National Pharmacy Diabetes Prevention Network

American Pharmacists Association Foundation Umbrella Hub Arrangement Spotlight

May 2024



AT A GLANCE:

This organization spotlight describes the efforts by the American Pharmacists Association (APhA) Foundation to expand the National **Diabetes Prevention Program (National** DPP) by operationalizing a national umbrella hub arrangement (UHA). APhA Foundation partners will pharmacies throughout the United States to deliver the National DPP lifestyle change program. Through their connection to community members and familiarity with the health care system, pharmacists are ideal partners to educate and deliver the National DPP lifestyle change program.

Introduction to the APhA Foundation

The American Pharmacists Association (APhA) Foundation is the non-profit arm of <u>APhA</u>, an organization representing pharmacists nationwide. The APhA Foundation serves as a trusted source of research demonstrating how pharmacists can improve health care by inspiring philanthropy, research, and innovation that advances pharmacists' patient care services. APhA Foundation is passionate about connecting people to a pharmacist who can empower them to become more successful in managing their health. Pharmacists are available in nearly every community across the United States and are therefore ideally positioned for integration into health care teams that help prevent and manage chronic diseases such as diabetes, high blood pressure, and high cholesterol. Current APhA Foundation research includes assessment of pharmacists' roles in:

- Diabetes prevention and care
- Chronic disease prevention
- Health care practice innovation
- Patient-centered self-management solutions
- Team-based care

The APhA Foundation has reached 5,200 patients, 93.6% of whom became healthier in a measurable way (e.g., improved blood sugar, blood pressure, cholesterol, weight loss) because of participation in the APhA Foundation projects. Additionally, APhA Foundation's research has <u>demonstrated</u> lowered health care costs, enhanced patient satisfaction, increased medication adherence, and improved risk identification and referral. Information on

Figure 1. APhA Foundation "Perspectives on 25 Years of Research and Innovation"



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APhA Foundation's work innovating pharmacy roles over the last 25 years is described in APhA Foundation's presentation, "<u>Perspectives on 25 Years</u> <u>of Research and Innovation</u>" as shown in Figure 1.

APhA Foundation's diabetes work **Project IMPACT: Diabetes**, was launched in 2010, in partnership with <u>Bristol-Myers Squibb Foundation's</u> <u>Together on Diabetes</u> with the purpose of improving the health of populations with limited access to quality health care by expanding diabetes selfmanagement. Project IMPACT: Diabetes was a collaboration between health practitioners across the continuum and <u>resulted</u> in lowered A1c and total cholesterol levels.



The National Diabetes Prevention Program (National DPP) lifestyle change program is well aligned with APhA Foundation's other diabetes work, shown in the grey box to the right. APhA Foundation also engaged in National DPP work as a recipient of CDC's <u>DP17-1705</u> grant, which began in 2017. This six-year grant had a goal of scaling the National DPP lifestyle change program in underserved areas and through this work APhA Foundation chose to develop a network of pharmacies across the U.S. with the ability to educate, screen, test, refer, and deliver the program to eligible individuals.

To further increase the scale of pharmacies involvement in the National DPP lifestyle change program, APhA Foundation chose to operationalize an umbrella hub arrangement (UHA), a business model that connects CDCrecognized organizations with health care payment systems to pursue sustainable reimbursement for the National DPP lifestyle change program and other services. In the UHA, APhA Foundation serves as the umbrella hub organization (UHO), which provides claims management, billing, and other administrative activities on behalf of subsidiary pharmacies. The APhA Foundation UHA was approved by CDC's Diabetes Prevention Recognition Program (DPRP) in July 2022 and was approved by CMS as a Medicare Diabetes Prevention Program (MDPP) supplier, the version of the National Diabetes Prevention Program designed for Medicare beneficiaries, in 2023.

