

# Screen, Test, Refer: National Diabetes Prevention Program



## Housekeeping Notes

- All attendee lines are muted
- Please submit your questions to our panelists via the Q&A feature
- Questions will be addressed at the end of the session, as time permits





### Welcome: Presenter Panel



#### Danielle Nugent, MS Practice Transformation Specialist Quality Insights

### Kathryn Luebke

Community Health Integration Program Director YMCA of Delaware

#### Megan Werner, MD, MPH

Associate Medical Director of Population Health and Quality Westside Family Healthcare



# **Continuing Education Credits**

- To complete the course, the learner must:
  - Complete the 60-minute webinar
  - Complete the evaluation and post-test
- Continuing Education



- Nursing: This course is approved for 1.0 hours of Continuing Education for Nursing. Quality Insights accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation.
- Physicians: The CAMC Health Education and Research Institute designates this internet enduring material activity for a maximum of 1.0 AMA PRA Category 1 Credit(s)<sup>™</sup>. Physicians should only claim credit commensurate with the extent of their participation in the activity.



## Learning Objectives

### After this course, the learner will:

- Describe the prevalence of prediabetes and diabetes
- Identify benefits of National Diabetes Prevention Program (National DPP)
- Explain prediabetes Screen/Test/Refer process
- Identify in-person and virtual National DPP options



# **Quality Insights Overview**

- Non-profit organization focused on improving health care quality in the pursuit of better care, smarter spending and healthier people
- Strive to be a change agent, partner and integrator of local organizations collaborating to improve care





Improving the Health of Americans Through Prevention and Management of Diabetes, Heart Disease, and Stroke Program

- Delaware Division of Public Health
  - Serving more than 110 DE health care practices
- Pennsylvania Department of Health
  - Serving more than 75 sites
- Provide direct assistance and technical support for providers at **no cost**
- Learn more by visiting: <u>https://improve.qualityinsights.org/Projects/DE-</u> <u>Hypertension-and-Diabetes.aspx</u>



### State Engagement Model (StEM)

NACDD/CDC State Engagement Model Catalyzing Action and Collective Impact of the National DPP





### Four Pillars of StEM

### Awareness

### Availability

### Coverage

Screen, Test, Refer

NACDD. 2022



## Goals of StEM

- Increase referrals to National DPP by 10% by June 30, 2022
  - Increase provider/organizational awareness of, and referral to, the National DPP
  - Increase by one the number of National DPP lifestyle change program providers in Delaware
  - Increase by three the number of employers in Delaware that have committed to offer the National DPP lifestyle change program as a covered health benefit
  - Collaborate to develop a standard protocol to increase screening, testing, and referrals





# Roughly how many American adults have prediabetes?

- A. 15 million
- B. 56 million
- C. 88 million



### **Prediabetes Prevalence Nationally**

Characteristic	Prediabetes, 2018 Estimates Number in millions
Total	88.0
Age in Years	
18-44	28.7
45-64	35.1
≥65	24.2
Sex	
Women	47.1
Men	40.9
Race/ethnicity	
White, non-Hispanic	54.8
Hispanic	14.6
Black, non-Hispanic	11.4
Asian, non-Hispanic	5.0

<u>https://www.cdc.gov/diabetes/pdfs/data/stat</u> <u>istics/national-diabetes-statistics-report.pdf</u>



### **Prediabetes**

- What is prediabetes?
  - Blood sugar levels are higher than normal, but not high enough to be classified as type 2 diabetes
- Is prediabetes common?
  - Approximately 88 million American adults have prediabetes more than 1 in 3
- Why is prediabetes a problem?
  - Prediabetes creates an increased risk of developing type 2 diabetes, heart disease, and stroke

Source: Prediabetes Risk Factors- CDC







How many Delaware adults report being told they have prediabetes?

