



The Connector

Inspiring strategic direction for diabetes prevention & control

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Happy New Year from the NACDD Diabetes Portfolio Team



Our team is fortunate to lead and participate in many projects that help states and partners reach their diabetes-related goals. We are grateful to the Centers for Disease Control and Prevention (CDC) for a trusted partnership that allows us to provide quality support to State Health Departments. In the year ahead, we look forward to working with CDC and our Members in state, local, and territorial health departments to increase the impact of our collective work.

Making a Difference Preventing Diabetes

State Engagement Model Expands National DPP

NACDD provides technical assistance and support to State Health Departments for diabetes prevention and management. NACDD works individually with states to bring multi-sector stakeholders together to develop and implement a plan of action for scaling and sustaining the National Diabetes Prevention Program (National DPP). One piece of this technical assistance and support is hosting a State Engagement Meeting with partners who help write and carry out state action plans to increase collective impact in four pillar areas: awareness, availability, screening, testing and referral, and coverage of the National DPP lifestyle change program. In 2020, enrollment and retention have been added to the model as a fifth pillar. This model has been tested and refined in 42 states since 2012. This year State Engagement Meetings are being planned for Vermont, Washington D.C., Delaware and Illinois.

Below are some themes that emerged from 2019 State Engagement Meetings held in Arizona, Arkansas, Colorado, Indiana, New Hampshire, New Jersey, South Dakota, and Wyoming.

Awareness

To increase awareness of prediabetes and the effectiveness of the National DPP lifestyle change program, State Health Departments worked with stakeholders to identify top priorities. Priorities include:

- Increasing the number of primary care and specialty care providers who learn about the evidence-based outcomes of National DPP lifestyle change programs,
- Launching an awareness campaign, and
- Partnering with community organizations to increase prediabetes awareness in special populations.

Colorado, for example, is pursuing opportunities to bring awareness of the National DPP lifestyle change program to men and people over age 65. South Dakota launched an eye-catching campaign to increase awareness and screening (www.undotherisk.com).

Availability

Most states chose to prioritize increasing the availability and support of National DPP lifestyle change programs. To do this, states may: assess the needs of priority populations and other stakeholders; initiate National DPP lifestyle change programs in regions with the highest need; and focus efforts in rural areas. Arizona is exploring umbrella or [third party organizations \(TPO\)](#) that can provide resources, coordination, and specialty services for smaller organizations offering the National DPP lifestyle change program. Indiana is addressing sustainability for community-based organizations and is exploring options such as a national network hub or a formal contract between health care providers and community organizations.

Screening, Testing, and Referral (STR)

To increase clinical screening, testing, and referral to National DPP lifestyle change programs, states are working to:

- Identify priority populations, convene stakeholder groups,
- Use epidemiological data and testimonials to “make the case” for STR, and
- Maximize partnerships with organizations that have existing networks.

In 2012, Colorado

was one of the first states to host a State Engagement Meeting. The meeting outcomes helped Colorado secure coverage of the National DPP lifestyle change program for about 31,000 state employees. Colorado held a second State Engagement Meeting in 2019 using the same approach to build key partnerships to expand the availability of the National DPP and increase the utilization of diabetes self-management education and support (DSMES). In 2020 State Engagement Meetings are being planned for Vermont, Washington D.C., Delaware and Illinois.

Coverage

States plan to increase coverage of the National DPP lifestyle change program by hosting employer education meetings, forming task forces, developing employer-specific case studies, and working with organizations to establish pilot programs. In Wyoming, the State Engagement Meeting allowed key partners to discuss and prioritize goals around coverage. This work in part has led to coverage of the National DPP for both state employees and their eligible dependents on the state's medical health plan and Medicaid beneficiaries for more than 33,868 people starting in.

Delaware, Illinois, Vermont, and the District of Columbia will host State Engagement Meetings in 2020 using the State Engagement Model.

