

Barriers and Responses: FAQs for Coverage of the National DPP Lifestyle Change Program

Summary

Many commercial and public payers and employers across the nation have decided to cover the evidence-based National Diabetes Prevention Program (National DPP) lifestyle change program for their members or employees. Many more are considering coverage so they too can: decrease the cost of providing health care to employees over time; improve the health of at-risk employees by preventing or delaying the onset of type 2 diabetes; and provide a wellness benefit for employee retention. The objective of this document is to address frequently asked questions about coverage for the National DPP and provide answers and links to information on the National DPP Coverage Toolkit (coveragetoolkit.org).

Frequently Asked Questions Regarding Coverage

Why can't this be a "one size fits all" program for all my members and/or employees?

- Limiting program eligibility to people with prediabetes or at high risk for type 2 diabetes will increase your return on investment by making sure those at highest risk of developing a costly disease like type 2 diabetes have access to a program proven to reduce their risk. Studies have shown that elevated blood glucose is the single most important factor influencing cost effectiveness of the program.
- The curriculum is geared specifically toward prevention or delay of type 2 diabetes for those at high-risk for developing type 2 diabetes (i.e. persons with prediabetes) and is tailored to meet their needs. People with prediabetes often have other chronic conditions or risk factors (e.g. high blood pressure, sleep apnea) and may see additional health benefits from participation in the program.
- The evidence of the risk reduction is tied to those at high risk for developing type 2 diabetes. However, you may choose to allow other

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members/employees who do not meet the eligibility requirements to participate and simply not submit their data to the Centers for Disease Control and Prevention's Diabetes Prevention Recognition Program (DPRP).

For more information on this topic, visit the following areas of the National DPP Coverage Toolkit:

- National DPP Overview can be found here: <https://coveragetoolkit.org/about-national-dpp/ndpp-overview/>
- Evidence for the program can be found here: <https://coveragetoolkit.org/about-national-dpp/evidence/>

A year is a long time; can we shorten the program?

- Behavior change takes time. The National DPP lifestyle change program is designed to instill lifelong, healthy habits by helping participants make small changes over a longer period of time. Also, the support and encouragement that comes from regular contact with a lifestyle coach and the other participants in the group over the course of a year supports behavior change.
- For behavior change to last long-term, there needs to be continued follow-up to reinforce the healthy lifestyle habits learned in the program. Otherwise, old habits can return and limit the progress that is made by National DPP lifestyle change program participants.
- The National DPP lifestyle change program is evidence-based. The program is based on the lifestyle intervention used in Diabetes Prevention Program (DPP) research study, which was a year-long intervention. Participants in the DPP reduced their risk for type 2 diabetes by 58% (71% for people over age 60). Even after 15 years, and with some weight regain, these individuals still had a 27% reduced risk of developing type 2 diabetes. These numbers can be tied to cost savings.
- Other programs of shorter duration or intensity have not shown these same results, and altering the frequency (number of sessions) or duration (length) of the National DPP lifestyle change program will cause the connection to the evidence to be lost.

For more information, visit the following areas of the National DPP Coverage Toolkit:

- National DPP Overview can be found here: <https://coveragetoolkit.org/about-national-dpp/ndpp-overview/>
- Evidence for the program can be found here: <https://coveragetoolkit.org/about-national-dpp/evidence/>

How long does it take to see a return on investment (ROI)? How do I calculate this ROI?

- Since this is a program focused on preventing or delaying onset of a chronic disease (type 2 diabetes), calculating the ROI requires a multi-faceted approach. Looking at cost avoidance and cost effectiveness, in addition to cost savings, is important when considering the program's overall benefit. Avoidance of obesity-associated conditions such as sleep apnea, high blood pressure, heart disease, and stroke are important considerations in addition to type 2 diabetes.
- The American Medical Association (AMA) estimates an increase in costs of ~\$8,000 during the first 3 years after an individual is diagnosed with diabetes, so cost avoidance is an important principle, even if type 2 diabetes onset is delayed by only a few years.
- Employers should also consider other factors such as the potential for reductions in absenteeism, improvements in productivity and lower prescription medication costs.

For more information, visit the following areas of the National DPP Coverage Toolkit:

- Cost and Value of the National DPP Lifestyle Change Program information can be found here:
<https://coveragetoolkit.org/cost-value-elements/>
- A Commercial Payers Budget Projection Template can be found here:
<https://coveragetoolkit.org/commercial-plans/commercial-plans-reimbursement/>

Engagement with my members/employees is a barrier. How can I ensure good recruitment and retention of participants?

- To start with, it is important to understand what your "health ecosystem" looks like at your company. To understand this, consider questions like:
 - Are we already encouraging healthy behaviors?
 - Do we already have options for employees/members to make healthier choices?
 - How much support, both financially and operationally, has senior leadership provided for behavior change programs?
- Simplify the process: the fewer steps there are to enrollment, the more likely a member/employee is to enroll in the program.
- Engage one or more internal champions or program experts who can help promote the program in the company.