- A. 5.5%
- B. 25.2%
- C. 11.8%



### **Prevalence of Prediabetes in Delaware**

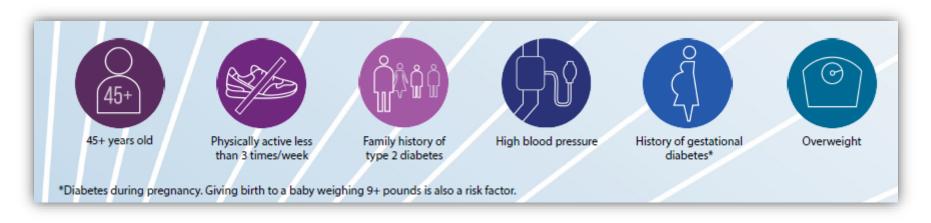
11.8% - or more than 75,100 Delawareans - reported being told they have prediabetes. <u>https://dhss.delaware.gov/dph/dpc/di</u> <u>abetes02.html</u>

From 2003-2019, the percentage of DE adults with diagnosed diabetes rose from 8% to 13%. <u>https://www.dediabetescoalition.org/the-impact-ofdiabetes-in-delaware-2021-report-released/</u> In 2019, 34% of DE residents were obese and additional 35% were overweight. <u>https://www.dediabetescoalition.org/the-impact-of-</u> <u>diabetes-in-delaware-2021-report-released/</u>

Prediabetes and diabetes cost Delaware \$1.1 billion each year. https://improve.qualityinsights.org/CMSPages/ GetFile.aspx?guid=37bc5b09-b17d-459f-a381-70bd7348a188



### Who is at risk?



• People of certain ethnic/racial backgrounds, such as African-American, Hispanic/Latino, and some Asian-Americans are at increased risk.

Source: Prediabetes Risk Factors- CDC





**True or False:** Participation in the National DPP can lower risk of developing type 2 diabetes by as much as 58% (71% if you're over age 60).

A. TrueB. False



### Prevention

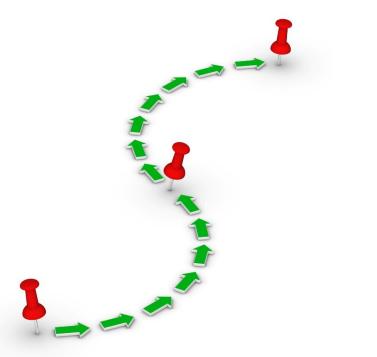
- Healthy lifestyle choices can help prevent type 2 diabetes
  - 58-71% in under age 65
  - 71% in over 65
- Healthy Lifestyle:
  - Eat healthy foods
  - Get more physical activity
  - Lose excess pounds
  - Control blood pressure and cholesterol by taking medications as prescribed
  - <u>NIH. 2021</u>





### Steps of Screen, Test, Refer

- Educate
  - Staff
  - Patients
- Define Eligibility
- Screen
- Test
- Refer





### **Educate Care Team**

#### • Value of the prediabetes conversation

- Increasing patient awareness
- Helping to lower rates of diabetes
- Improvements to patient health outcomes
- National DPP
  - Diabetes incidence was reduced by 58-71% over three years
  - Follow-up has shown sustained reduction in the rate of conversion to type 2 diabetes of 34% at 10 years and 27% at 15 years (<u>NCBI. 2011. Outcomes Study</u>)
- <u>Recording</u> of interview with YMCA on the National DPP
- <u>National DPP Coverage Toolkit</u>
  - Medicaid
  - Medicare
  - Some private insurers



### **Educate Staff**



### Prediabetes Practice Module November 2021

Implementation of Quality Improvement Initiatives to Improve Diabetes and Hypertension





Funding provided by the Pennsylvania Department of Health through the improving the Health of Americans Through Prevention and Management of Diabetes and Heart Disease and Stoke federal grant from the Centers for Disease Control and Prevention. Publication number PADCH-HD-110121





National DPP Coverage Toolkit Overview ID: E-E0JKKV Language: English - ★★★★★5

#### ABOUT THIS COURSE CONTENT

#### National DPP Coverage Toolkit Overview

The National Diabetes Prevention Program (National DPP) Coverage Toolkit was developed in 2017 by *National Association of Chronic Disease Directors* (NACDD), the Division of Diabetes Translation at Centers for Disease Control and Prevention (CDC), and Leavitt Partners (healthcare intelligence firm) as part of ongoing national efforts to establish Medicaid coverage for the National DPP lifestyle change program.

