Montana
Diabetes Program
Chronic Disease Prevention & Health Promotion Bureau

Diabetes Prevention & Education

DPHHS/IHS/Tribal Monthly Medicaid Teleconference

January 23, 2018

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Good morning!

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Outline

- Diabetes Education
- Diabetes Prevention Program
- Resources

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Diabetes Self-Management Education and Support (DSMES) Overview

- **Evidence base:** science behind it
- **Program description:** what it is, who can participate, and where it is provided
- **Results:** what you can expect
- **Practical tips and lessons learned:** keys to success on delivering DSMES in your community
- **Resources:** you have tools to make this work

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What is DSMES?

- Ongoing process
- Facilitating the knowledge, skills, and ability necessary for diabetes self-care + activities so that a person with diabetes can successfully self-managing their diabetes.
- Considers the needs, goals, and life experiences of the person with diabetes
- Guided by evidence-based standards.
- Support (behavioral, educational, psychosocial, or clinical).
- Helps implement informed decision making, self-care behaviors, problem solving, and active collaboration with the health care team and to improve clinical outcomes, health status, and quality of life.

Beck, Joni, Greenwood, DA, Blanton, Lori, et. al. 2017 National Standards for Diabetes Self-Management Education and Support. Diabetes Care. 2017;40(10): 1409-1419. 2017 National Standards for DSMES

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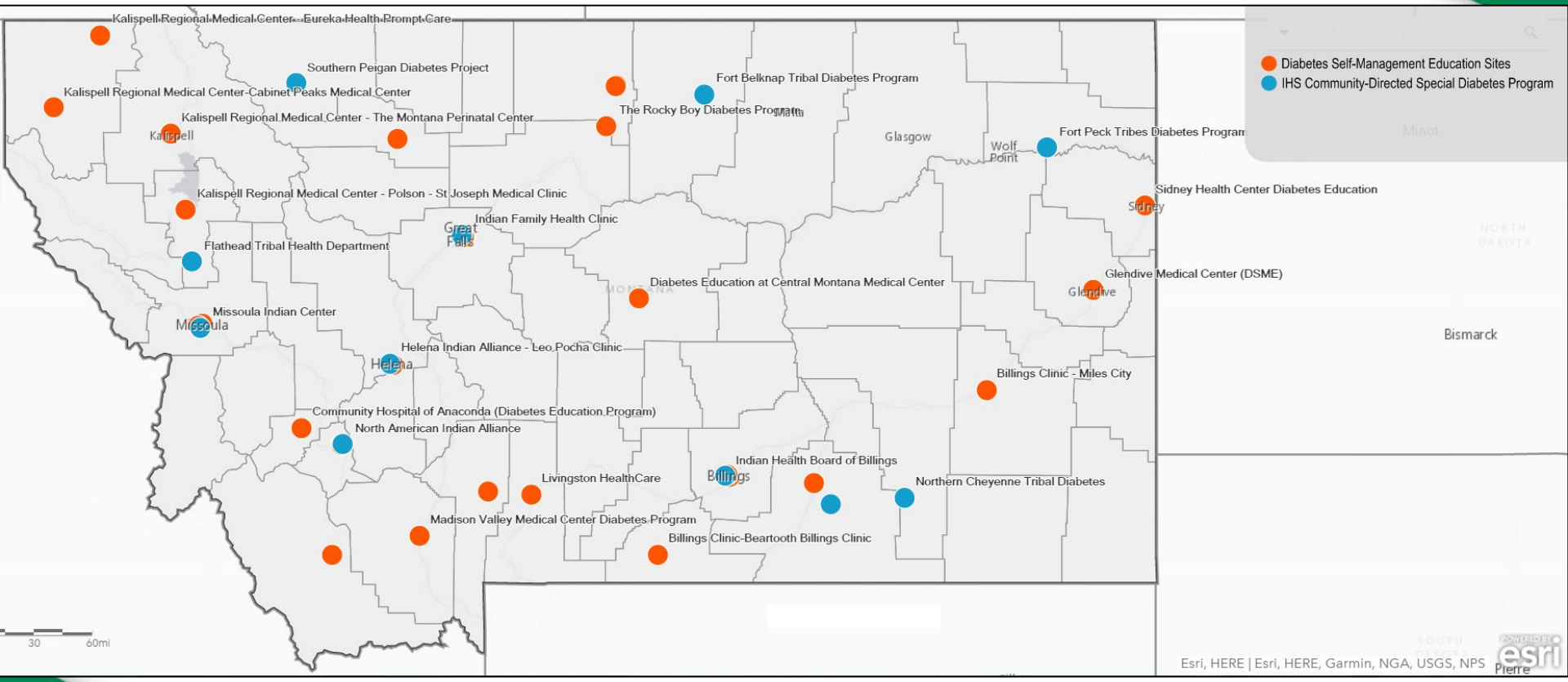
Diabetes Education Programs in Montana



