AADE Diabetes Prevention Program

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American Association of Diabetes Educators

Minnesota State Engagement Meeting
September 13th, 2016
What is AADE?

American Association of Diabetes Educators (AADE):

- Membership Organization – our 14,000+ membership base is made up of Diabetes Educators. Diabetes Educators are healthcare professionals and paraprofessionals, ranging from RN’s, RD’s, CDE’s, Pharmacists, PhD’s, and more)

- National Accrreditore for Medicare- AADE is one of two certifying body Diabetes Self -Management Education (DSME) programs, a requirement to bill for Medicare. AADE accredited programs are called “DEAP” sites. (ADA programs are “ERP”).
Why is AADE in Diabetes Prevention?

In 2015, AADE’s National Practice Survey Found:

- 80.5% of respondents reported to be working with people with prediabetes
- 80% of DEAP programs reported to be doing some sort of prevention programming
  
  *Only 0.4% reported receiving reimbursement for prevention services*
CDC choose AADE for National DPP Scaling (DP12-1212)

Why?

- Work with our diverse membership of health care providers
- Working with the network of Diabetes Self-Management Education (DSME) programs with national certification both DEAP and ERP’s (3,000 + nationwide)
- Our experience working with Public Health and State Health Departments regarding type 1 and type 2 diabetes
The AADE DPP Model:

National DPP implemented within certified DSME Sites:

- Both ADA and AADE programs (3500+ Nationwide locations)
- Large pool of eligible participants already being served
- HIPAA compliance
- Oversight from a Diabetes Educator/CDE
- Educated & Trained DPP Lifestyle Coaches
- Third-party payment processing (NPI Number)
- Linkage with local primary care providers
- Linkage with DSME for people with type 2 diabetes
- Linkage to other clinical services as needed
**AADE DPP is the National DPP**

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<thead>
<tr>
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<th>National DPP</th>
<th>AADE DPP</th>
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<tbody>
<tr>
<td>Uses CDC Approved Curriculum</td>
<td>Required</td>
<td>Required</td>
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<tr>
<td>All Delivery Sites must maintain CDC’s DPRP Recognition</td>
<td>Required</td>
<td>Required</td>
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<tr>
<td>Delivery Setting</td>
<td>Can be in-person or virtually delivered</td>
<td>In person/telehealth only (currently)</td>
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<tr>
<td>All Staff are Trained Lifestyle Coaches</td>
<td>Recommended</td>
<td>Required</td>
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<tr>
<td>All Sites have an NPI Number</td>
<td>N/A</td>
<td>Required</td>
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<tr>
<td>All Program Coordinators are Diabetes Educators</td>
<td>N/A</td>
<td>Required</td>
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<tr>
<td>All Sites have Ability to bill Medicare</td>
<td>N/A</td>
<td>Required</td>
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AADE DPP Grant Funded Locations:
AADE DPP has 44 Grant-Funded Sites in 16 states

<table>
<thead>
<tr>
<th>AADE DPP SITES as of 2016:</th>
<th>CDC DPRP Guidelines to Achieve Full Recognition:</th>
<th>AADE DPP Sites’ Aggregated data from DPRP Progress Reports:</th>
</tr>
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<tbody>
<tr>
<td>Number of AADE DPP Sites</td>
<td>Proportion of participants program eligibility determined by a blood based test</td>
<td>≥ 50 % 75.40%</td>
</tr>
<tr>
<td>44</td>
<td></td>
<td></td>
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<tr>
<td>Number of Classes</td>
<td>Minimum Average number of sessions attended during months 1-6 for participants attending ≥ 4 sessions</td>
<td>≥ 9 14.5</td>
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<tr>
<td>&gt; 230</td>
<td></td>
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<tr>
<td>Number of Participants</td>
<td>Minimum Average weight loss achieved at 6 months</td>
<td>≥ 5-7 5.20%</td>
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<td>&gt; 2200</td>
<td></td>
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<tr>
<td>Number of Lifestyle Coaches at AADE DPP Sites</td>
<td>Minimum Average number of sessions attended during month 7-12 for participants attending ≥ 4 sessions</td>
<td>≥ 3 3.62</td>
</tr>
<tr>
<td>228</td>
<td></td>
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<tr>
<td>Average weight loss achieved at 12 months</td>
<td>≥ 5-7 % 6.00%</td>
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## AADE DPP Model and CDC’s Recognition