Steps to Success and Collective Impact of the National DPP

Did you participate in a National DPP State Engagement Meeting? Is your organization making progress in implementing the action plan developed? NACDD would like to continuously highlight and share action steps taken by all organizations that are working in partnership with others to advance the National DPP. This includes action plan-related progress, highlights, and outcomes. We are excited to share these steps and inspire others to join this national effort to make a significant impact. Please contact Tamara Demko at tdemko@chronicdisease.org to request a simple form to submit your highlights for inclusion in The Connector, a quarterly newsletter that is distributed to more than 700 people. NACDD's [Collective Impact Report](#) has additional state and partner highlights.

State Spotlights on Progress and Collective Action

Local and State Health Departments and national leaders contributed to the successful progress, outcomes, and impacts summarized in these Spotlights. Their continued efforts are critical to engaging public and private partners to implement National DPP action plans, many of which began at one of the State Engagement Meetings convened between 2012 and 2019.

Hawaii has made great strides in implementing the National DPP. Following the State Engagement Meeting and implementation of their collective action plan, nearly 20 organizations now are offering the lifestyle change program across all islands. National DPP awareness has increased through the Hawaii Department of Health's successful Prevent Diabetes campaign, reaching out to employers and health plans, and working with community organizations to connect with regional coaches and suppliers. Hawaii also is partnering with pharmacists, health systems, professional organizations, and academia to increase awareness among health professionals and students, as well as promote screening, testing, and referral. Additionally, Hawaii Medical Service Association and Kaiser Permanente now offer the National DPP lifestyle change program as a covered benefit for state employees.



“[The] StEM meeting was the first time in a long time we got all of our stakeholders together in one place...it catalyzed a lot of movement for prevention and also management as well.”

Hawaii State Health Department

Georgia's State Engagement Meeting and collective action plan led to a strong partnership with the American Medical Association (AMA) and the development of an AMA Learning Series that provides training on the National DPP to six hospitals in conjunction with Emory University. The Georgia Department of Public Health (DPH) is working with the Georgia Pharmacy Association to bring awareness to screening, testing, and referral for the National DPP lifestyle change program as part of the learning series. In addition, a National DPP factsheet was developed and presented to the Department of Community Health which oversees Medicaid and the State Benefit Plan, leading to consideration of state employee coverage and a coverage pilot program. Georgia DPH has a memorandum of understanding with the Georgia Hospital Association to recruit 10 hospitals per year for three years (30 total) for National DPP and diabetes self-management programs. Currently eight hospital systems, six federally qualified health centers, two pharmacies, and two community organizations have agreed to participate.

Look for NACDD's Collective Impact Update this spring. The Update will provide progress highlights from select states that have participated in the State Engagement Model and are advancing collective impact priorities around the National DPP.



Prediabetes Rising in Adolescents and Young Adults

CDC has released a new article, "[Prevalence of Prediabetes among Adolescents and Young Adults in the United States: National Health and Nutrition Examination Survey, 2005-2016](#)," in [JAMA Pediatrics](#). This study found that nearly one in five adolescents aged 12-18, and one in four young adults aged 19-34, are living with prediabetes. Rising rates of prediabetes in youth could lead to increased risk of type 2 diabetes, heart disease and stroke, and increased diabetes complications at younger ages. More research is needed to support the development of interventions for youth and increasing access for young adults to programs like the [National DPP](#).



Minnesota Reaches Those in Greatest Need

Minnesota developed a [Best Practices Guide](#) for recruiting, enrolling, and retaining Minnesota Medicaid beneficiaries in the National DPP lifestyle change program. The guide is intended for National DPP lifestyle coaches and program coordinators who serve low-income, Medicaid eligible participants, and those individuals with the greatest need for the National DPP lifestyle change program. Approximately 30 qualitative interviews with CDC-recognized organizations in Minnesota informed the Guide. “We focus a lot on community partnerships for our programming. We have a lot of partners help us with recruiting...,” said a lifestyle coach from a rural organization in rural Minnesota. The Best Practices Guide was developed in partnership with Leavitt Partners and NACDD, with support from CDC. It is a valuable resource for all states.

