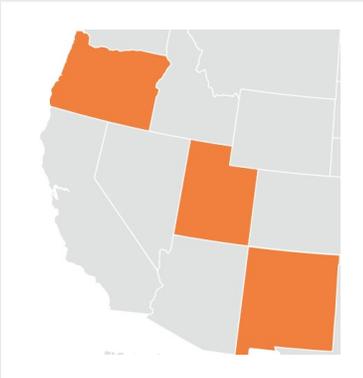


Comagine | RECIPIENT PROFILE YEAR 1



AWARD
\$1,347,648

AFFILIATE SITES

- Bear River Health Department
- Intermountain Healthcare
- New Mexico State University Cooperative Extension Service State Office
- Oregon Wellness Network
- Paiute Indian Tribe of Utah

- Sky Lakes Medical Center
- TriCounty Health Department

PARTNERS

- Familias en Acción
- New Mexico Coalition for Healthcare Value
- Oregon Medical Association
- Oregon, New Mexico, and Utah Departments of Health
- Solera Integrated Health Network



Targeted States

New Mexico (4 counties)
Oregon (9 counties)
Utah (5 counties)



Priority Populations

American Indians
Hispanics and Latinos
Medicare beneficiaries



Targeted Setting

Populations living in underserved counties in three states.

Scaling and Sustaining the National Diabetes Prevention Program (National DPP)

The National DPP supports a structured, year-long lifestyle change program (LCP) that is offered in-person and online to prevent or delay the onset of type 2 diabetes among those at high risk. The DP17-1705 program is designed to build the infrastructure in underserved areas to deliver the National DPP LCP to general and priority populations, effectively closing the enrollment gap so that more participants with prediabetes in underserved areas successfully complete the program, achieve 5-7% weight loss, and significantly reduce their risk for type 2 diabetes.

SELECTED STRATEGIES AND ACTIVITIES

INCREASE THE AVAILABILITY OF CDC-RECOGNIZED ORGANIZATIONS

- Identify affiliate sites, establish enrollment targets, and establish timelines to apply for CDC recognition.
- Convene an advisory committee to support quality improvement and alignment with local needs and policy.
- Promote and manage a help desk to support LCPs and stakeholders.

INCREASE CLINICIAN SCREENING, DETECTION, AND REFERRAL TO CDC-RECOGNIZED ORGANIZATIONS

- Provide one-on-one technical assistance (TA) through state-based practice facilitators.
- Train affiliate sites on clinician referrals and two-way communication.

INCREASE AWARENESS OF PREDIABETES AND ENROLLMENT IN THE LCP

- Implement marketing plan based on target population needs assessment.
- Develop culture-specific talking points and presentations and train local affiliates on reaching priority populations.
- Conduct one screening and enrollment event per state.

INCREASE RETENTION RATES FOR PARTICIPANTS IN THE LCP

- Conduct advanced lifestyle coach training on diverse participants.
- Work with health systems, health plans, and affiliate sites to provide participant incentives for enrollment.

INCREASE HEALTH BENEFIT COVERAGE FOR PARTICIPATION IN THE LCP

- Coordinate with state health departments to identify opportunities to advance coverage.
- Provide TA to affiliate sites on establishing systems for billing and payment.

SUCCESS STORIES

One challenge to new affiliates is establishing and maintaining a process for data collection and reporting needed for CDC recognition and cooperative agreement reporting. The challenge was addressed by first assessing strengths and limitations of each affiliate in collecting the Diabetes Prevention Recognition Program (DPRP) data.

To meet affiliate needs, Comagine provided data collection tools and specifications, and documents and TA tailored to differing levels of data sophistication. Various types of TA were provided, including provision of tools, training on data collection and reporting, internal quality control (IQC) of monthly DPRP data submissions, and discussions regarding these submissions. As part of the process, a secure data submission portal was developed with an accompanying survey making all types of data submissions trackable, such as DPRP data and the Performance Measure tool.



Comagine’s goal was to ensure affiliates at all points in the continuum toward CDC recognition had the tools needed to define and collect data with a reduced risk of errors. Five affiliates submitted data monthly in year one.

Five affiliates submitted monthly data in year one. Comagine accommodated differing levels of knowledge and experience within its process. For example, Comagine developed a tool with drop-down menus that align with the DPRP standards for a new affiliate to use. For existing CDC-recognized organizations that became 1705 affiliates to expand into underserved counties, Comagine created a method for filtering their data for 1705 counties of focus. Most of the organizations were already using the state sponsored system to collect and report their DPRP data (e.g., Compass). IQC on the DPRP is provided as requested to all affiliates. The infrastructure built in year one for data collection and reporting increased buy-in from affiliates and set Comagine up for success in reporting going forward. Progress toward program objectives is evidenced by the completeness of year one data and capacity to track methods of funding, referrals, priority populations, and underserved counties of residence.

PERFORMANCE MEASURE HIGHLIGHTS



Reaching Underserved Populations and Areas



Health Care System Referrals



Agreements to Reimburse for Participation

3 new organizations added to the CDC recognition program (DPRP) and offering the National DPP in underserved areas.

2 health care systems or providers implementing other* referral systems.

1 public payer has established an agreement to provide reimbursement for the cost of participants in underserved areas to enroll in the National DPP LCP.

124 people enrolled in the National DPP LCP in underserved areas.

1 curriculum tool tailored to the needs of underserved populations.

2 advanced skills trainings held for lifestyle coaches to help retain priority populations.

*Referral systems other than bidirectional e-referral systems (i.e., bidirectional referrals with any modality or unidirectional referrals from a health care provider regardless of modality).

For more information on the DP17-1705 Scaling and Sustaining the National Diabetes Prevention Program please visit:
<https://www.cdc.gov/diabetes/programs/stateandlocal/funded-programs/1705.html>

*Year 1 analysis of data submitted by recipients.
LAST UPDATED 8/27/2019