#### www.Ediscolearn.com

https://improve.qualityinsights.org/Projects/PA-DOH/Practice-Modules.aspx



### **Educate Patients**

- Defining prediabetes
- Patient education resources
  - What is prediabetes? (English, Spanish)
  - So you have prediabetes ... now what? (<u>English</u>, <u>Spanish</u>)
- CDC videos and podcasts for patients
- <u>Registry</u> of National DPPs in Delaware
- Use of small media in the waiting rooms, exam rooms
- Share links on patient portal or via text message



## **Patient Portal Optimization**

- Secure direct messaging 24/7
- Ability to run reports
- Educational resources/materials
- Text or messaging campaigns



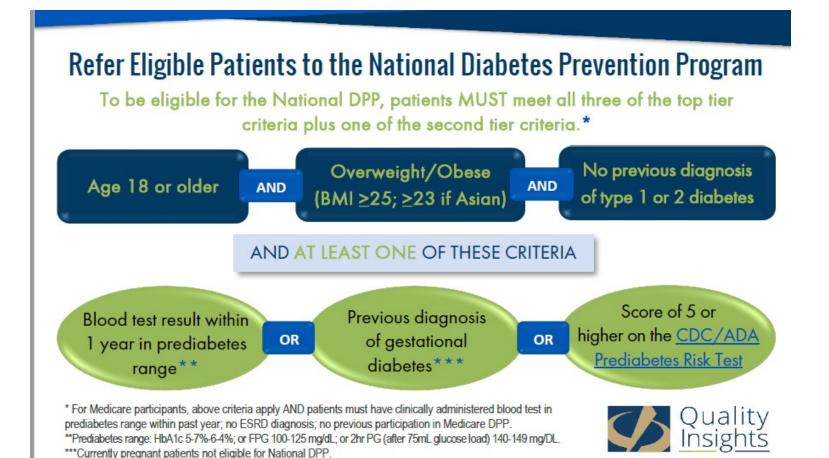
# Text Messaging for Patient Engagement

- 19% of people never check their voicemail EVER!
- 72% of Americans own a smartphone
- 97% use their smartphone to text
- **90%** of cell phone users ignore incoming calls
- 76% of patients believe texts are more convenient than a phone call



Source: <u>https://www.solutionreach.com/slideshows/13-stats-on-why-text-should-be-next-for-your-practice?hsCtaTracking=fe478f3d-3511-431d-9fe6-2f6ba4c57c02%7C9cb0cc89-248f-4d60-88ae-df5c1049f768</u>





### Screen

- Prediabetes Risk Test (relevant for non-clinical orgs/staff)
  - Prediabetes Risk Test English
  - Prediabetes Risk Test Spanish
- Promote use of ICD-10 codes for prediabetes
  - <u>Codes for screening for prediabetes</u>
- Work to address Social Determinants of Health (SDOH)
  - Identify populations within the practice/organization's community that are of greatest need for National DPP
  - Address needs of the population: language, transportation, cost, etc.



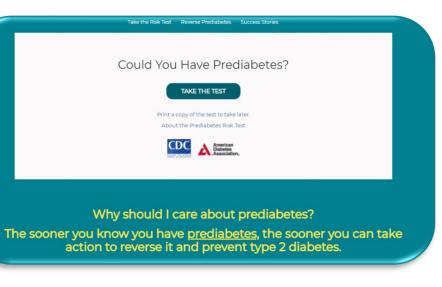


**True or False:** On the Prediabetes Risk Test a score of 4 or higher will indicate that a patient is at increased risk for prediabetes?