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New NACDD Diabetes Webpages

NACDD has updated its webpages to reflect the full portfolio of our [diabetes projects](#). New features include better navigation, current content, and easy-to-access resources

Updated features include better navigation, current content, and easy to access resources. Be sure to explore the following topics:

- [Collective Impact](#): Learn about State Health Departments’ success in reducing the impact of diabetes. Check out the rotating list of state success stories.
- [Diabetes Council](#): Features a picture directory of the Diabetes Council Leadership Group and in-depth information about how the Diabetes Council connects State Health Departments across the U.S.
- [National DPP](#): Showcases NACDD’s support for State Health Departments scaling the National DPP in underserved areas and how sharing expertise helps achieve sustainable coverage of the National DPP lifestyle change program for Medicaid beneficiaries.
- [Diabetes Library of NACDD Resources](#): Find archived issues of The Connector, past webinar recordings, educational materials, tools and resources for CDC funded recipients, and more in our Diabetes Library.

Contact Lanae Caulfield at lcaulfield@chronicdisease.org with questions or comments.

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#DiabetesMonth: Do You Follow NACDD on Social?



Each year in November, organizations and individuals around the country host activities and spread messages to bring awareness to diabetes, a chronic condition that affects more than 30 million U.S. residents. During National Diabetes Month in 2019

NACDD used social media to highlight our work with CDC, State Health Departments, and national partners. We shared our new diabetes portfolio webpages, helpful toolkits, stories of success, and much more. If you haven’t already, we hope you will join us on [LinkedIn](#), [Twitter](#), and [Facebook](#) to continue talking about the importance of diabetes awareness and prevention. Don’t forget to mark your calendars for Diabetes Alert Day on March 24, 2020.

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States Use Movie Theaters to Talk About Prediabetes

For the first time ever, the Ad Council is allowing paid placement of their prediabetes campaigns to run in movie theaters. State Health Departments in Montana, South Carolina and North Dakota took advantage of this opportunity for ads that ran in their state theaters between Thanksgiving and New Year's Day – a prime time for movie goers. ScreenVision Media has now extended this offer into the spring and summer as part of its partnership with NACDD. CDC is encouraging states to take advantage of this opportunity that it has forged with the Ad Council. For more information on how to effectively reach a captive, movie audience, contact John Patton at jpatton@chronicdisease.org.

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6|18 Initiative Diabetes Prevention States

NACDD will continue to provide technical assistance and support for the diabetes prevention track of [CDC's 6|18 initiative](#). Medicaid and public health representatives from six states were invited to participate in a new cohort to further their progress on establishing and operationalizing Medicaid coverage for the National DPP lifestyle change program. Participating states are Colorado, Illinois, Kentucky, Michigan, Virginia, and Wyoming.

NACDD is working with CDC and the University of Utah's Gardner Policy Institute to provide one-on-one technical assistance to state teams. States will participate in learning collaboratives and an in-person Medicaid Coverage Summit. The focus of the learning collaboratives and summit will be state-to-state communication related to promotion of successful strategies for addressing challenges to establishing and sustaining coverage of the National DPP in Medicaid Programs.

To learn more, contact Wendy Childers at wchilders@chronicdisease.org.

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New York State Medicaid to Cover National DPP

On Sept. 4, 2019, New York State Medicaid received approval from Centers for Medicare and Medicaid Services (CMS) in response to a [State Plan Amendment](#) to cover the National DPP lifestyle change program for eligible Medicaid beneficiaries.

CDC-recognized organizations in New York State now can begin enrolling as Medicaid providers. It is anticipated that reimbursement for National DPP lifestyle change program services will begin on Feb. 1, 2020. New York State Department of Health is working with NACDD to address the challenges related to the development, implementation, and evaluation of covering the National DPP lifestyle change program in the Medicaid Program. Learn more, in the [New York Medicaid Update](#) or contact Kelly McCracken at kmccracken@chronicdisease.org.