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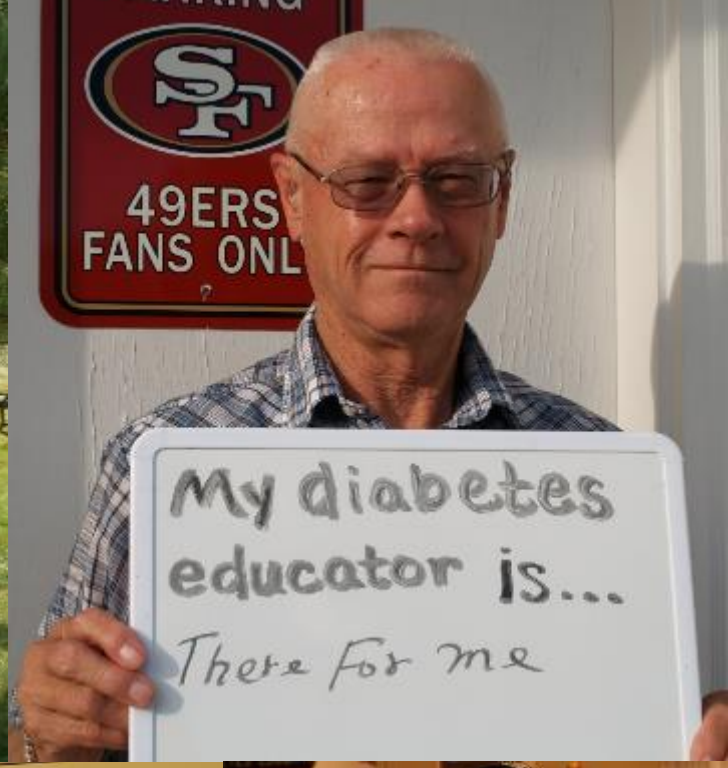
FERGUS EAGLE
VOLLEYBALL
13
MY DIABETES EDUCATOR is...
So Helpful!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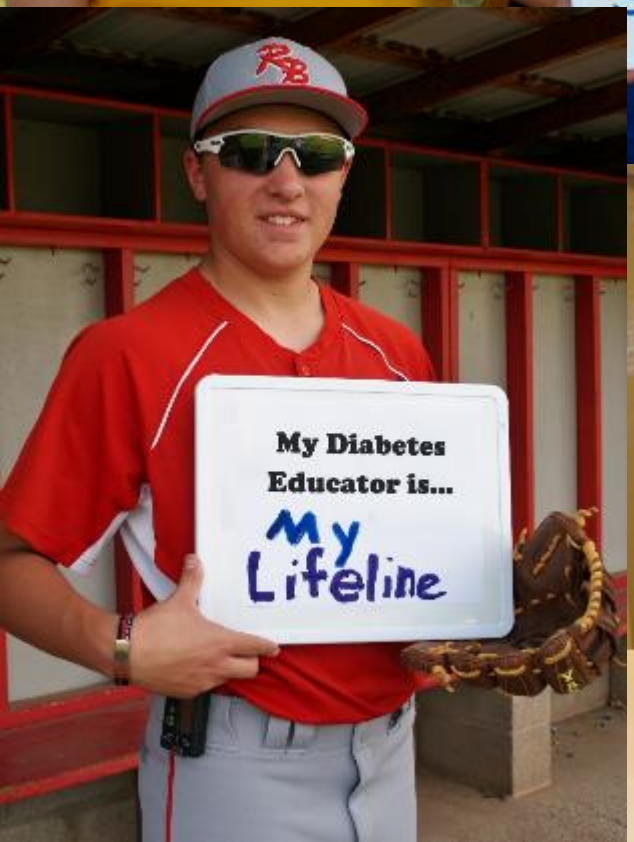
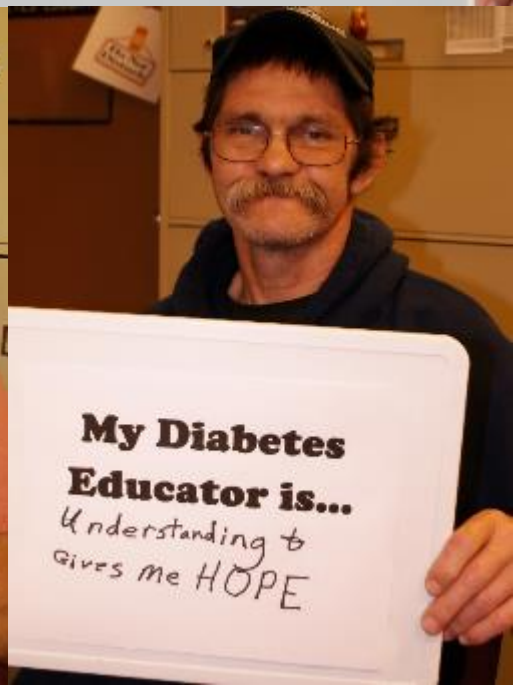
My diabetes educator is...
There For me


