



The National Diabetes Prevention Program and Diabetes
Self-Management Education and Support

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Introductions



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Diabetes is a chronic health condition that affects how the body turns the food we eat into energy.¹

There are three categories of diabetes:

- Type 1
- Type 2
- Gestational



Type 1 Diabetes¹

- This type of diabetes is an autoimmune disease where the body starts to make autoantibodies and attacks itself (by mistake).
- The reaction stops the body from making its own insulin.
- People afflicted will use supplemental insulin via injections or pumps to manage their blood sugar levels.



Type 2 Diabetes¹

- A diagnosis given when the body no longer uses its own insulin well and is unable to keep blood sugars within a normal range.
- People with Type 2 Diabetes use oral and injectable medications, as well as supplemental insulin as needed to control their blood sugars.



Gestational Diabetes¹

- Gestational diabetes is new-onset diabetes in a pregnant person, who previously did not have diabetes.
- Commonly, the diabetes resolves with the birth of the baby.

BUT:

- The pregnant person with resolved Gestational Diabetes is more likely to develop Type 2 Diabetes later.
- The child is more likely to develop obesity as a child or teen, and eventually develop Type 2 Diabetes.



Prediabetes diagnosis and treatment is vitally important¹

In the U.S., 96 million Americans have prediabetes

- That is more than 1 in 3 people.
- More than 8 in 10 of them do not know that have prediabetes.
- Prediabetes raises a person's risk of heart disease, diabetes and stroke.
- Diagnosing prediabetes allows the patient and provider time to address and reverse the progression to Type 2 Diabetes.



Diabetes in Kansas





Approximately 1 in 9 Kansas adults have diabetes.²

Diabetes is the 7th leading cause of death in Kansas.3



\$647 million

KanCare dollars spent on patients

with diabetes in 2021.4



More than 72,000 Kansans with diabetes were discharged from hospital stays in 2021; with a median stay of 4 days.⁵



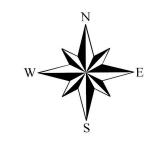
People with diagnosed diabetes, on average, have medical expenditures **2.3 times higher** than what expenditures would be in the absence of diabetes.⁶



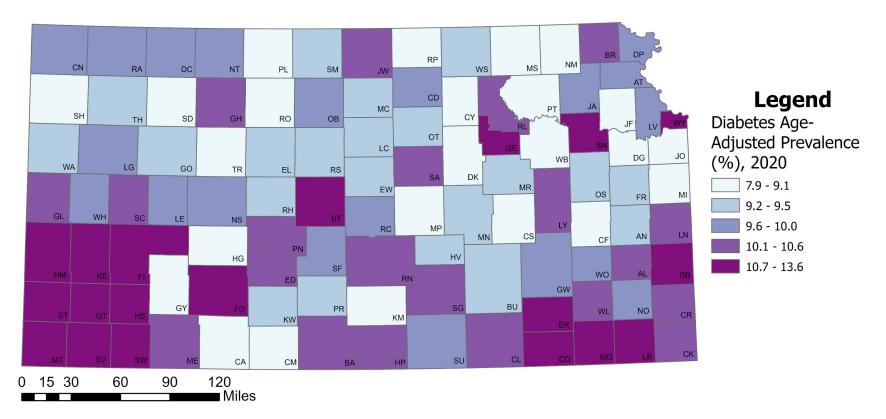
Diabetes costs Kansas approximately 2.4 billion dollars in direct medican expenses and indirect costs (loss of productivity due to diabetes) each year.⁶



Diabetes in Kansas



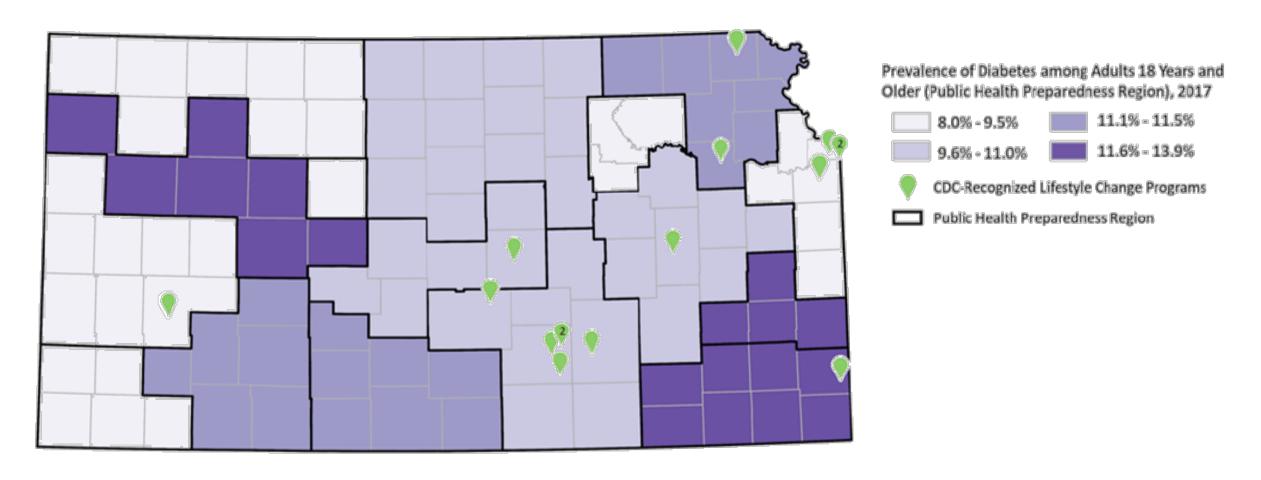
Age-Adjusted Diabetes Prevalence (%) by County, Kansas, 2020⁷





