



# OKLAHOMA

The **Preventive Health and Health Services (PHHS) Block Grant** provides funding for health problems in Oklahoma that range from diabetes to uterine cervical cancer deaths. PHHS Block Grant dollars provides approximately 75% of the funds used by Oklahoma's five public health programs.

PHHS Block Grant funds allow Oklahoma to use dollars **where** we need them, **when** we need them to protect the public's health. Oklahoma focuses the majority of its PHHS Block Grant funds in the areas of reduction of heart disease deaths, overall cancer deaths, and prevalence of diabetes; statewide health communication; and rape prevention. Programs that serve our state's unique health needs through the PHHS Block Grant include the following:



## **Coronary Heart Disease—Cardiovascular Health Program**

PHHS Block Grant funds are used to support OKHealth, a state worksite disease and risk management program developed to change employee health status by addressing those who have or are at risk for either heart disease or diabetes. This program is unique in its approach and is designed as a worksite intervention utilizing e-health technology and coaching. The purpose of the program is to manage the diseases in order to prevent further complications, improve quality of life, and reduce costs. The program has advanced from a pilot project to a recognized health benefit for all state employees. The results of this pilot project from 2003–2005 demonstrated improved health outcomes by reducing the risk of cardiovascular disease by 10.8% and diabetes by 11%. The return on the investment was \$2.30 for every \$1.00 invested.



## **Diabetes—Diabetes Prevention and Control**

PHHS Block Grant funds are used to conduct early detection of diabetes activities statewide with high risk individuals; conduct diabetes self-management training for persons with all types of diabetes; and link persons who are without insurance and who meet certain poverty guidelines to appropriate prescription Web sites and resources for low cost supplies and medications. During 2005, early detection and disease monitoring activities were conducted among 20,000 high risk individuals.



## **Uterine Cervical Cancer Deaths—Comprehensive Cancer Prevention and Control**

PHHS Block Grant funds are used to support the cervical cancer prevention program by providing cytopathology and a regional health system for evaluation and treatment of abnormal cervical screenings. Through the laboratory service, 10,000 women had liquid based smears read. In 2005, 400 women with no other medical or payment resources were provided follow-up exams through the regional health system. The services are provided to offer women better access and acceptability. This program has demonstrated the need for Oklahoma to fund and implement the National Breast and Cervical Cancer Treatment Act.



## **Rape or Attempted Rape—Rape Prevention Counseling**

PHHS Block Grant funds are used to provide victim services to rape victims. In 2005, five domestic violence and sexual assault shelters were funded and each has provided more than 1,000 unduplicated women services.

## Oklahoma State Department of Health

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## Block Grant Improving the Health and Benefits of Oklahoma State Employees

### Issue:

Oklahomans face a dire health threat, especially in regards to diabetes and cardiovascular disease. Of all states, Oklahoma ranks:

- Worst in the nation for cardiovascular disease deaths;
- Second worst state for heart disease deaths; and
- Eighth worst for stroke deaths and diabetes deaths as of 2002.

These grim statistics cost Oklahomans in hospitalizations alone more than \$2.5 billion dollars for cardiovascular diseases and \$600 million for diabetes annually. And, Oklahoma's largest employer, the state government, bears the lionshare of this cost. Each year, treating cardiovascular disease exceeds \$50.5 million, and treating diabetes costs \$13.3 million among state employees.

### Intervention:

To address these skyrocketing statistics, the OKHealth Project was launched to reduce diabetes and cardiovascular disease for state employees. From 2002–2006, approximately 970 state employees participated in this innovative program created by the Oklahoma Employees Benefit Council, the Oklahoma State Department of Health, and other state agency partners. Thanks in part to Preventive Health and Health Services Block Grant funds, this project was able to—

- Utilize a Web-based program geared toward cardiovascular disease and diabetes to recruit, enroll, and inform participants;
- Use mentors and a Web-based self-management program to help participants set and achieve goals related to risk reduction and disease management;
- Communicate regularly with participants through the Web, email, or phone based on participants' schedules and needs;
- Educate, monitor, and support participants in their process of changing their lifestyles and health status through study modules, self-testing tools, and guided activities;
- Provide individualized and structured approaches to the participant in reaching their goals eliminating barriers;
- Communicate clinical and health status to each participant's physician;
- Improve standards of care by communicating with state physicians; and
- Document the health status progress of each participant.



### Impact:

The results from the OKHealth Project were so impressive that the state's employee benefits package has been revised and improved. As of January 2006, employees can now register for prevention and chronic disease care management. This is due to the following persuasive results:

- Participants lost an average of 8 pounds.
- Total cholesterol was reduced by 33 points (with LDL reduced by 39 points and HDL raised by 3 points).
- Triglycerides were decreased by 58 points.
- Average systolic blood pressure and diastolic blood pressure.
- Blood glucose averages was reduced by 22 mg/dl.
- Health claims were reduced by 14.3%.

Most importantly, participants like the program and are adhering to it. "This program is just what I needed to teach me strategies for long term better health and living," said participant Lesli Blazer.

Another participant, Carl Evans said, "I'm a bottom line person. Bottom line is I'm losing weight and inches. My blood pressure is better and near normal. My cholesterol levels have improved. I am eating healthier for the first time in my life. I am exercising. Through the program, my mentor, my physician and I developed a plan that was uniquely mine. That was important. I was not expected to make sudden changes but could take a slower approach and familiarize myself with the idea of change. I feel that my life is longer and better due to the support of my mentor and this program."

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