



Health Impact Statement

Assist Healthcare Organizations in Implementing Systems to Identify People with Prediabetes and Refer Them to CDC-recognized Lifestyle Change Programs

Problem

Prediabetes is a serious health condition that, if left untreated, can lead to type 2 diabetes. In 2017, 7.8% of adult Rhode Islanders said a doctor or other health professional had ever told them that they had prediabetes or borderline diabetes.¹ Approximately 96 million American adults—more than 1 in 3—have prediabetes, and of those with prediabetes, more than 80% do not know they have the condition.² This means that an estimated 280,000 Rhode Islanders may have prediabetes and not know it. Rhode Island data show people living below 400% of the federal poverty level (FPL), as well as Black and Hispanic adults, are more likely to have risk factors that increase their risks of prediabetes and type 2 diabetes.³ Beginning in 2018, the Rhode Island Diabetes, Heart Disease, and Stroke Program (RIDHDS) at the Rhode Island Department of Health (RIDOH) began implementing new strategies to address the high burden of prediabetes in the state. Lifestyle changes that help control blood sugar can help prevent prediabetes from progressing to type 2 diabetes, since prediabetes involves having blood sugar levels that are higher than normal but not high enough yet to be diagnosed as type 2 diabetes. The National Diabetes Prevention Program (DPP) is based on the Centers for Disease Control and Prevention (CDC) recognized lifestyle change program, a research-based program focusing on healthy eating and physical activity which showed that people with prediabetes who take part in a structured lifestyle change program can reduce their risk of developing type 2 diabetes by 58% (71% for people ages 60 years and older).⁴ To achieve equitable prevention of prediabetes and increase the use of the National DPP, RIDHDS began assisting healthcare organizations with developing systems to identify people with prediabetes and refer them to the National DPP.

Intervention

RIDHDS's response efforts focused on the following two outcomes: **1.** Increase access to and coverage for the National DPP for people with prediabetes; and **2.** Increase community clinical links that facilitate referrals and provide support to enroll and retain participants in the National DPP. RIDHDS focused on partnering with Rhode Island's Federally Qualified Health Centers and free clinics since the patient populations of these practices are disproportionately people of color and people with low incomes. In addition, these practices are primarily based in health equity zones. Nearly all health equity zones have very high rates of families living below 400% FPL. As a result, RIDHDS anticipated that targeting resources in those areas was the most effective way to achieve equitable prediabetes prevention. Through funding provided by CDC, RIDHDS began the following activities:

- Increase the number of National DPP classes that are offered in communities, with a focus on the health equity zones;
- Implement and maintain the Community Health Network Referral System to facilitate referrals to, and enrollment of participants in, the National DPP;
- Contract with healthcare organizations that are part of the Care+Community+Equity initiative to support the following: **1.** Electronic health record reporting; **2.** Screening/testing efforts within the practice to identify and diagnose patients with prediabetes; **3.** Referrals of eligible patients to National DPP via the Community Health Network; and **4.** Quality Improvement coaching on the use of data to drive improved patient outcomes in diabetes prevention;
- Contract with Care Transformation Collaborative of Rhode Island and Advocates for Human Potential to provide technical assistance to Care+Community+Equity (CCE) sites to develop practice protocols for utilizing the electronic health record to screen, diagnose, and refer patients with prediabetes to National DPP via the Community Health Network;
- Work with healthcare organizations and community organizations to become recognized Diabetes Prevention Programs and work toward securing Medicare reimbursement;
- Conduct academic detailing to healthcare organizations across the state to encourage use of the Community Health Network;
- Collaborate with RIDOH's Women's Cancer Screening Program, Colorectal Cancer Screening Program, and the Wise Women Program to increase diabetes screening efforts at the Rhode Island Free Clinic;
- Work with the Executive Office of Health and Human Services to pilot the build of a prediabetes measure (based on CDC metrics) in the Quality Reporting System, which will support referrals into the National DPP by the CCE sites; and
- Participate in the National Association of Chronic Disease Directors funded Medicaid Beneficiary Enrollment Pilot Program to refine healthcare workflows that support identifying and sending batch referrals of eligible Medicaid beneficiaries to the Community Health Network and recognized Diabetes Prevention Programs

Health Impact

In five years, RIDHDS and its partners made substantial progress toward identifying individuals with prediabetes and referring them to the National DPP.