- A. True
- B. False



Prediabetes Risk Test		i	DIAB	AL ETES NTION OGRAM	
	r score in Height	Height Weight (lbs.)			
Younger than 40 years (0 points)	es below 4'10"	119-142	143-190	191+	
40-49 years (1 point)	4'11"	124-147	148-197	198+	
50-59 years (2 points) 60 years or older (3 points)	5'0"	128-152	153-203	204+	
	5'1"	132-157	158-210	211+	
Are you a man or a woman?	5'2"	136-163	164-217	218+	
Man (1 point) Woman (0 points)	5'3"	141-168	169-224	225+	
If you are a woman, have you ever been	5'4"	145-173	174-231	232+	
diagnosed with gestational diabetes?	5'5"	150-179	180-239	240+	
Yes (1 point) No (0 points)	5'6"	155-185	186-246	247+	
	5'7"	159-190	191-254	255+	
Do you have a mother, father, sister, or brother with diabetes?	5'8"	164-196	197-261	262+	
	5'9"	169-202	203-269	270+	
Yee (1 point) No (0 points)	5'10"	174-208	209-277	278+	
Have you ever been diagnosed	5'11"	179-214	215-285	286+	
with high blood pressure?	6'0"	184-220	221-293	294+	
Ses (1 point) No (0 points)	6'1"	189-226	227-301	302+	
Are you physically active?	6'2"	194-232	233-310	311+	
	6'3"	200-239	240-318	319+	
Yes (0 points) No (1 point)	6'4"	205-245	246-327	328+	
What is your weight category?		1 Point	2 Points	3 Points	
See chart at right)		You weigh less than the 1 Point column @ points			
Total score:	Julipped Inco. To man subbalant of	ng at al., lan, biann Isaid gerialneoil dia	Maal 100776-703,300 halps as part of the re-	Cognel Agentine	
you scored 5 or higher					
u are at increased risk for having prediabetes and are at high risk five type 2 diabetes or prediabetes, a condition in which blood sugar type 2 diabetes. Talk to your doctor to see If additional testing	levels are higher than non				
ae 2 diabetes is more common in African Americans, Hispanics/Lat	inos, American Indians, A	alan American	s, and Pacific Is	landers.	
gher body weight increases diabetes risk for everyone. Asian Amer pounds lower than weights in the 1 Point columa).	icans are at increased risk				
u can reduce your risk for type 2 diabetes		Rob Test pro antilities Carr	ters for Disease Carto	Dataren Jone iarten el ant Presarrian	
d out how you can reverse prediabetes and prevent type 2			American Diabetes	CDC	



### https://www.cdc.gov/prediabetes/takethetest/





Of all the steps in the Screen, Test, and Refer model, which one includes information on the guidelines for blood glucose measurements required for the National DPP?

- A. Screen
- B. Eligibility
- C. Test
- D. Refer



### Test

### ADA guidelines for screening

- Informal screening is recommended with a validated tool (Prediabetes Risk Test)
- Testing should start at age 45
- If normal, testing should be performed in three-year intervals
- Testing should be considered for all adults with BMI greater than 25 (greater than 23 if of Asian descent)
- <u>AMA recommended testing procedure</u>
  - Exclude patients that don't meet eligibility criteria
  - Determine if lab test was performed within the past year
  - Proceed with relevant testing option; A1C, Fasting Plasma Glucose, Plasma Glucose test two hours after 75gm glucose load



### Results

Results	A1C Test	Fasting Plasma Glucose	Plasma Glucose Test 2 Hours After 75gm Glucose Load	Follow Up
Normal	<5.7%	<100 mg/dl	<140 mg/dl	Have patients continue healthy behaviors
Prediabetes	5.7% to 6.4%	100 to 125 mg/dl	140 to 199 mg/dl	Refer patients to a National DPP
Results	A1C Test	Fasting Plasma Glucose	Plasma Glucose Test 2 Hours After 75gm Glucose Load	Follow Up
Diabetes	>6.5%	>126 mg/dl	>200 mg/dl	Work with primary care provider to confirm diagnosis. Refer to <u>Diabetes</u> <u>Self-Management</u> <u>Education and</u> <u>Support</u>