My Diabetes Educator is...
My Lifeline


My Diabetes Educator is...
AWESOME


My Diabetes Educator is...
Understanding &
Gives me HOPE

Diabetes Prevention Program (DPP) Overview

- **Evidence base:** science behind it
- **Program description:** what it is, who can participate, and where it is provided
- **Results:** what you can expect
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PREVENT TYPE 2 DIABETES

CUT RISK IN HALF

PROVEN LIFESTYLE CHANGE PROGRAM

NATIONAL PARTNERSHIP

COMMUNITY-BASED

The DPP Works

- Diabetes Prevention Program (DPP) Study showed reduced risk of type 2 diabetes by 58%. Tribes were involved. DPP Outcomes Study (DPPOS) continues.
- Special Diabetes Program for Indians Diabetes Prevention (SDPI-DP) Demonstration Project included the Rocky Boy Health Board
- Native Lifestyle Balance

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Native Lifestyle Balance

Preventing Diabetes in American Indian Communities

Native Lifestyle Balance Programs began in the Dineh Nation in 2002 based on the diabetes prevention results of the Diabetes Prevention Program (DPP). This manual is a modified version of the Lifestyle Balance Manual used in DPP. The manual was modified by Carol Percy in 2007. For more information on Native Lifestyle Balance contact:

Carol Percy, RN, MS and Cathy Manus, LPN
Diabetes Prevention Program Outcomes Study Staff
(505) 368-6345 or email carol.percy@ihs.gov

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About the DPP

- Intensive lifestyle intervention
  - Healthy eating
  - Increased physical activity (150 min/week)
  - Weight loss and maintenance (7%)

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Who Can Participate

- Adults (aged 18 or over)
- Overweight or obese (BMI ≥25 kg/m^2)
- Plus 1 risk factor for type 2 diabetes and cardiovascular disease
  - Elevated blood sugar (prediabetes, IGT, IFG, fasting blood glucose, OGTT, random blood glucose, A1C)
  - History of gestational diabetes mellitus (GDM)
  - Gave birth to a baby >9 pounds
  - High blood pressure (or medication for it)
  - Abnormal lipids (high LDL cholesterol, low HDL cholesterol, high triglycerides, or medication for it)
  - Risk score of ≥9 (CDC Risk Test)