During the last five years, there was no nationally standardized prediabetes clinical quality measure available that CCE sites could use when searching through their electronic health records. However, through the work of CCE partners, measures were developed that allowed sites to track prediabetes prevalence among their patients more easily and reliably. By 2023, 12 healthcare sites across Rhode Island had systems to identify people with prediabetes and refer them to lifestyle change programs. In total, these sites serve around 53,677 patients, many of whom live on low incomes.

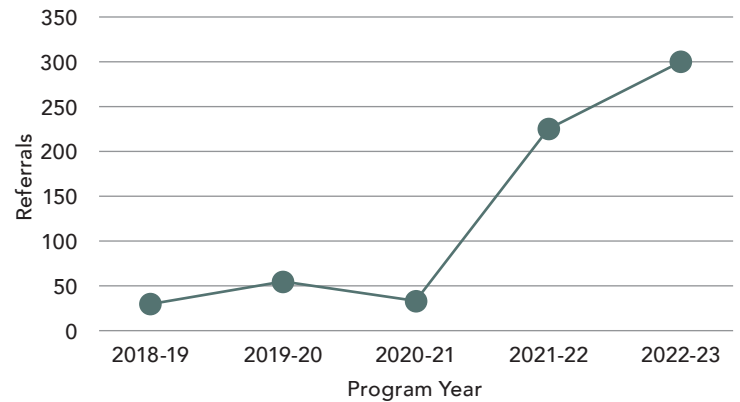
Referrals to the National DPP decreased during the COVID-19 pandemic, as fewer patients were assessed for prediabetes due to difficulties scheduling in-person visits with their healthcare team. One CCE healthcare organization created an innovative solution to this problem by offering prediabetes screening as part of their COVID-19 clinic services. In addition, work completed through the Medicaid Beneficiary Enrollment Pilot resulted in the successful deployment of a system to screen, test, and refer eligible Medicaid beneficiaries to the National DPP. The healthcare site using this system also hired two Community Health Workers (CHWs) to conduct outreach to Medicaid beneficiaries and help them enroll in National DPP classes. The CHWs also provided additional care management to Medicaid beneficiaries. As a result of these efforts, referrals to the National DPP continued despite the COVID-19 pandemic, and referrals rapidly increased as the pandemic slowed (Figure 1).

The low availability of National DPP classes during the COVID-19 pandemic was a barrier to increasing the number of referrals during that period. To address this barrier, RIDHDS provided technical assistance to the partnered National DPP delivery sites to help them set up virtual National DPP classes. As a result, DPP classes continued to be offered throughout the pandemic, and the annual number of classes increased from 4 in the first year to 34 in the final year, for a total of 60 classes over the course of five years.

Moving forward, RIDHDS will continue to partner with organizations around the state to maintain and expand systems of identifying people with prediabetes and refer them to available lifestyle change programs, such as the National DPP.

Figure 1 - Referrals to the National DPP have increased in RI over the last five years

Source: RIDHDS program records



References

- ¹ State of Rhode Island, Department of Health. Rhode Island Behavioral Risk Factor Surveillance System [2017].
- ² Centers for Disease Control and Prevention. Prediabetes – Your Chance to Prevent Type 2 Diabetes. Accessed from www.cdc.gov/diabetes/basics/prediabetes.html. Reviewed September 2022.
- ³ State of Rhode Island, Department of Health. Rhode Island Behavioral Risk Factor Surveillance System [2015, 2016].
- ⁴ Centers for Disease Control and Prevention. About the National DPP. Accessed from www.cdc.gov/diabetes/prevention/about.html. Reviewed September 2022.