APhA Foundation UHA: Pharmacies and the National DPP

Several factors preceded APhA Foundation's decision to become a UHO. APhA Foundation participated in a CDC funded, NACDD led National DPP community of practice series to learn more about the UHA development and how a UHA could help to resolve barriers which prevented pharmacy implementation of the National DPP, including:

- Education for pharmacy staff on the National DPP lifestyle change program, program evidence, benefits, and value
- Capacity to develop a data and claims submission
 platform
- Understanding of coverage mechanisms for the program, particularly MDPP coverage

APhA Foundation Diabetes Research

In addition to **Project IMPACT: Diabetes**, APhA is or was previously actively involved in the following projects:

- DIABETES TEN CITY CHALLENGE
- PATIENT SELF-MANAGEMENT PROGRAM FOR DIABETES
- THE ASHEVILLE PROJECT
- OVERCOMING THERAPEUTIC INERTIA
- PROJECT IMPACT: CONTINUOUS GLUCOSE MONITORING ACCESS

Information on each of these projects is available on the <u>APhA Foundation Diabetes webpage</u>.

- Resources and funding to train Lifestyle Coaches or deliver the National DPP lifestyle change program
- Creating a sustainable reimbursement pathway
- Providing a physical space for in-person delivery of the National DPP lifestyle change program
- Institutional support among independent community pharmacies

To address one of the main challenges expressed by pharmacies, data collection and submission, APhA Foundation used their learnings to develop an in-house data collection platform (ImpactDiabetes.org) to collect and submit DPRP required National DPP participant data. Some of their partner pharmacies were using Excel spreadsheets or other manual processes for collecting data, therefore, development of a user-friendly data platform provided a strong value proposition for individual pharmacies to participate as delivery sites in the UHA. The APhA Foundation provides training in access and use of the platform for all its subsidiaries.

Another need was the ability to submit claims and obtain reimbursement for the MDPP. Lack of national provider-status for pharmacists continues to present a barrier to billing for important services provided within pharmacists' scope in their daily practice. However, Medicare coverage of the CDCapproved MDPP nationally, allows any approved MDPP supplier to bill for delivery of the MDPP and has minimized traditional billing barriers that might otherwise be





encountered with pharmacy personnel providing and billing for a patient service (rather than a medication). Organizations participating in the APhA Foundation UHA utilize <u>Welld Health</u>, a technology vendor contracted with the UHA to provide claims submission services. In addition to claims submission, Welld Health also provides technical assistance to APhA Foundation to ensure reimbursement through creating and submitting clean, approved payer claims. APhA Foundation charges subsidiary organizations a per participant administrative fee plus pass-through claims processing fees to cover the services provided.

Value of Pharmacists in Supporting the National DPP

Pharmacists can play a key role in scaling the National DPP lifestyle change program by promoting awareness of prediabetes, referring patients to the program, and having their pharmacy become a CDC-recognized organization, allowing pharmacists to deliver the program themselves. Through their work, pharmacists have frequent patient encounters. For some populations, such as Medicare beneficiaries, pharmacists often have significantly more encounters with patients than primary care providers. This was particularly true during the COVID-19 pandemic, when many traditional health care services were unavailable or over capacity, yet pharmacy services remained available. Pharmacists also have access to communities where clinical or community resources may be limited, as around 90 percent of the population in the US lives within 5 miles of a pharmacy. Additionally, their experience in the preventive care field equips them with sufficient clinical knowledge and training to engage with National DPP lifestyle change program participants, collect patient data and insurance information, and engage with the community. Pharmacists and pharmacy technicians also present as a provider type that is familiar to potential payer partners.

Pharmacies are essential to the health care system and are increasingly interested in participating in opportunities to include patient care services among pharmacy offerings.

Additional information on the value of incorporating pharmacists in the National DPP is available on the <u>Engaging Pharmacists</u> page of the Coverage Toolkit.

