

Wisconsin Partners Building Infrastructure to Sustain Diabetes Prevention Program

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Abstract

Public and private partners in Wisconsin are collaborating to create a sustainable infrastructure for the National Diabetes Prevention Program (National DPP), a lifestyle change program that can reduce the risk of Wisconsin adults developing type 2 diabetes (T2D). The Wisconsin Department of Health Services (WI DHS), insurers, employers, and National DPP suppliers are partnering on a project to create pathways for reimbursement by building a self-sustaining benefits network to reduce administrative burden.

Introduction

National DPP was created in 2010 in response to the growing burden of prediabetes and T2D in the U.S. (1). Despite being a scientifically-proven and cost-effective way to prevent T2D, few patients are referred to this program (2). Lack of insurance coverage was reported as a significant barrier to success (3). This article shares a model that the Wisconsin Department of Health Services has adopted in creating a sustainable National DPP.

Structured Program

The National DPP is a lifestyle change program proven to prevent or delay the onset of T2D in adults with prediabetes (1). It is a first-of-its-kind initiative uniting public and private organizations to form a nationwide delivery system (1).

Prediabetes is a condition where blood glucose (sugar) levels are higher than normal—but not high enough to be diagnosed as diabetes. Prediabetes can lead to heart disease, stroke, and T2D which is the most common form of diabetes (4). Prediabetes can often be reversed through lifestyle changes before it becomes T2D. The Centers for Disease Control and Prevention (CDC) estimates that 1 in 3 adults in the U.S. has prediabetes (4).

The National DPP provides an evidenced-based framework for T2D prevention efforts in the U.S. founded on four key pillars: 1) a trained workforce of lifestyle coaches; 2) national quality standards supported by the CDC Diabetes Prevention Recognition Program; 3) a network of program delivery organizations sustained through insurance coverage; and 4) participant uptake and referral. These pillars link closely to the CDC's three key objectives (5) for the National DPP:

1. Assure program quality, fidelity to scientific evidence, and broad use of the National DPP Lifestyle Change Program (LCP) throughout the U.S.;
2. Develop and maintain a registry of organizations that are recognized for their ability to deliver an effective T2D prevention National DPP LCP to people who are high risk; and

3. Provide technical assistance to organizations' staff in effective program delivery and problem-solving to achieve and maintain recognition status.

A key component of the National DPP is a structured, evidence-based, year-long lifestyle change program consisting of at least 16 sessions in months 1-6 and six sessions in months 7-12 to prevent or delay the onset of T2D in adults with prediabetes or at risk of developing T2D. The program is mainly group-based, facilitated by a trained lifestyle coach, and uses a CDC-approved curriculum. The curriculum supports regular interaction between the lifestyle coach and participants; builds peer support; and focuses on behavior modification to lose weight (~ 5% of starting weight) through healthy eating, increasing physical activity, managing stress, changing other key behaviors (e.g., overeating in restaurants) and setting action plans (goals). The program may be delivered in-person, via distance learning, online (e.g., Skype, WebEx, Zoom, GoToMeetings, Google Meet, Facebook Live, etc.), or through a combination of these delivery modes (6).

The CDC manages the Diabetes Prevention Recognition Program (DPRP), which is the quality assurance arm of the National DPP.

The DPRP awards preliminary or full CDC recognition to organizations applying for recognition as required for Medicare Part B for reimbursement delivering the lifestyle change program that meets national quality standards and achieves the outcomes proven to prevent or delay the onset of T2D (7). Organizations can earn CDC recognition by following a CDC-approved curriculum and achieving outcomes proven to prevent T2D in participants at high risk in a patient cohort.

Proven Health Impact

The National DPP is founded on the science of the Diabetes Prevention Program research study, which showed that people with prediabetes participating in a structured lifestyle change program reduced their risk of developing T2D by 58% by making small lifestyle changes that helped them lose 5% - 7% of their body weight. If the participant was over age 60 their risk was reduced by 71% (8). Even after 10 years, lifestyle change program participants had a 34% lower rate of T2D (9). Additional research indicated secondary benefits of the program, including lowering blood pressure and triglycerides, while also improving overall cholesterol measures. A three-year follow-up showed the need for medications in the lifestyle group was 27% - 28% lower for controlling hypertension and 25% lower for managing hyperlipidemia compared with placebo and metformin groups (10).