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- Identify other screening, identification, and/or referral processes that are occurring within your organization (i.e. biometric screenings, etc.) to screen and refer to the program.
- Use [recruitment and referral strategies](#) to increase member/employee understanding of the program and increase self-referral to the program (reminder: a physician referral is not required for the National DPP lifestyle change program).
- Consider using program supports that relate to the program and the positive lifestyle changes it encourages, distributed throughout the year, to help encourage recruitment and retention of participants.
- Consider incentivizing the program with wellness points or other broader incentives that encourage a healthier population.
- As a payer, take information about this program to your health care provider network (i.e. send a letter to physicians that serve your members/employees and ask them to refer eligible individuals to the program).
- Additionally, employers need to ensure that participation in the program remains confidential. Not only does this protect private information, but also makes the program more appealing to employees.

For more information, visit the following areas of the National DPP Coverage Toolkit:

- Retention information can be found here: <https://coveragetoolkit.org/commercial-plans/commercial-plans-delivery/commercial-plans-retention/>
- Recruitment and Referral information can be found here: <https://coveragetoolkit.org/recruitment-referral-for-the-national-dpp-lifestyle-change-program/>
- Screening and Identification information can be found here: <https://coveragetoolkit.org/commercial-plans/commercial-plans-delivery/commercial-plans-identification/>

Should I do a “pilot” program to see if the National DPP lifestyle change program is a good fit for my members/employees?

- In some cases, employers and commercial plans start with a “pilot” program – or what is now commonly being referred to as a “phased-approach” – before expanding the program to their entire population.
- Some organizations have used this “phased-approach” to allow time to gather data from a subset of their larger population in the early phases of program implementation and make adaptations based on lessons learned.

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- The objective of a “phased-approach” is not to establish evidence for the program, but to learn how to deliver it efficiently and effectively. This approach may include opportunities to:
 - modify a contract with a CDC-recognized organization and
 - improve engagement processes for screening, identification, and referral of eligible members/employees.

For more information, visit the following areas of the National DPP Coverage Toolkit:

- Case for Coverage for the National DPP Lifestyle Change Program information can be found here: <https://coveragetoolkit.org/case-commercial/>
 - Information on delivery strategies for the National DPP lifestyle change program can be found here: <https://coveragetoolkit.org/commercial-plans/commercial-plans-delivery/commercial-plans-delivery-options/>

There are a lot of wellness programs out there. Why are commercial plans or employers like mine choosing to cover the National DPP lifestyle change program?

- Type 2 diabetes is a major driver of health care costs for many companies. The potential for cost avoidance or cost savings, as well as general improvements in employee health, is attractive to employers.
- Not all wellness programs are created equal. The National DPP has a large body of evidence that proves its effectiveness in preventing or delaying onset of type 2 diabetes in adults at high risk.
- The National DPP lifestyle change program is supported by the CDC, and participant outcome data is monitored by the CDC DPRP for quality assurance.
- As health care continues to transition away from fee-for-service and toward value-based payment options, the National DPP lifestyle change program is adequately suited to meet this change by allowing for modified payment structures or increased payments based on program outcomes such as weight loss.
- There are several options to choose from for program delivery, including online and in-person, allowing the opportunity to tailor the program to the needs of a payer’s members/employees. Many employers are drawn to the convenience of an effective behavior change program delivered online.

For more information, visit the following areas of the National DPP Coverage Toolkit:

- National DPP delivery options can be found here: <https://coveragetoolkit.org/commercial-plans/commercial-plans-delivery/commercial-plans-delivery-options/>

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- Evidence about the National DPP can be found here: <https://coveragetoolkit.org/about-national-dpp/evidence/>
- Cost and Value information can be found here: <https://coveragetoolkit.org/cost-value-elements/>

Which CDC-recognized organization should I work with? Contracting takes time; are there best practices? What is the best way to contract with a CDC-recognized organization?

- Contracting with CDC-recognized organizations can take time, dependent on each organization's capacity to manage the contracting process. It's important to start thinking about your optimum network early.
- Organizations that wish to offer the National DPP lifestyle change program must abide by quality standards set by CDC. The CDC's DPRP plays a critical role in assuring that organizations can effectively deliver the evidence-based lifestyle change program with quality and fidelity. Choosing an organization on the CDC's DPRP list is a good place to start. A registry of CDC-recognized organizations is available on the [CDC website](#).
- Additional considerations related to contracting are included in the [Contracting](#) section of the toolkit.
- As an alternative to contracting directly with CDC-recognized organizations, some commercial payers may choose to contract with a third-party organization to administer the National DPP lifestyle change program. Third-party organizations can work with commercial payers to establish a network of CDC-recognized organizations, work with health care providers, and recruit eligible individuals into the program.
- Some commercial plans and employers may opt to apply for CDC-recognition and offer this program in-house.

For more information, visit the following areas of the National DPP Coverage Toolkit:

- National DPP delivery options can be found here: <https://coveragetoolkit.org/commercial-plans/commercial-plans-delivery/commercial-plans-delivery-options/>
- Contracting with CDC Recognized Organizations can be found here: <https://coveragetoolkit.org/commercial-plans/contracting-cdc/>
<https://coveragetoolkit.org/commercial-plans/commercial-plans-contracting/contracting-cdc/>
- Information on becoming a CDC Recognized Organization can be found here: <https://www.cdc.gov/diabetes-prevention/php/program-provider/program-requirements.html>