Diabetes in Kansas

CDC-Recognized Lifestyle Change Programs and Prevalence of Diabetes by Public Health Preparedness Regions⁸





National Diabetes Prevention Program

The goal of the National DPP is to make it easier for people with prediabetes or those at risk for Type 2 Diabetes to participate in evidence-based, affordable and high-quality lifestyle change programs to reduce their risk for Type 2 Diabetes and improve their overall health.¹⁰

- Lifestyle change programs recognized as part of the National DPP focus on Type 2
 Diabetes prevention by teaching participants lasting lifestyle changes like eating healthier,
 adding physical activity into their daily routine and improving coping skills.⁹
- CDC recognized programs offer:
 - A CDC approved curriculum
 - Facilitation by a trained lifestyle coach
 - 1-year long program group support
 - Availability of multiple delivery options
 - In-person, online, distance learning and combination

Increased awareness is key – Take the 1-minute risk test at DolHavePrediabetes.org



Participant Eligibility¹¹

- All participants must be 18 years of age or older.
- All participants must have a BMI of ≥ 25 kg/m² (≥23 kg/m², if Asian American).
- All participants must be considered eligible based on either:
 - A blood test result within one year of participant enrollment.*
 - A positive screening for prediabetes based on the Prediabetes Risk Test online at: https://cdc.gov/prediabetes/takethetest/.**
- No previous diagnosis of Type 1 or Type 2 Diabetes prior to enrollment.



Applying for Recognition¹¹

- CDC welcomes all organizations with the capacity to deliver a yearlong lifestyle change program and meet the DPRP Standards to apply for recognition.
- Before an organization applies, they should understand the DPRP Standards and Operating Procedures.
 - Describe quality data measures that are expected to be collected and submitted to the CDC.
- DPRP Standards also contain an organizational capacity assessment.
 - This is a list of questions designed to help an organization determine readiness to deliver the CDC-recognized lifestyle change program.



National DPP in Kansas¹¹

How can I get involved?

- Start a National DPP Program.
- Become a Lifestyle Coach.
- Refer to existing programs.
 - Find existing programs here: https://dprp.cdc.gov/Registry
- Share information about the benefits of the National DPP.
 - Participants learn how to eat healthier, incorporate physical activity into their daily life and to effectively manage stress.
 - Participants gain group support from others who share similar goals and struggles.
 - Participants reduce their risk of developing Type 2 Diabetes.



DSMES Program Locations

Find a Diabetes Education Program in your area: 12 https://diabeteseducator.org/





Diabetes Self-Management Education and Support

Diabetes self-management education and support (DSMES) provides an evidence-based foundation to empower people with diabetes to navigate self-management decisions and activities.¹⁵

 DSMES is a cost-effective tool proven to help improve health behaviors and health outcomes for people with diabetes.

Accredited DSMES programs typically contain 10 hours of education delivered either individually or in a group setting. The 10 hours must be attained during the first year of diabetes diagnosis. Medicare and Medicaid cover up to 10 hours of initial DSMES: 1-hour of individual assessment and 9 hours of group training.¹⁵



DSMES Referral

A patient qualifies for DSMES referral:13

- Fasting Blood glucose of 126 mg/dL on 2 separate occasions.
- 2-hour Post-Glucose Challenge of ≥200 mg/dL on 2 separate occasions.
- Random Glucose Test of >200 mg/dL with symptoms of unmanaged diabetes.⁶

There are four critical times when the need for a referral should be assessed: 13

- 1. At diagnosis,
- 2. Annually and/or when not meeting treatment targets,
- 3. When complicating factors arise, and
- 4. When transitions in life and care occur.



Benefits of DSMES

Benefits of DSMES participation can include: 15

- Improved hemoglobin A1C levels.
- Improved control of blood pressure and cholesterol levels.
- Higher rates of medication adherence.
- Fewer or less severe diabetes-related complications.
- Healthier lifestyle behaviors, such as better nutrition, increased physical activity and use of primary care and preventive services.
- Enhanced self-efficacy.
- Decreased health care costs, including fewer hospital admissions and readmissions.⁷



Accreditation and Recognition of DSMES

Organizations offering DSMES services can apply for recognition by the American Diabetes Association or accreditation by the Association of Diabetes Care and Education Specialist and are eligible for reimbursement by Medicare, many private health plans and some state Medicaid agencies.¹⁴

Each certifying body has a formal application process and requires supporting documentation.¹⁵

• The certifying bodies also require annual reports and renewals and have a process for auditing existing programs to ensure continued conformance with accreditation/recognition criteria.



Empower People with Diabetes

Talking to people with diabetes about what DSMES is can emphasize the need for these services. For example, DSMES services will help them: 14

- Make better decisions about their diabetes.
- Work with their health care team to get the support they need.
- Understand how to take care of themselves and learn the skills to:
 - Eat healthy
 - Be active
 - Check their blood sugar (glucose)
 - Take their medicine
 - Solve problems
 - Cope with the emotional side of diabetes
 - Reduce the risk of other health problems



Questions?





Resources

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Thank you

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