Thoughtful Approach

Supported by funding from the CDC, the Wisconsin Department of Health Services (WI DHS) has worked strategically in its approach to creating a sustainable environment for the National DPP. WI DHS partners with organizations that

are interested in becoming CDC-recognized suppliers or have already achieved recognition to deliver the program. These partnerships enhance capacity for the successful delivery of the program, including training lifestyle coaches; engaging health systems to educate health care providers and build screening, testing, referral systems and productivity schedules for the coaches; and collaborating with payers such as insurers and employers to build pathways for reimbursement. WI DHS generates general awareness of prediabetes and the National DPP through media campaigns and online at PreventDiabetesWI.org.

WI DHS consciously chose not to fund direct delivery of National DPP as part of their strategic approach, but instead, their work focuses on infrastructure investment to sustainably expand and support the programs into the future—when grant funding no longer exists to scale programming. Pam Geis, the health promotion specialist with WI DHS' Chronic Disease Prevention Program (CDPP) and National DPP State Quality Specialist, believes firmly in this approach.



“Over the years, it’s not been uncommon to have valuable, worthy programs come and go because they are supported by funding that eventually disappears. The National DPP is too big, too important, [and] has too much evidence behind it to let that happen.”

Convening Partners

With support from the National Association of Chronic Disease Directors (NACDD), WI DHS brought together stakeholders from across the state in October 2017 for a Diabetes Prevention State Engagement Meeting. Participating stakeholders represented health systems, pharmacies, insurers, employers, academia, the state community, public health, and philanthropy. The two-day meeting resulted in the *Wisconsin Diabetes Prevention Action Plan*, which outlined goals and activities in key areas: awareness; screening, testing, and referral; program availability; and coverage.

Stakeholders who participated in writing coverage goals and activities proposed convening commercial insurers to explore commercial coverage. In fall 2018, WI DHS staff began contacting Wisconsin insurers to gauge interest in developing a Wisconsin National DPP Insurer Community of Practice (Insurer CoP). In January 2019, five insurers committed to the Insurer CoP to learn more about the National DPP, explore becoming referral sources and, ultimately, payers. All five participating insurers are Wisconsin-based insurers that have service areas ranging from statewide to large regional areas with insurance lines covering commercial, Medicaid, Medicare, Medicare Advantage, and Marketplace.

During 2019, Insurer CoP members learned about strong evidence supporting the National DPP, the program’s structure, different delivery modes, and available tools in the National DPP Coverage Toolkit to help them learn more about providing coverage for the program.

They also learned about the Medicare DPP and its value-based payment structure, which went into effect in April 2018: payment is made for delivery of Medicare DPP when milestones are met, such as attendance at specific sessions, 5% weight loss, and 9% weight loss. In addition to CDC recognition, a value-based payment structure adds another level of fidelity to evidence-based program delivery because program suppliers are not reimbursed unless they achieve results. It was assumed many commercial insurers would follow Medicare's lead with value-based payments.

In January 2020, Insurer CoP members concluded National DPP referrals and reimbursement from commercial insurers would require individual contracts with each of Wisconsin's 39 existing National DPP suppliers. This administrative burden proved a significant barrier they could not overcome. After conversation and some out-of-the-box thinking, one representative suggested WI DHS consider creating a network, similar to a management services organization (MSO) concept: this would allow payers to put one contract in place for use of all National DPP suppliers in Wisconsin.