**CDC guidelines** 



### Refer

- Refer eligible patients to your local National DPP
  - <u>Patient referral form example</u>
  - Order script pads to give to patients with the National DPP contact information
  - When referring to the YMCA utilize their <u>referral</u> form
- Run a report in EHR and identify eligible patients
  - Activate prediabetes <u>clinical decision</u> alerts in your electronic health record (EHR)
  - Create National DPP referral order in the EHR
  - Implement standing orders allowing non-physicians to place referral orders to the National DPP
- Referral campaign
  - Referral letters, secure email, text, or patient portal message
  - Work with Quality Insights to implement



### **Contact Information**

- Danielle M. Nugent, MSHA Practice Transformation Specialist
  - Email: <u>dnugent@qualityinsights.org</u>





### **YMCA of Delaware**





#### Kat Luebke



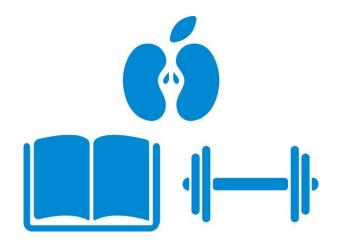
FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

https://www.ymcade.org/



## DIABETES PREVENTION PROGRAM

- Prevention includes:
  - Modest weight loss
  - 30 minutes of physical activity at least 5 days a week
  - Know you numbers get your blood sugar checked



| YMCA'S DIABETES PREVENTION PROGRAM | ©2018 YMCA of Delaware



### **Evidence Based Lifestyle Change Program**

- Reduced the incidence of type
  2 diabetes by 58% for those 60
  years of age and under<sup>1</sup>
- Reduced the number of type 2 diabetes by 71% in individuals over age 60<sup>1</sup>



1. The Diabetes Prevention Program Research Group. Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. N Engl J Med. 2002 Feb 7;346(6);393-403

YMCA'S DIABETES PREVENTION PROGRAM | ©2018 YMCA of Delaware



### Is Prevention Working?

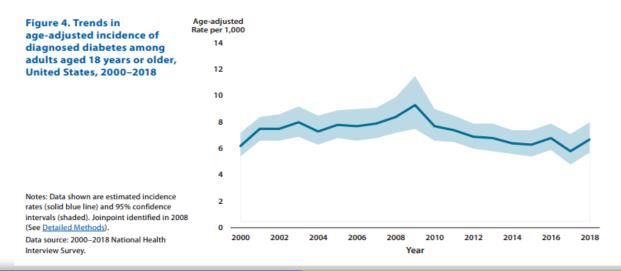
\*Population estimates for 2018 were derived from rates for 2017–2018 applied to July 1, 2018 US resident population estimates from the US Census Bureau (See <u>Detailed Methods</u>).

<sup>b</sup> Rates were calculated using 2018 data only.

Data sources: 2017–2018 National Health Interview Survey and 2018 US Census Bureau data.

#### **Trends in Incidence Among Adults**

 Among adults aged 18 years or older, the age-adjusted incidence of diagnosed diabetes was similar in 2000 (6.2 per 1,000 adults) and 2018 (6.7 per 1,000 adults). A significant decreasing trend in incidence was detected from 2008 (8.4 per 1,000 adults) through 2018. (Figure 4).





### Qualifications

### To qualify for the YMCA's Diabetes Prevention Program, participants must meet the following criteria:

- 18 years of age or older
- Not pregnant
- Overweight (BMI ≥ 25; BMI ≥ 23 for Asian individuals)
- Not diagnosed with type 1 diabetes, type 2 diabetes, or ESRD (End Stage Renal Disease)

#### And have ONE of the following:

- Diagnosed within the last year with prediabetes via a qualifying blood test value\*
- Previous diagnosis of gestational diabetes
- Qualifying risk score as determined by the risk assessment





### **Diagnosed with Prediabetes**

within the last year via qualifying blood values

- A1C: 5.7-6.4%
- Fasting Glucose: 100-125 mg/dL
  - (Medicare beneficiaries 110-125 mg/dL)
- Two-hour plasma Glucose: 140-199 mg/dL
- Prediabetes determined by clinical diagnosis of gestational diabetes (GDM) during previous pregnancy





### YMCA's Diabetes Prevention Program

In a classroom setting, a trained lifestyle coach helps members change their lifestyle by encouraging healthy eating, physical activity, and other behavior modifications over the course of 25 one-hour group sessions.

