



PUBLIC HEALTH

**ALWAYS WORKING FOR A SAFER AND
HEALTHIER WASHINGTON**

The National Diabetes Prevention Program in
Washington State
March 2012

Session Objectives

1. Overview of pre-diabetes.
2. Describe the Diabetes Prevention Program (DPP).
3. Eligibility for the DPP.
4. Describe the Diabetes Prevention Recognition Program (DPRP).
5. Describe next steps for starting DPP in your organization.

What is pre-diabetes?

- Blood sugar level is higher than normal
- People with pre-diabetes have an increased risk of developing costly chronic diseases such as type 2 diabetes, heart disease, and stroke.

Pre-Diabetes in WA

- 1 in 3 Washington adults has pre-diabetes.
- The percentage of adults with diabetes has increased 71 percent since 1993 and continues to rise.
- Risk factors for diabetes, such as obesity are also on the rise.

Diagnosis Criteria for Pre-Diabetes

- Impaired Fasting Glucose (IFG)
 - 100 mg/dl -125 mg/dl
- Impaired Glucose Tolerance (IGT)
 - Post-load glucose 140 mg/dl -199 mg/dl
- High Risk A1C
 - 5.7% -6.4%

ADA Recommendations for Identifying Persons with Pre-diabetes

- Testing should be considered in all adults who are overweight (BMI ≥ 25) and have ***additional risk factors***:
 - Physical inactivity
 - First-degree relative with diabetes
 - Members of a high-risk ethnic population (e.g., African American, Latino, Native American, Asian American, Pacific Islander)
 - Women who delivered a baby weighing >9 lb or were diagnosed with GDM
 - Hypertension ($\geq 140/90$ mmHg or on meds)
 - HDL cholesterol level <35 mg/dl and/or triglyceride level >250 mg/dl

ADA Recommendations for Identifying Persons with Pre-diabetes

- Women with polycystic ovary syndrome
- Other clinical conditions associated with insulin resistance (acanthosis nigricans)
- History of CVD
- A1C \geq 5.7%, IGT, or IFG on previous testing
- If none of the above, begin blood screening at age 45.
- If results are normal, repeat screening at least every 3 years.

ADA. Standards of Medical Care in Diabetes -2010. Diabetes Care, January 2010;33(Suppl. 1): S13 (Table 4).

Can we prevent or delay type 2 diabetes?

- **Diabetes Prevention Program: a resounding YES!**
 - NIH study that showed 58% reduction in progression to type 2 diabetes **among those with pre-diabetes** in lifestyle program
 - 5-7% weight loss, 150 minutes moderate physical activity per week
 - Effective for all adult age groups and ethnic/racial groups
 - Sustained prevention for up to 10 years post-study

Standards of Care for Persons with Pre-Diabetes, based on the DPP

- Refer to program for weight loss of 5–10% and increase physical activity to ≥ 150 min/week
- Based on potential cost savings of diabetes prevention, such counseling should be covered by third-party payers.
- In addition to lifestyle programs, metformin may be considered in those who are at very high risk for developing diabetes
- Annual monitoring for the development of diabetes in those with pre-diabetes.

Billing: ICD-9 and CPT Codes

Common ICD-9 Codes for Diabetes Screening

V77.1	Diabetes Screening
790.21	Impaired Fasting Glucose
790.22	Impaired Glucose Tolerance
278.00	Obesity
278.02	Overweight

CPT Codes for Diabetes Screening

CPT 82947	Fasting Plasma Glucose Test
CPT 82950	Post-meal Glucose
CPT 82951	Oral Glucose Tolerance Test
CPT 83036	Hemoglobin A1c Test

Why we need to prevent Diabetes

- The vast majority of new cases of type 2 diabetes in the US today are preventable.
- People with diabetes have two times the medical costs than those without diabetes.

Treating 100 people with pre-diabetes

Over three years:

- Prevents 15 cases of type 2 diabetes over three years.
- Avoids \$91,400 in healthcare costs.
- Reduces known risk factors for heart disease including high blood pressure and high cholesterol.

What we can do to prevent type 2 diabetes

- Screen early for pre-diabetes.
- Provide positive messages to persons with pre-diabetes
- Refer people with pre-diabetes to a Diabetes Prevention Program

Pre-diabetes messages for patients

- Diabetes prevention is possible, powerful, proven
- Know your risk: get tested
- Take action if you have pre-diabetes
 - Join a NDPP or YDPP other lifestyle program
 - See your local diabetes educator
- Type 2 diabetes is a serious disease, but it can be delayed or prevented. Take steps now to lower your risk of getting diabetes.

DPP Eligibility Criteria

- Age \geq 18, BMI \geq 24 kg/m², (22 if Asian)
- FPG 100-125 mg/dl
- History of GDM
- 2 hour OGTT 140-199 mg/dl
- A1c 5.7 – 6.4%
- Score of 9 or higher on risk test
- Half of participants must have “blood based” confirmation of pre-diabetes

Closer look at the DPP

- 16 weekly group class sessions (CORE)
- Post-core monthly 1 hour sessions
- Goals: 5-7% weight loss and 150 minutes physical activity per week
 - Fat gram goal ~25% of calories from fat
 - Calorie intake goal ~1200-1800 kcal/day
- Led by trained facilitators
- Focus on healthy eating, increased physical activity and behavior change

YMCA DPP sites in WA

- YMCA of Greater Seattle
- YMCA of the Inland Northwest (Spokane area)
- YMCA of Pierce and Kitsap Counties
- Wenatchee Valley YMCA

New DPP sites in Washington

- REACH program (Seattle area)
- Global 2 Local (Tukwila)
- Group Health Cooperative

Diabetes Prevention Recognition Program (DPRP)

- Newly launched by CDC
- Free recognition process
- Why apply?
 - Reimbursement more likely
 - Technical assistance
 - Inclusion in CDC registry of DPP's
 - Demonstrate organizational commitment to primary prevention of type 2 diabetes

How to get started with DPP

- Visit the CDC DPP website:

<http://www.cdc.gov/diabetes/prevention/index.htm>

- Review the DPRP information:

<http://www.cdc.gov/diabetes/prevention/getready.htm>

- Discuss with your organization and decide if you want to participate in training



Contacts

If you are interested in pursuing DPP and/or DPRP:

Jeanne Harmon, RD, MBA, CDE

Jeanne.harmon@doh.wa.gov

360 236 3750

PUBLIC HEALTH
ALWAYS WORKING FOR A SAFER AND
HEALTHIER WASHINGTON