Improving Diabetes Prevention and Self-Management

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Disclosure

The content of this presentation does not relate to any product of a commercial interest. Therefore, there are no relevant financial relationships to disclose.
Highlighting NDPP
Answering your questions

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Highlighting DSMES
Answering your questions

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Agenda

• Overview of DPCP
• Burden of Diabetes in Maine
• Status of the National Diabetes Prevention Program in Maine
• Status of Diabetes Self-Management Education and Support in Maine
• US CDC Grant DP-1815 work
• PDEP

Diabetes Prevention and Control Program

• State of Maine - DHHS - Maine CDC - Division of Disease Prevention
  • Chronic Disease Prevention and Control Program, Nona Tsotseria
    • Diabetes Prevention and Control Program team
      » Feargal Semple, Diabetes Prevention Coordinator
      » Louise Ingraham, Diabetes Education Specialist
      » Judy Angsten, Office Associate II
• Our Mission is
  • To promote excellence in diabetes prevention and care
  • To increase access to prevention and care
  • To support and promote efficient and effective health care
For the people of Maine
Burden of Diabetes in Maine

- **11.5%** of adults have diabetes (about 142,000) – the tip of the iceberg
  - 36,000 don’t know they have it
- **36.2%** of adults have prediabetes (about 386,000)
  - Most don’t know they have it
- **$1 billion** direct medical expenses for diabetes in 2017
  - ($16,750 per person per year)
  - Poorly managed diabetes can lead to:
    - heart attack/stroke
    - blindness
    - kidney failure
    - amputation
- **$370 million** indirect costs
  - Lost productivity due to diabetes
National Diabetes Prevention Program

- The National DPP is a 12-month lifestyle change program that helps people with prediabetes or at risk for prediabetes learn to eat healthier and become more physically active.
- Each group meets weekly to cover the first 16 sessions within the first 6 months, then at least monthly for the rest of the year.
- A specially trained lifestyle coach leads a small group of participants through an evidence-based curriculum.
- Goal: participants lose 5-7% of their starting weight and get at least 150 minutes activity weekly to reduce the risk of type 2 diabetes by nearly 60%.
- National DPP sites meet recognition standards developed by the US CDC Diabetes Prevention Recognition Program (DPRP).
# Status of the National Diabetes Prevention Program in Maine

## Nationally
- 1,520 recognized organizations
- 34% have full recognition
- 400,416 participants enrolled since 2012
- 4.2% average participant weight loss
- 41% of organizations meet 5% weight loss goal

## Maine
- 19 recognized organizations
- 63% have full recognition
- 3,036 participants enrolled since 2012
- 6.7% average participant weight loss
- 79% of organizations meet 5% weight loss goal

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**Locations of NDPP® Sites in Maine Counties, 2019**

*NDPP® sites: National Diabetes Prevention Program sites. Physical locations of each site were generated based on a registered list from the Maine CDC, Division of Disease Prevention.*

Created by LISA (Linden Island Systems for Analysis) in September 2019 for DP-18-012.
National DPP Barrier Survey

• Deployed September 9, 2019
• Survey closed September 27, 2019
• Results expected by December 31, 2019

THANKS !!
To all Diabetes Action Alliance of Maine (DAAM) members who contributed to development of these surveys!!

Status of Diabetes Self-Management Education and Support in Maine

Diabetes Self-Management Education and Support (DSMES)
• Evidence-based program for people with diabetes
• Maine law requires all individual health policies and contracts to provide DSMES as a covered benefit
• 10 contact hours available (Year 1)

Maine Statistics (2018)
• 24 programs
• 7025 patient encounters
Patients are traveling 1-2 hours to our Lewiston and Scarborough sites to access DSMES.

In general, if people are feeling good they stop trying to manage. Or the patients get frustrated in 'never getting to eat real food' so they just quit trying and then end up in a mess. It's hard to make them see how it's all connected sometimes.

I feel there are too many restrictions in being able to meet the patient where they are and they all seem to come back to their insurance coverage, allotted visits, what can be billed for and how much reimbursement is provided, all making the challenge of sustaining an Outpatient DSMES Program difficult.

Even though I love group classes I believe patients are more successful managing their diabetes when they have more 1:1 education.

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DSMES Barrier Survey

Do the following PATIENT barriers affect participation at your site?

- Low-awareness of importance of DSMES among PWD
- Lack of transportation
- High copays or coinsurance
- Unwillingness to participate in group classes
- Limited coverage by some private insurers
- Low literacy of participants

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Maine Department of Health and Human Services
1815 Grant Work

- Increase enrollment in National DPP and Diabetes Self-Management Education and Support
  - Increase screening and referrals
  - Promote new programs in underserved areas
  - Increase awareness
- Increase National Diabetes Prevention Program as a covered benefit
  - Work with payers and employers
- Technical assistance
- Professional Diabetes Educator Program

Professional Diabetes Educator Program

- DPCP ensures that DSMES services around the state meet national standards and are eligible for reimbursement under state law
- The Professional Diabetes Educator Program (PDEP) trains new diabetes educators at DSMES sites
  - Basics of diabetes and its management
  - Methods to reach adult learners
  - Overview of managing DSMES services
- Next training: December 5th & 6th, 2019 in Augusta
Questions?

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Thank You