- Program structure:
  - 25 sessions over 12 months
    - 16 weekly sessions
    - 3 bi-weekly sessions
    - 6 monthly sessions
- Sessions focus on:
  - Healthy Eating
  - Physical Activity
  - Behavior Modification
- Primary goals:
  - Reduce body weight by 7%
  - Participation in 150 minutes of physical activity/week





### Added Benefits from the YMCA of Delaware

- Up to four FREE months of family membership at the YMCA of Delaware (state-of-the-art fitness equipment, youth and adult fitness center, group exercise classes, saunas, swimming pools, babysitting
- Additional eight months at **50% off membership fees** (with session attendance).
- SAVINGS of up to \$850!





## Incentives for Health Care Provider from the YMCA of Delaware

- Practice with the highest overall referrals will earn a free lunch for the entire practice staff.
- Opportunity for three practices to do an in-depth referral project. Practice will receive additional support from the YMCA of Delaware, Quality Insights, and the AMA.



### Screen, Test, Educate, & Refer

- Screen patients for prediabetes risk factors
- Test glucose values
- Educate about prediabetes and risk of type 2 diabetes
- Refer to the YMCA's Diabetes Prevention Program
  - Online referral form
  - Faxed referral form
  - EHR direct message (will require setup)

PATIENT INFORMA	DIABETES PREVENTION	
Patient Name: Date of Birth:	Home Phone:	Date: Cell Phone:
Address:		
City, State, Zip:		
E-Mail		
Patients must be Diabetes Prevention	18 years and older and have a BMI of 2	5 or greater, Medicare Diabetes Prevention Program Qualifications
Blood Values	Quaincations	Blood Values REOURED
	% (must be 5,7%-6,4%)	IA1C value = \$ (must be 5.75-6.45)
	mg/dL (must be 100-125mg/dL)	Fasting glucose =mg/dL (must be 110- 125mg/dL)
Non-fasting glucos	e =mg/dL (must be 140-199 mg/dL)	] Non-fasting glucose =mg/dL (must be 140- 199 mg/dL)
O Prediabetes determ	ined by clinical diagnosis of Gestational	3 Predtabetes determined by clinical diagnosis of
Diabetes (GDM) durin	g previous pregnancy	Gestational Diabetes (GDM) during previous pregnancy
	Height Weight	BMI
PROVIDER INFORM	ATION;	
Provider Name	Practice	Name:
Signature;	Phone: Fax:	
PATIENT AUTHROR	TATION	
Patient Signature;		Date
By signing this form, I auti Living Program and conduc	torize my physician to disclose my screening results to the ction other activities as permitted by law. I understand that	VMCA for the purpose of determining my aligibility for the YHCA's Healthy YMCA for the purpose of determining my aligibility for the YHCA's Healthy I i am not colligible to participate in this screening program and that this me is notifying my abraician in writing. Any resocation will not have an
	fore my physician received my written revocation.	and of source and set before an enough. Any resolution will not have an





## **THANK YOU**

- Kat Luebke, Community Health Integration Program Director
  - Email: <u>kluebke@ymcade.org</u>
  - Office: 302-472-6769
  - Fax: 302-250-4895



Westside Family Health Care: Lessons Learned from Referring to the National Diabetes Prevention Program

### Westside Family Healthcare



https://www.westsidehealth.org/





### Westside Family Healthcare

- Federally Qualified Health Center
- Established in 1988
- Five locations and a Mobile Health Unit — Wilmington (2), Newark, Bear, and Dover
- Our mission:
  - To improve the health of our communities by providing equal access to quality healthcare, regardless of ability to pay.



