



Combining DSMES and NDPP In Outpatient Hospital Setting

Andrea McCarty, MS, RDN, LD, CDE
Diabetes Education Coordinator
Mon General Hospital

Diabetes Learning Center History

- Began as free group education in 1990's
- ADA-recognized since 1/9/2002
- MNT service added in January, 2012
- NDPP began in May, 2013

DSMES Program

- Assessment of educational needs with instruction to follow
- Provided in individual or group sessions for type 1, type 2, and gestational diabetes.
- Instruction provided by team of CDEs, RN, RDN over series of visits
- Follow-up offered in-person or by phone/email
- Note sent to referring provider following each visit

Beginning the NDPP

- Medicare would not cover DSMES for pre-diabetes
- Patients were offered individual or group sessions, but had to pay out of pocket
- MNT sessions were also offered, but not covered
- Other payers were denying any education for pre-diabetes

Diabetes Prevention Research Outcomes

- Lifestyle change was effective in reducing incidence of type 2 diabetes by 58%, or 71% in those over age of 60.
- Lifestyle change that included patient education focused on increasing physical activity and decreasing calories was more effective than medication.

How It Started at MGH

- Requests to Administration to offer the NDPP at little or no cost for one group to start (Spring, 2011)
- They agreed to have two staff trained as Lifestyle Coaches (Fall, 2011)
- Applied for and received grant funding through AADE and CDC to start (Winter, 2013)
- Applied for pending recognition for NDPP through CDC (Spring, 2013)

Growing Both Programs

- Provider referral base
- Mailings
- Advertisements in paper
- Informational Sessions
- Patient/Participant word of mouth
- Correspondence with provider following each DSME visit and periodically through year-long NDPP

Reimbursement Woes

- DSME covered by most payers
- MNT covered by some payers
- NDPP covered by very few payers

Benefits of Providing Both Programs

- When patient doesn't qualify for one, offer another
- Making contact and connections with more community members through NDPP.
- MNT referrals are beneficial for DSMES and NDPP patients
- Lifestyle Coaches trained in behavior modification = works best for both

Outcomes of Providing Both

- Since May, 2013, 8 cohorts of NDPP have started
- Total of 79 participants have started
- 6.5% weight loss average among all groups to date
- CDC recognition status for NDPP pending
- Increased number of DSME/S and MNT referrals

Obstacles In The Future

- MD offices providing diabetes education and billing for service
- Reimbursement concerns for NDPP
 - Medicare Diabetes Prevention Act could reduce federal spending by 1.3 billion over 10 years – if approved
 - Discussions with possible payers ongoing, but slow.

Questions?

Andrea S. McCarty, MS, RDN, LD, CDE

Diabetes Education Coordinator

Mon General Hospital

1200 JD Anderson Drive

Morgantown, WV 26505

304-598-1805

mccartya@monhealthsys.org

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