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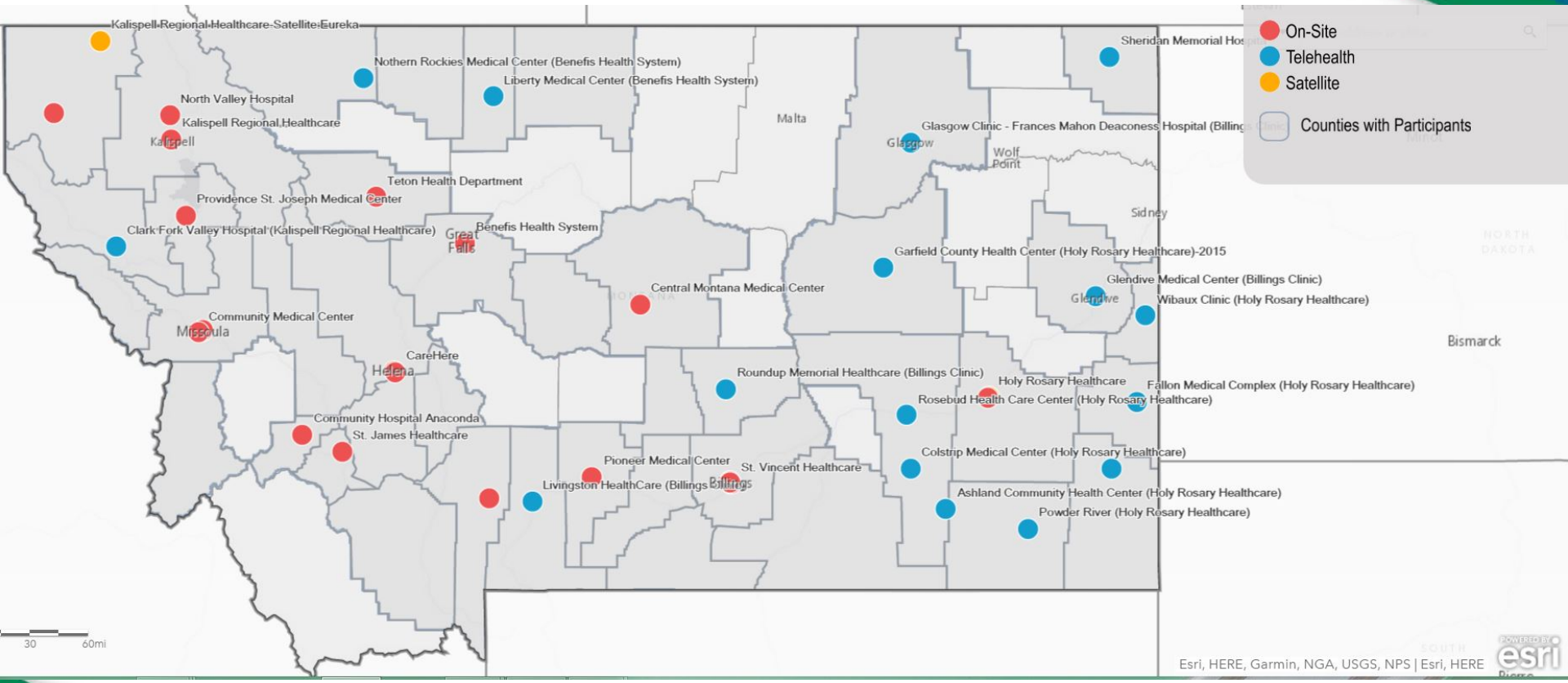
Topics

- Program Overview & Introduction
- Goal Setting
- Eating Well
  - fat and carbs, shopping and cooking, eating out, tracking
- Being Active
  - find time for fitness, jump start your activity plan, and staying active

- Balance
  - Tip the Calorie Balance/Burn More Calories than You Take In
- Coping
  - Problem Solving
  - Take Charge of What's Around You
  - Take Charge of Your Thoughts/Take Back the Negative Thoughts
  - Manage Stress
  - Make Social Cues Work for You
  - Coping with Triggers
  - Slippery Slope of Lifestyle Change
- Ways to Stay Motivated

Where the DPP is Offered



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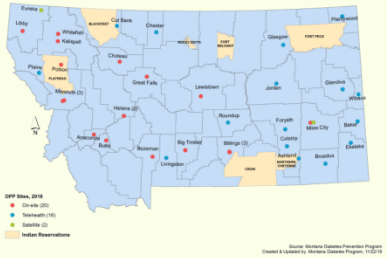
Diabetes Prevention Program