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<tr>
<th>As of July 2016:</th>
<th>Total</th>
<th>Percentage of Total</th>
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<tbody>
<tr>
<td>DPRP Sites in CDC’s Registry</td>
<td>915</td>
<td></td>
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<tr>
<td>Fully Recognized DPRP Sites</td>
<td>61</td>
<td>6.5 %</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>30</strong></td>
<td></td>
</tr>
<tr>
<td>Percentage of Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fully Recognized sites that are DSME Programs</td>
<td>49% of all Fully Recognized DPRP’s</td>
<td></td>
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<td>Fully Recognized programs that are AADE DPP Sites</td>
<td>25% of all Fully Recognized DPRP’s</td>
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<tr>
<td><strong>AADE DPP Sites make up 50% of total Fully Recognized DSME sites</strong></td>
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https://nccd.cdc.gov/DDT_DPRP/Programs.aspx
Insights After 3+ Years of Delivery:

Pro’s:
- Costs seem to be comparable to other large in-person DPP providers
- AADE DPP’s are meeting or exceeding DPRP requirements
- Our programs seem to have high rates of physician referral compared to others since they are already connected with local physicians in their DSME work and tend to have feedback loops already in place
- Should have a streamline ability to bill for Medicare Reimbursement when available

Challenges
- AADE DPP Program Coordinators usually do not have the time, skills, contacts and resources to “sell” the program to new payers
AADE DPP: Costs of Delivery

National DPP costs approximately $500 per person for the year long program according to CDC.

AADE DPP can implement various payment models, but according to our sites data cost per participant can range between $300-$600 with the average cost of $478 per person for the year long program.

Standardizing variable costs and number of participants per class min of 12 could reduce average cost to ~$350 per participant.
Reimbursement of AADE DPP

All 44 AADE DPP sites are receiving some type of DPP reimbursement (40 employers groups and 6 insurance groups) and growing!

Additional Coverage Information to Consider:
- CPT Code: 0403T
- USPSTF Grade B
- Medicare Actuary Committee Certifies DPP Results as Improving Health Care and Cost Saving
- Medicare coverage of DPP coverage as of January 2018 (tentative)
AADE DPP in Minnesota- Potential to Scale the National DPP

Minnesota has approximately 72 DSME Sites that could implement the National DPP (14 DEAP and 58 ERP)

Each one of these sites may be able to serve multiple geographic locations
AADE Offers Services:

- Specific Marketing Materials (participant, payer, physician)
- Guidance on billing, pricing structure
- DPRP Assistance
- Access to National Data and trends
- Toolkits and Templates
- Online discussion groups
- Option of working with a DPP Mentoring Program
- Access to Data Base (coming 2017)
AADE DPP 2016-2017 Focus Areas:

- Medicare Reimbursement- Preparing MDPP Sites
- Cost Analysis across our network
- Guidance to programs to maintain CDC Recognition and reimbursement to the highest capacity
- Performance Management Network (Data Base)
- Exploring Online/Virtual DPP Options for AADE DPP Sites
- Work with State Health Departments on Availability of CDC Recognized Programs
- Expand our DPP service offerings
- Expand our AADE DPP Network
Current AADE DPP Service Offerings:

- **Building Your Diabetes Prevention Program Workshop**
- **AADE DPP Lifestyle Coach Training** (CDC Approved)

Preparing individuals and DSME programs to serve covered lives and receive DPRP recognition via education, webinars, tools and resources for both Members and Non-members (2017)
For more information:

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http://www.diabeteseducator.org/dpp
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