### **Patient Population**

- Over 27,000 patients annually
- 45% are Medicaid beneficiaries, 30% are uninsured, and most have incomes below 200% of the FPL
- Over 40% patients best served in a language other than English





### **Services and Diabetes**

- Core services include screening for and treating diabetes
- More than 13% of patients have diabetes
- Likely more in the future:
  - 8% of patients have prediabetes
  - 36% have a BMI in the obese range
- Can be challenging conditions for patients to manage



### **Tools to Address Diabetes and Prediabetes**

- Multidisciplinary approach
  - Registered Dietitians and Certified
    Diabetes Educators
  - Nurses
  - Clinicians



- Lifestyle change programs including the National DPP
  - Work to address barriers to accessing care



# Addressing Systemic Barriers to Accessing the National DPP

- Patient awareness of National DPP
  - National DPP flyers
- Patient engagement
  - Letter campaigns and follow-up phone calls to patients through partnership with Quality Insights
  - Westside follow up on patients who expressed interest in National DPP
- Provider engagement
  - Quality Insights provider presentation on prediabetes (2019)
  - Focus on referral among our nutrition providers



# Addressing Patient Barriers to Accessing the National DPP

- Spanish language needs
  - Starting in 2021, YMCA of DE began offering classes in Spanish
- Transportation and travel to classes
  - Starting in 2020, classes are offered virtually
- Cost
  - Medicaid/ Medicare coverage of National DPP
  - Scholarships for the uninsured (through YMCA of DE, grant programs)
  - WISEWOMAN coverage of National DPP for participants





### WISEWOMAN

- Well-Integrated Screening and Evaluation for WOMen Across the Nation (WISEWOMAN)
- Women 40 to 64 who qualify for Screening For Life (uninsured or underinsured)
  - Identify risk factors for heart disease and develop plans to address those risk factors
  - Educate patients on heart disease
  - Promote healthy behaviors through coaching and participation in various programs
- Materials in English and Spanish- majority of our participants are Spanish-speaking
- Eight women referred to National DPP (so far)
  - Cost is covered by WISEWOMAN
- One patient's success story
  - Completed 18 classes so far
  - Lost 15 lbs, saw improvement in her labs
  - Created family engagement by daughter starting to adopt healthy habits



### Lessons Learned

- Repetition is key!
  - Can be difficult to engage patients
  - Take advantage of interest and momentum
  - Need for continuous engagement
- Addressing barriers is essential
  - Knowledge, financial, language, other





### **Future Plans**

- Continued provider/patient education
- WISEWOMAN
  - Continued referrals and follow up
- Letter campaign for patients best served in Spanish
- Implementation of team-based system to identify, educate, and refer patients



### Questions?





### Call to Action

- All increase:
  - Consumer awareness
  - Employer coverage
  - Availability of National DPP
  - Increase screening, testing, and referrals
- Providers and Care Team:
  - Educate patients on prediabetes
  - Utilize the prediabetes ICD-10 code R73.03
  - Refer your patients at risk for diabetes to the National DPP
  - Partner with Quality Insights to implement a referral letter/text/patient portal campaign





## What are your goals for increasing S/T/R?

- What are your organization's goals to increase National DPP for June 2023?
  - A. 0-5%
  - B. 6-10%
  - C. 11-15%
  - D. 16-20%
  - E. >20%

### Please put your responses in the chat.



### **Evaluation and Post-Test**

- Screen, Test, Refer: National Diabetes Prevention Program
  - Evaluation:
    - https://www.surveymonkey.com/r/CJ T6VM9
  - Post-Test:
    <u>https://www.surveymonkey.com/r/K</u>
    <u>V6LHLK</u>



### <u>QR Code</u>

Activate the camera on your smart phone and scan this QR code to link to the **evaluation** 



## Quality Insights on the Web

- Visit our website: <u>www.improve.qualityinsights.org</u> /Projects/PA-DOH
- Connect with Quality Insights on social media via Twitter and LinkedIn



Quality Insights website



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www.linkedin.com/ company/1259377



### Thank You



The healthcare improvement experts.

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