12 Month, Healthy Lifestyle Change Program

Montana Diabetes Prevention Program
Chronic Disease Prevention & Health Promotion Bureau

DPP Site Locations



9 Years

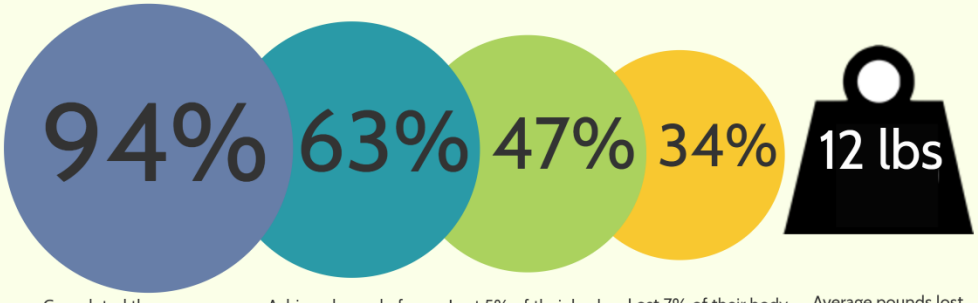
Over 7,500 participants at risk for Type 2 diabetes

Participation

18% 82%

$500 Average annual participant cost*
DPP is a covered benefit by Montana Medicaid.
* https://www.cdc.gov/diabetes/prevention/employers-insurers/manage_costs.html

700 Referring healthcare providers**



Completed the program

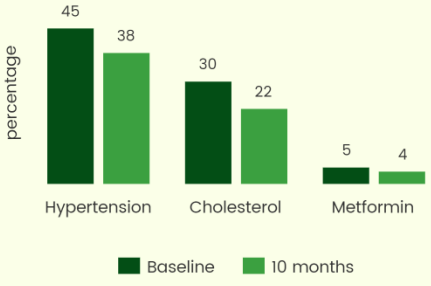
Achieved a goal of a 150 minutes of physical activity per week at 10 months

Lost 5% of their body weight at 10 months

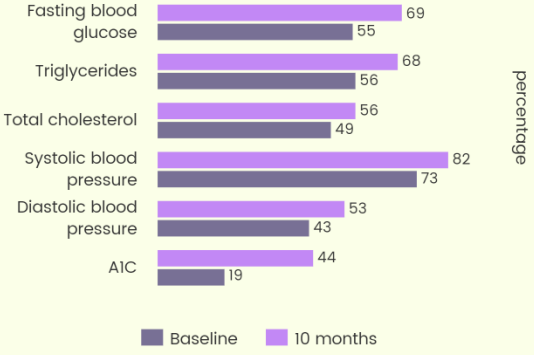
Lost 7% of their body weight at 10 months

Average pounds lost at 10 months

Significantly fewer participants needed to take medication at 10 months compared to baseline



Percentage of participants with normal levels in cardiovascular risk factors significantly increased from baseline to 10 months



Data Source: Montana Diabetes Prevention Program, 2013-15**, 2008-2015 based on participants who attended 4 or more sessions. Program completion = 4 or more sessions.

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Lessons Learned

- **Classes:** Group size from 8 to 34 works.
- **Age:** Older participants did well.
- **Medicaid:** Participants enrolled in Medicaid benefitted.
- **Incentives:** Monetary incentives not needed.
- **Disability:** Participants with disability benefitted (needed nutrition tools and exercise options to meet their needs).
- **Telehealth:** Works well for rural areas.
- **Women & GDM:** Women with a history of GDM are at high risk and benefitted.
- **Lifestyle coaches:** Essential to the success of the program and leaders in this field!

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A LIFESTYLE CHANGE PROGRAM

Economic Impact of Diabetes Care & Diabetes Prevention Program (DPP)

PREVENT DIABETES, STAY HEALTHY, & SAVE MONEY

$8,010
Estimated Cost of Diabetes Treatment Over a 3-year Period [1]

$500
Average Yearly Cost per Participant to Provide the Diabetes Prevention Program [2]

$2,650
Healthcare Cost Savings Over a 15 month Period by Participating in the Diabetes Prevention Program [3]

MEDICAID COVERAGE

In 2019, Montana Medicaid started covering the DPP for members at high-risk for cardiovascular disease and diabetes.

