

# Making the Most of Return on Investment Calculators

for the National Diabetes Prevention Program Lifestyle Change Program



Return on investment calculators can help **determine the value of adding the National Diabetes DPP lifestyle change program as a covered benefit for employees**

Employers can use workforce data to estimate return on investment (ROI) from offering the National Diabetes Prevention Program (National DPP) lifestyle change program as a covered benefit for their employees. Centers for Disease Control and Prevention (CDC) and American Medical Association (AMA) have both developed cost calculator tools to help estimate potential ROI and other cost and health outcome measures associated with offering the National DPP lifestyle change program to employees at risk of developing type 2 diabetes. Using data from one or both of these tools can show how different variables can affect the ROI of the benefit.

## CDC Diabetes Prevention Impact Toolkit

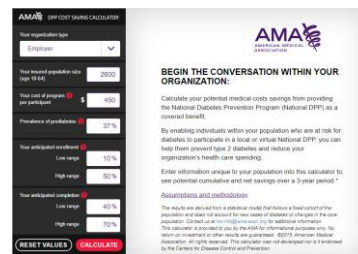
Assess the likely cost-effectiveness or cost-savings of covering the National DPP lifestyle change program. Default values are based on data from relevant research, program implementations, state and industry averages, and expert judgment. Employers can adjust values based on employee demographics, expected adherence, program cost, and more.



<https://nccd.cdc.gov/Toolkit/DiabetesImpact>

## AMA Diabetes Prevention Cost Saving Calculator

Estimate potential medical cost savings from offering the National DPP lifestyle change program as a covered benefit. Calculations are based on an analysis of commercial claims data of individuals with prediabetes and the potential savings from preventing or delaying the onset of type 2 diabetes.



<https://ama-roi-calculator.appspot.com/>

## A Guide to Calculator Fields

This table provides a side by side comparison of the fields included in each of the CDC and AMA calculators.

Category	CDC Diabetes Prevention Impact Toolkit Fields	AMA Cost Saving Calculator Fields	Context and Guidance	Key Differences
Population characteristics	Organization type (state, employer, insurer)	Organization type (employer, insurer, health care system, public health, other)	Both tools include default values. When possible, input true numbers from an employer or from state or local reliable statistics to get the most relevant results. The AMA recommends using the default prediabetes prevalence value (37%) unless you have claims data or other estimates specifically from the employer. The 37% default is based on national fasting glucose or A1C data for the general population.	The AMA Cost Saving Calculator has more built-in assumptions around population, however it asks for prevalence of prediabetes. The CDC Diabetes Prevention Impact Toolkit asks for demographic breakdowns. It uses these breakdowns to auto-estimate prediabetes prevalence.
	Number of employees by age	Insured population size (age 18 – 64)		
	Number of employees by sex	Prevalence of prediabetes		
	Number of employees by race/ethnicity			
	Number of employees by body weight			
Risk group to participate in program	Persons with prediabetes	<i>No fields in this category</i>	Increase ROI in the CDC Diabetes Prevention Impact Toolkit by focusing on persons with a high-risk of developing prediabetes. Focusing on people with prediabetes and people at risk for developing type 2 diabetes yields a lower ROI.	The AMA Cost Saving Calculator does not include any fields to account for risk groups.  The CDC Diabetes Prevention Impact Toolkit allows for changing risk groups as part of ROI calculations.
	Persons with prediabetes and others at risk for type 2 diabetes			
	Persons with high-risk of developing prediabetes			
Screening	No new screenings for prediabetes	<i>No fields in this category</i>	The eligible population can be expanded by screening some or all persons without a recent screening.	The AMA Cost Saving Calculator does not include any fields about screening. The cost for screening will need to be considered by the employer. If the employer already covers other screenings, they may be able to add prediabetes screenings for little or no cost.  The CDC Diabetes Prevention Impact Toolkit includes a field for new prediabetes screenings as part of ROI calculations.
	Screen persons for prediabetes if they have not been previously screened			

Category	CDC Diabetes Prevention Impact Toolkit Fields	AMA Cost Saving Calculator Fields	Context and Guidance	Key Differences
Program enrollment and participation	Percentage of eligible population previously screened for prediabetes	Anticipated enrollment (low and high range)	The AMA Cost Saving Calculator's default numbers for completion are 40% (low) to 70% (high). Increase the low end of completion if the National DPP lifestyle change program provider has had success in this area.	The AMA Cost Saving Calculator and the CDC Diabetes Impact Toolkit define enrollment as eligible participants attending at least one session. Both calculators define completion as the number of adults who completed 12+ sessions (9 during the first 6 months and 3 during the second 6 months) of the year-long lifestyle change program as a percentage of the eligible enrollees.
	Percentage of eligible, screened population who participate in the intervention	Anticipated completion (low and high range)		
Program costs	Program cost per person	Cost of program per participant	The default cost for programs is an estimate. For more accurate calculations, contact a local CDC-recognized organization to ask what they charge for the program and what that cost includes (administrative fees, incentives, marketing, screening, etc.).	The AMA Cost Saving Calculator's default program cost is \$450 per participant.  The CDC Diabetes Prevention Impact Toolkit's default program cost is \$417 per participant.
Other	Annual diabetes-attributable medical costs per person	<i>No fields in this category</i>	Productivity costs include days missed per year due to diabetes and daily earnings for employees.	The AMA Cost Saving Calculator does not include any additional fields.  The CDC Diabetes Prevention Impact Toolkit includes some secondary benefits and value adds that can impact the ROI of a program.
	Productivity costs			
	Maximum program budget			
	Intervention weight loss and regain schedule			

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