What is a Medicaid State Plan and State Plan Amendment?

A Medicaid State Plan is a written agreement between a state and the federal government. The agreement outlines the details of the state's Medicaid program, including benefits, provider rates, and who is eligible for coverage. A Medicaid State Plan is required for a state to claim federal Medicaid matching funds.

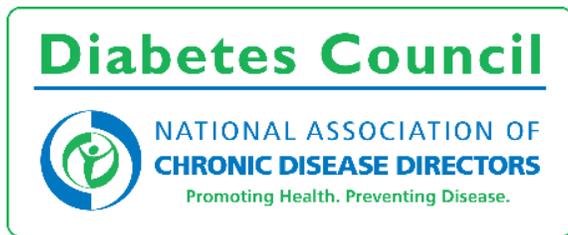
States planning to make changes to their Medicaid program submit State Plan Amendments to the Centers for Medicare & Medicaid Services for review and approval. These amendments reflect changes and updates to a state Medicaid program such as the addition of new eligible populations or providers, changes in rate development, changes in what administrative services the state expects the federal government to pay for (such as processing claims, care coordination, risk stratification, transportation, etc.), and the costs and reimbursement methodologies of new services.

Learn more at the [Coverage Toolkit](#).

Road to Coverage is Clear for Public Employees

State public employee coverage in Pennsylvania and Wyoming is scheduled for January 2020. Wyoming will also offer Medicaid coverage of the National DPP in January 2020. Demonstration projects for state public employee coverage are ongoing in South Dakota and Utah. Look for the “Road to Coverage” state feature story in the upcoming edition of The Connector. For the latest state coverage information, visit the [Participating Payers page](#) in the National DPP Coverage Toolkit.

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NACDD Team Leads Multi-State Surveillance Project

MENDS (Multi-state EHR-based Network for Disease Surveillance) is a demonstration project using electronic health record (EHR) data collected in clinical settings at four pilot sites. The project is simultaneously evaluating modeling techniques aimed to produce valid state, substate, subpopulation, and national-level chronic disease estimates that CDC and all State Health Departments could use. In 2018, CDC’s Division for Heart Disease and Stroke Prevention funded NACDD to lead the project. The work is guided by the University of Massachusetts Medical School, Commonwealth Informatics, Harvard Medical School’s Department of Population Medicine Public Health Informatics Institute, CDC’s Division for Heart Disease and Stroke Prevention and the NACDD Cardiovascular Health Team. Visit [NACDD MENDS](#) for more information.

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Opportunities for National Leadership

A Message from the Chair of the Diabetes Council



Shana Scott (GA), JD, MPH, Chair
NACDD Diabetes Council

Now is the time to start thinking about nominating yourself or a colleague for one of the open positions on the [Diabetes Council Leadership Group](#). Nominations will open in spring 2020. The Leadership Group:

- **Advocates:** Collaborates with, and provides recommendations to national, professional, government, voluntary agencies, and associations on matters pertaining to the implementation of diabetes prevention and management efforts by State Health Departments.
- **Connects:** Networks, communicates, collaborates, and problem solves with diabetes and chronic disease colleagues across the United States on common issues related to diabetes.
- **Inspires:** Participates in strategic direction for state and national public health diabetes. Influences skill building, training, and resources to support State Health Departments.

Learn more about opportunities, benefits, and commitments of the Leadership Group by contacting Shana Scott, Chair, at Shana.Scott@dph.ga.gov.

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Diabetes Council Comings and Goings

Joyce Hoth, MEd, recently joined the **Missouri** Department of Health and Senior Services, Bureau of Cancer and Chronic Disease Control, as the Diabetes and Cardiovascular Health Specialist. In her previous role as Senior Director of Community Health at the Gateway Region YMCA in St. Louis, Joyce led the Community Health Department. There, she oversaw the implementation of the YMCA's Diabetes Prevention Program, the YMCA's Blood Pressure Self-Monitoring Program, and several other evidence-based chronic disease programs. Joyce is excited to share her knowledge and experience across the state while building partnerships and creating opportunities to improve health.