MEDICARE COVERAGE

Starting January 1, 2018 Medicare will cover DPP services for beneficiaries who are at risk for developing diabetes.

WORKPLACE INCENTIVE

In 2016, Montana Health Care and Benefits Division included the DPP as part of the Next Step Incentive. State employees get an additional $15/month off the monthly benefit contribution if they complete the program.

1. https://www.diabetes.org/resources-and-features.html
2. https://www.cdc.gov/diabetes/prevent-type-2/employer-resources/manage-costs.html
3. https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/ActuarialStudies/Downloads/Diabetes-Prevention-Cost-Savings-2016-12-14.pdf

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Medicaid

- Increases services accessible for those in highest need who are low-income and have health disparities
- Valuable to Medicaid to cover these services
- Medicaid members are successful participants
- Training needs, adaptations, accessibility, cultural competency considerations

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Self-monitoring fat grams

Allow alternative food journaling methods for participants with a developmental disability.

Transportation

Engage case managers and family members to help with transportation to attend class. Use Medicaid transportation assistance services.

Accountability

If participants have difficulty following through with their intentions and committing to behavior changes, provide a supportive environment yet make them accountable. Promote coping skills.

CHALLENGES & SOLUTIONS

Challenges were noted in recruiting Medicaid beneficiaries, teaching some curriculum sessions, and self-monitoring fat and physical activity. Coaches found barriers to participant follow-through, commitment, and coping skills in adopting healthy habits.

Solutions were addressing barriers to participation such as providing transportation assistance and reminders to promote attendance, providing 1-on-1 time with participants and simplifying curriculum content for better comprehension, and simplifying tracking tools for improved self-monitoring.

"I often review material after class individually with participants who have learning challenges."

"The key is ongoing support from all angles and well beyond the coaches—case managers, physicians, therapists, family, friends."

"Never underestimate the insight and wisdom of the participants. They know themselves so well in terms of mental health—triggers, behaviors, ways to come back on track, and self-esteem. These strengths easily translate to other lifestyle behaviors like food and exercise."

"I always adjust my teaching based upon the entire group. I emphasize different things. I go with the flow to meet the needs of the group."

"I simplify the curriculum. I reiterate key points. I use demonstrations and visual aids. It also helps to provide 1-on-1 assistance."

Medicaid Reimbursement

- Coverage:
  - Reimbursement and enrollment information is outlined in a provider notice on the website located at
    - https://medicaidprovider.mt.gov/Portals/68/docs/providernotices/20 17/provnotice57diabetesservicesIHS09292017.pdf
- Process:
  - First step for DPP is to contact the Public Health and Safety Division to establish whether the program to be provided meets criteria for approval
  - Enter into an agreement with DPHHS through Public Health
  - Provide NPI number for Medicaid claims processing
  - Submit data to DPHHS

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DPP Resources

- CDC DPP
- Lifestyle Coach Common Ground
- Native Lifestyle Balance
- Preventing Diabetes in American Indian Communities
  - Knowler W & Ackermann R. Diabetes Care 2013;36:1820-1822.
- Translating the Diabetes Prevention Program into American Indian and Alaska Native Communities
  - Jiang L, Manson S, Beals J, Henderson W, Huang H, Acton K, Roubideaux Y, and the Special Diabetes Program for Indians Diabetes Prevention Demonstration Project. Diabetes Care 2013;36:2027-2034.

