. The CDC Foundation announced a new coalition to get ahead of this threat with a new campaign to empower more adults to prevent heart disease and strokes. The campaign is supported by the "Alliance for the Million Hearts Campaign," a newly formed public-private coalition to help fuel the Million Hearts® Initiative toward its goal of preventing 1 million heart attacks and strokes by 2022. The national campaign will focus on changing the way people think about and embrace managing their heart health, helping people understand the importance of heart health, realize their opportunities to be successful, and take steps that lower their risks.

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COVID-19 Awareness Resources

[NACDD Resources](#) to Support State Response to COVID-19 (NACDD)

[Underlying Medical Conditions and COVID-19](#) (CDC)

[Race, Treatment, Bias in COVID-19 infographics](#) (National Institute for Health Care Management Foundation)

[Surviving and Thriving: COVID-19 Survival Guide](#) and more (Black Women's Health Imperative)

[Your Health Beyond COVID-19](#) is a new website in English/Spanish (CDC, NACDD, CBS)

New Resources for Integrating Alzheimer's Messages into Chronic Disease Programs

NACDD, in collaboration with CDC, released new resources as part of the [Integrating Alzheimer's Messages into Chronic Disease Programs](#) project. The project is designed to include healthy brain messages into chronic disease risk factor reduction messages around nutrition, physical activity, [diabetes \(blood sugar\)](#), and [cardiovascular health \(blood pressure\)](#). Spanish translations are coming soon. If you would like any of these resources customized for use in your state or for more information, contact [Leslie Best](#).

Umbrella Hub Arrangements and Organizations

If your organization or partners have heard these terms but need to review the basics, be sure to check the online [National DPP Coverage Toolkit](#) to learn about this growing model and ready-to-use communication tools. Umbrella hub arrangements connect community-based organizations with healthcare payment systems to pursue sustainable reimbursement for the National DPP lifestyle change program. The new [Umbrella Hub pages](#) on the Coverage Toolkit cover are Objectives of Umbrella Hub Arrangements, Considerations for Establishing Umbrella Hub Arrangements, Role of Public Health and Medicaid, and Business Structure, and Sustainability Considerations. For more information, contact [Michelle Hansen](#).