Building a Benefits Network

First, Wisconsin needed a platform to host the benefits network. Geis contacted colleagues at NACDD with the idea of creating a benefits network and the need for a platform "bridge" connecting suppliers and payers. NACDD staff were intrigued by the concept and suggested the Welld Health platform might be a perfect fit. Welld Health is a Health Insurance Portability and

Accountability Act (HIPAA)-compliant electronic health record (EHR) for community-based organizations. With Fast Healthcare Interoperability Resources (FHIR) capability, Welld Health can interface with any EHR platform in the nation to exchange data. The platform has three major components: program and data management, secure referral capability, and a claims engine. Geis then connected with Welld Health's Chief Customer Officer Cassandra Stish. Geis and her colleague, Marilyn Hodgson, the WI DHS CDDP quality initiatives coordinator, began meeting with Stish in February 2020 to learn more about Welld Health's platform.

Geis' moment of inspiration came following the initial platform demonstration when Hodgson said, "This would have been a great tool to have when I was managing my National DPP." Hodgson had recently come to WI DHS from a large health system in northern Wisconsin where she oversaw diabetes self-management education and support (DSMES) and the National DPP. Hodgson's comment helped Geis realize the Welld Health platform could help facilitate commercial coverage by serving as the basis for the benefits network, navigating the complex world of value-based payments, and providing program suppliers with an easy-to-use environment for managing program data and referrals.

Welld Health agreed to partner with WI DHS in May 2020 to build a self-sustaining benefits network called the Wisconsin Lifestyle and Prevention Benefits Network. While language already existed for Welld Health to contract with National DPP

suppliers, it still needed to develop language for a contract between Welld Health and the insurers. WI DHS staff, Welld Health, and members of the Wisconsin National DPP Insurer CoP collaborated during the next year to develop that contract language. In the meantime, Geis, Hodgson and Stish also were onboarding Wisconsin's National DPP suppliers to the platform.

During this same period, a regional insurer and National DPP Insurer CoP member committed to National DPP insurance coverage for one client, a health system with nearly 8,000 employees and dependents. While Geis is pleased with this progress, she would like the insurer on the Lifestyle and Prevention Benefits Network covering the cost of the program for any of the insurer's members at the National DPP supplier of their choice. This would allow interested individuals to select a cohort happening at a date, time and location convenient for them. In another model currently utilized in Wisconsin, several vendors providing onsite health and wellness services for employer clients became National DPP suppliers and incorporated the program into their wellness programming.

Welld Health finalized the insurer contract language in April 2021 and the first insurer, a statewide insurer and National DPP Insurer CoP member, is reviewing the contract with the intention of becoming the first to sign onto the Lifestyle and Prevention Benefits Network. Geis hopes this will happen in early fall of 2021 in time for prime insurance selection season for employers and benefits managers. She envisions a future where Wisconsin's Lifestyle and Prevention Benefits Network

eliminates significant reimbursement barriers for both health insurers and National DPP suppliers. In Geis' future, highly evidence-based diabetes prevention programming is completely covered; delivered in real-time through hyper-local in-person and distance learning delivery options; and programming is facilitated by lifestyle coaches who live and work in the same community as participants. These local coaches can connect an insurer's members to resources that resolve barriers to participation and retention as they arise.

Bigger Vision

But Geis' vision for the future does not stop there. WellD Health's platform can manage much more than just National DPP and already does for community organizations such as local YMCAs. There is a reason why Wisconsin strategically named their network the Lifestyle and Prevention Benefits Network. Geis hopes that sometime in the not-too-distant future, health insurers will reimburse for other evidence-based community programs to improve their overall population's health like the Stanford-developed Diabetes Self-Management Program (DSMP) and Chronic Disease Self-Management Program (CDSMP), blood pressure self-monitoring programs, falls prevention programs, the Livestrong cancer survivor program, and more. And the providers of those programs will join the Lifestyle and Prevention Benefits Network to make it happen.

Yes, Geis is dreaming big. But as American poet Carl Sandburg said, "Nothing happens unless first we dream."

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CPE CREDIT ANSWER KEY

See the CPE credit self-assessment questionnaire on page 35.

1. C
2. A
3. D
4. B
5. B
6. B
7. D
8. A
9. A
10. C