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Diabetes Resources

- Diabetes in Indian Country Conference recorded sessions
- Montana DPHHS Diabetes Program
  - Training, technical assistance, support, networking with lifestyle coaches and educators, data system, evaluation
- Montana Diabetes Story Maps
  - www.diabetes.mt.gov then click on *New* Story Maps

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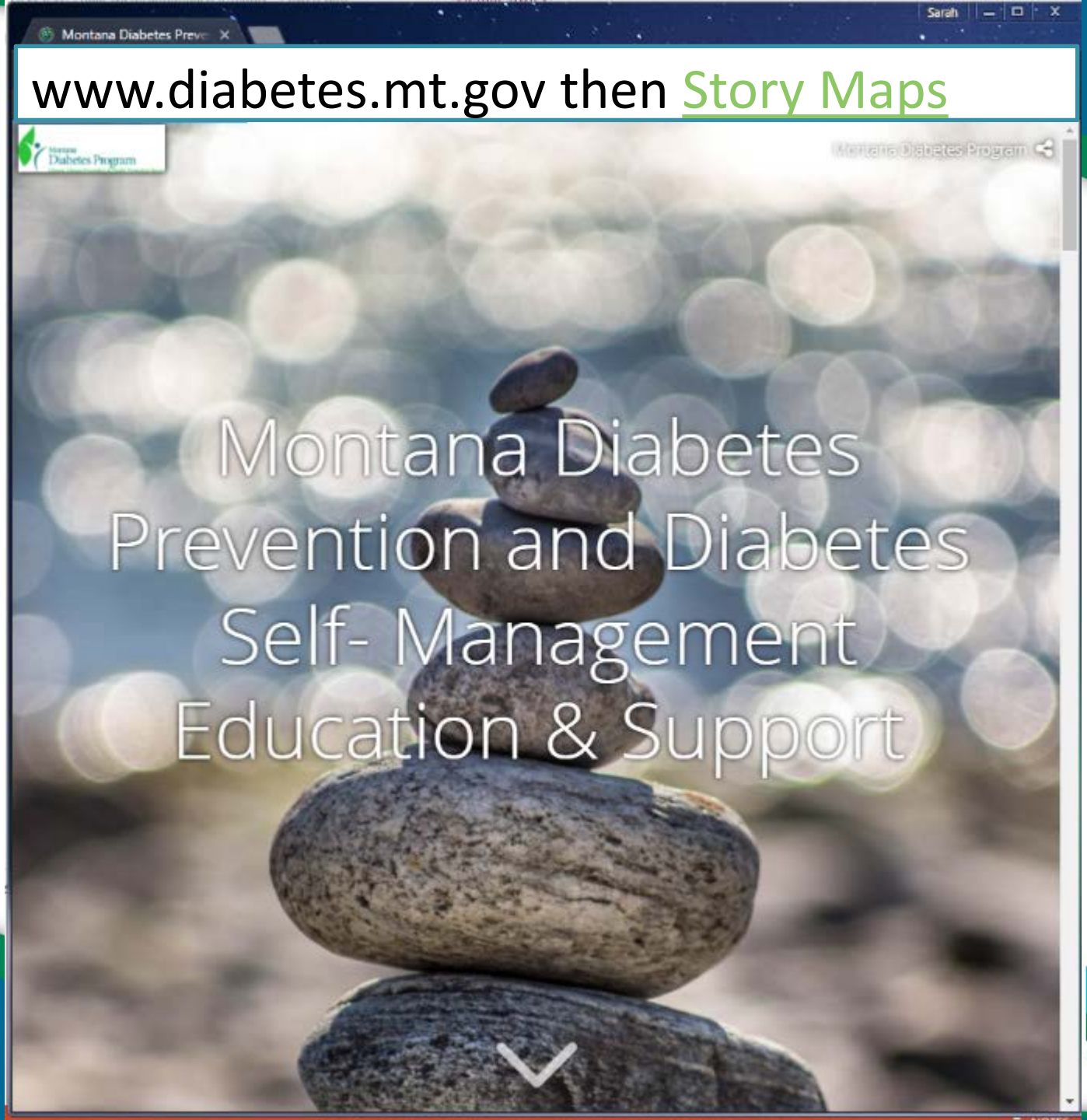
www.diabetes.mt.gov then Story Maps