APhA Foundation UHA: Building a National Network

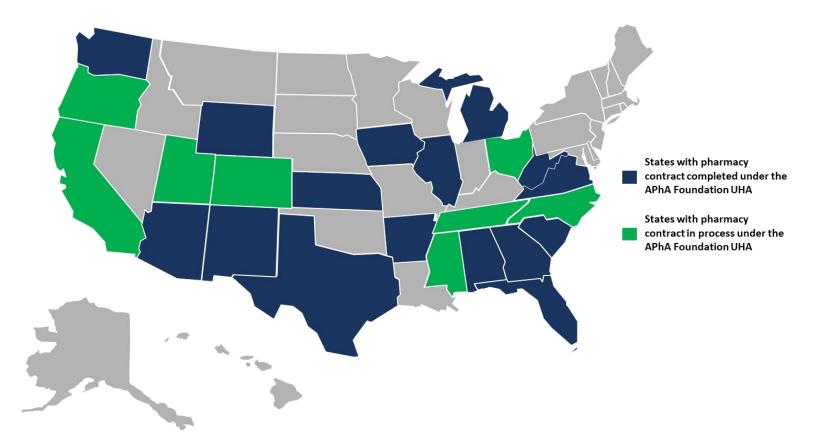
Kroger, Inc., a U.S.-based supermarket retailer with 2,300 in-house pharmacies in 34 states, served as one of APhA Foundation's key partners during their DP17-1705 work as well as being a key partner in previous Diabetes Self-Management Education and Support (DSMES) research projects. Kroger participated in the APhA Foundation UHA as their first contracted subsidiary organization. This partnership provides APhA Foundation access to a wide network of pharmacies under the Kroger company with the potential to identify, recruit, and deliver the National DPP lifestyle change program. As a national network, Kroger's pharmacies have the support of a large employer infrastructure, in addition to the support they receive through participation in the APhA Foundation's UHA. Kroger's leadership helps to determine which of their pharmacy locations has the capacity and interest to participate as a National DPP delivery organization. Currently, approximately 2,000 stores have participated in national screenings and there are 8 Kroger pharmacies which are CDCrecognized under the APhA Foundation's UHA for in-person delivery of the National DPP lifestyle change program.

In 2023, APhA Foundation onboarded <u>Health Mart Atlas, LLC</u> as their second subsidiary organization. Health Mart Atlas, LLC is a division of McKesson, one of the largest pharmacy wholesale suppliers in the U.S. Health Mart Atlas works with independent community pharmacies to assist them to provide clinical services beyond pharmaceutical supplies. Rather than selecting which of their partner pharmacies will participate in the UHA work, Health Mart Atlas primarily serves as a connection point for APhA Foundation to begin education and gauge the interest level of each independent pharmacy.





Figure 2. States with Pharmacies Contracted Under APhA Foundation's UHA



Approximately 400 of Health Mart Atlas' network pharmacies were identified as promising partners for delivery of National DPP lifestyle change program and, as of this Spotlight, 240 Health Mart Atlas-affiliated community pharmacies have expressed interest in providing the program, 138 have completed assessment questionnaires, and 71 sites have been invited to participate in the APhA Foundation's UHA. Additionally, 51 Lifestyle Coaches have either been trained or are in training across the UHA. Figure 2 shows the 24 states in which the APhA Foundation is currently working or in the process of contracting with pharmacies for delivery of the National DPP lifestyle change program under the APhA Foundation UHA. APhA Foundation's long-term goal is to support community pharmacy delivery of DPP in all 50 states.

To facilitate reimbursement on behalf of their subsidiary organizations and pharmacies the APhA Foundation must enroll and/or contract with payers in the states where the delivery sites are operating. The most geographically comprehensive coverage for the National DPP is through Medicare, with reimbursement available for all eligible MDPP beneficiaries across the nation. Because of this, APhA Foundation is focusing on the MDPP reimbursement pathway as their initial UHO focus. Additionally, identification and recruitment of eligible Medicare beneficiaries was seen as an achievable goal of pharmacists, as <u>studies</u> have shown that older adults regularly visit their pharmacies to fill prescriptions or to buy over the counter medication.