Quisha Umemba, MPH, BSN, RN, CDE recently joined the **Texas** Department of State Health Services as the Diabetes Nurse Consultant. Previously, Quisha worked for the Houston Health Department as the Chief Nurse in the Office of Chronic Disease, Prevention, and Management where she oversaw the Diabetes Awareness & Wellness Network (DAWN center) and the Colorectal Cancer Awareness and Screening (COCAS)

program. Having been in the medical field more than 15 years, Quisha looks forward to utilizing her clinical background to provide technical assistance to 1815 contracted organizations throughout the state of Texas.

Help keep NACDD's Diabetes Council membership current by sending changes in State Health Department diabetes staff to Lanae Caulfield at lcaulfield@chronicdisease.org



				NACDD Staff	
		1705			
					Coverage 2.0
					Technical Assistance & Support

NACDD's Diabetes Portfolio Team

Bruce Hathaway, BA joined the NACDD consulting team in September and is providing technical assistance and support efforts for both 1705 recipients and State Health Departments. This includes work on upcoming learning collaboratives, webinars, and discussion forums. Bruce has more than 25 years of public health experience at the local, state and national levels. His work spans from providing direct services for individuals and communities to managing large grants and initiatives. Most recently, Bruce worked at a regional health information exchange where he led a team tasked with scaling and sustaining the National DPP.

Jennifer Barnhart, MPH, is a new Public Health Consultant at the NACDD working on Medicaid coverage for the National DPP lifestyle change program. Through this work, Jen provides intensive technical assistance to build the capacity of Medicaid coverage for the National DPP for nine state public health and Medicaid agencies. Jen has 20 years of experience, including business, non-profit, pharma, academic, payer, and government sectors. She also has

provided consulting focused on advancing community health through population health solutions.

A heartfelt thank you goes to **Barbara Z. Park**, RDH, MPH, who has been a key member of NACDD's diabetes portfolio team for five years. Barb is now leading NACDD's Oral Health portfolio.



New Resources and Webinars

New CDC Pharmacy Activation Materials

New resources and videos have been developed to involve more pharmacists in the National DPP. Pharmacists can be valuable partners in promoting awareness of prediabetes; screening, testing, and referring people at high risk for type 2 diabetes to National DPP lifestyle change programs; and offering the lifestyle change program at their locations. These resources are now available on the [National DPP Customer Service Center](#).

AADE Has a New Name!

The American Association of Diabetes Educators is proud to release its new name, the: [Association of Diabetes Care & Education Specialists](#). This change is in response to the Association's extensive research on the role of a diabetes educator. The research "determined that the term diabetes educator did not encapsulate all that the specialty does for people with or at risk for diabetes, the larger healthcare system, payers and providers."

Telehealth Tips and Tools for 1815/1817 Recipients

CDC and NACDD held an interactive, four-part virtual training in September 2019. The training consisted of three breakout sessions showcasing telehealth's use in three areas of diabetes prevention and management:

1. Improving access, and removing barriers to participation in DSMES,
2. Increasing access to the National DPP lifestyle change program, and
3. Increasing screening for diabetic retinopathy.

See the below links for recordings of each session. Each recording is about one hour long.

- [Telehealth Tips and Tools for 1815/1817 Recipients](#)
- [Breakout Session 1 \(DSMES\)](#)
- [Breakout Session 2 \(National DPP\)](#)
- [Breakout Session 3 \(Retinopathy Screening\)](#)

We welcome your contributions to The Connector!

To submit story ideas for future issues of The Connector, email Susan Lopez-Payan at SLPayan@chronicdisease.org

To read past issues of The Connector, visit the [NACDD Diabetes Library](#).



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