Traditions of Gratitude

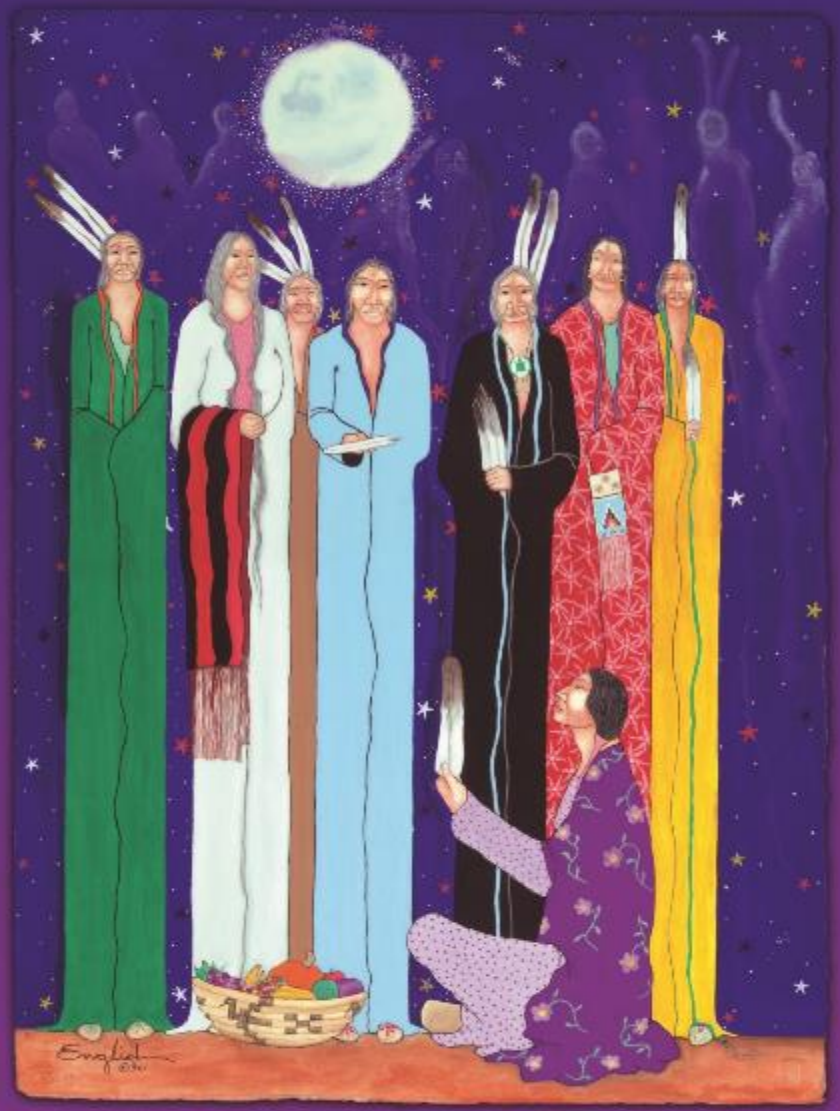
We can overcome this epidemic and restore our health.

https://www.cdc.gov/diabetes/ndwp/educational-materials-and-references/posters.html

Standing Tall for 50 Years:

Honoring Community Health Representatives, 1968-2018

The Traditions of Gratitude Series



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Centers for Disease Control and Prevention

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Around the Fire:

Talking Circles for Diabetes Care and Prevention

The Traditions of Gratitude Series

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They Changed the World!

A Tribute to the Tribal Participants of the Diabetes Prevention Program and Other Diabetes Studies

The Traditions of Gratitude Series

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Our Young People

As our ancestors looked out for us, we need to look out for our children and grandchildren.

I want our people to have good lives.

Together, let's build a diabetes-free future for our children.

https://www.cdc.gov/diabetes/ndwp/eagle-books-toolkit/index.html

Eagle Books

You know, the best part of being physically active and making healthy choices is that I'm doing it with friends. Together, it's easier and much more fun!

-Rain That Dances

Growing Strong Generations

Generations Health Project in Montana

- Active Kids, Healthy Families
- Fresh Foods for Healthy Families
- Healthy Family Recipe: Buffalo Chili

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Take Action

Wellness warriors don't deny diabetes.

They fight it!

Turn fears into Hope

- Change takes time, but it can be achieved.
- Tribal leaders, educators, and community members possess the power, unique talents, experiences, and commitment that can bring about change to make a difference in preventing type 2 diabetes and improving self-management for people with diabetes.

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THANK YOU

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