A challenge to APhA Foundation's 50-state Medicare strategy is that the UHO must enroll as an MDPP supplier on behalf of the subsidiaries in each of the states where the UHO has delivery sites to be eligible for MDPP reimbursement. Currently, the APhA Foundation UHA is an approved MDPP supplier in Utah and Virginia and has nearterm plans to submit the MDPP supplier applications in another 22 states. APhA Foundation will also submit MDPP supplier applications that will allow MDPP provision in all 50 states over the next several years. While completion of the MDPP supplier application is the same within each state, completion of 50 submissions takes time and effort.



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In addition to Medicare, APhA Foundation is also exploring the opportunity to contract with employers for referral and/or reimbursement of the National DPP lifestyle change program. They are hoping to engage with employers through existing pharmacy relationships, often as a result of pharmacies providing vaccinations and routine screenings of employees. APhA is also participating in ongoing discussions with state agencies and/or Medicaid managed care organizations (MCOs) in <u>states where the</u> <u>National DPP has some mechanism for coverage</u>. They are identifying the various processes required to enroll as a state Medicaid supplier and when it is necessary to contract with MCOs that administer Medicaid programs. Additional information about payer contracting is available on the <u>UHA Reimbursement</u> page of the Coverage Toolkit.

Referrals to the APhA Foundation UHA are primarily received from the APhA Foundation's subsidiary organization pharmacies, which identify potential participants through regular pharmacy processes such as medication pick-up, in-pharmacy clinics, or vaccination services. Examples of how pharmacists can identify, recruit, and enroll patients into the National DPP lifestyle change program are available on the <u>Engaging Pharmacists</u> page of the Coverage Toolkit and in the <u>CDC Action Guide for</u> <u>Community Pharmacists</u>. APhA Foundation also explored several social media efforts during their DP17-1705 work which resulted in significant enrollments, however, APhA Foundation noted it took significant funding which is not always available and accessible through standard program reimbursement rates.

Project Partners

The team responsible for work on developing the UHA includes:

- Benjamin Bluml, Executive Director and SVP, Research & Innovation, American Pharmacists Association Foundation
- Shannen Mendoza, Director, Operations, American Pharmacists Association Foundation
- Barry Bunting, Project Manager, American Pharmacists Association Foundation
- Nicole Scovis, Subject Matter Expert/Consultant

APhA Foundation Subsidiary Pharmacy

Remington Drug in Remington Virginia is the only pharmacy in this small community of about 600 people, located about 35 miles southwest of Washington DC. It is the site of two civil war battles near the Rappahannock River but is fighting a different kind of battle today, a battle to prevent diabetes. Remington Drug became the administrative site for the APhA UHA early in 2024 for the state of Virginia and has been successful in recruiting 2 cohorts for the National DPP lifestyle change program, primarily through at-the-counter recruitment. Remington Drug is a great example of the potential and importance for community pharmacies to become delivery sites for National DPP lifestyle change program, even in small, underserved communities.

Considerations for Sustainability

APhA Foundation will continue expanding their national network of pharmacies to deliver the National DPP lifestyle change program beyond Kroger and Health Mart Atlas affiliated pharmacies. APhA is planning to bring additional independent pharmacies, that tend to be in underserved communities, into the UHA.

Additionally, APhA Foundation continues to explore opportunities to expand their network and increase the enrollment with a focus on the priority population of older adults/Medicare beneficiaries. Initiatives include:

- Utilize and distribute available CDC marketing materials to subsidiary organizations
- Distribute a podcast series to promote prediabetes and National DPP awareness among the general public and those at risk for diabetes
- Explore opportunities to incorporate DSMES or other chronic condition screening/management programs
- Incorporate health-related social need (HRSN) screening into participant enrollment processes

For more information on UHAs and the Umbrella Hub Demonstration, visit the National Diabetes Prevention Program Coverage Toolkit <u>Umbrella Hub Arrangement</u> pages.

Special thank you to the APhA Foundation for content contribution.



The "Building the Delivery Infrastructure for the National DPP Through Strategic Partner Convenings" project is supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$1,864,281.00 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

The "Building Capacity for Public and Private Payer Coverage of the National DPP Lifestyle Change Program" project is supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$4.2 million for grant year 6 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

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