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Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke

Strategies for Preventing and Managing Diabetes and Heart Disease and Stroke

Category A: Diabetes Management and Type 2 Diabetes Prevention Strategies	
Strategy	References that Provide Evidence Base for Recommending these Strategies
A1: Improve access to and participation in ADA-recognized/AADE-accredited DSMES programs in underserved areas	<ol style="list-style-type: none"> 1. 2017 National Standards for Diabetes Self-Management Education and Support. <i>Diabetes Care</i>. 2017; 40:1409–1419. Retrieved from http://care.diabetesjournals.org/content/40/10/1409.full-text.pdf. 2. Klein HA, Jackson SM, Street K, Whitacre JC, Klein J. Diabetes self-management education: miles to go. <i>Nurs Res Pract</i>. 2013:581012. 3. Powers, MA, Bardsley, J, Cypress, M, et al. Diabetes Self-management Education and Support in Type 2 Diabetes: A Joint Position Statement of the American Diabetes Association, the American Association of Diabetes Educators, and the Academy of Nutrition and Dietetics. <i>Diabetes Care</i>. Jul 2015; 38(7): 1372-1382. https://doi.org/10.2337/dc15-0730 4. Morgan JM, Mensa-Wilmot Y, Bowen S, Murphy M, Bonner T, Rutledge S, et al. Implementing Key Drivers for Diabetes Self-Management Education and Support Programs: Early Outcomes, Activities, Facilitators, and Barriers. <i>Prev Chronic Dis</i> 2018;15:170399. DOI: http://dx.doi.org/10.5888/pcd15.170399
A2: Expand or strengthen DSMES coverage policy among public or private insurers or employers, with emphasis on one or more of the following: Medicaid and employers	<ol style="list-style-type: none"> 1. 2017 National Standards for Diabetes Self-Management Education and Support. <i>Diabetes Care</i>. 2017; 40:1409–1419. Retrieved from http://care.diabetesjournals.org/content/40/10/1409.full-text.pdf. 2. Powers, MA, Bardsley, J, Cypress, M, et al. Diabetes Self-management Education and Support in Type 2 Diabetes: A Joint Position Statement of the American Diabetes Association, the American Association of Diabetes Educators, and the Academy of Nutrition and Dietetics. <i>Diabetes Care</i>. Jul 2015; 38(7): 1372-1382. https://doi.org/10.2337/dc15-0730 3. Morgan JM, Mensa-Wilmot Y, Bowen S, Murphy M, Bonner T, Rutledge S, et al. Implementing Key Drivers for Diabetes Self-Management Education and Support Programs: Early Outcomes, Activities, Facilitators, and Barriers. <i>Prev Chronic Dis</i> 2018;15:170399. DOI: http://dx.doi.org/10.5888/pcd15.170399
A3: Increase engagement of pharmacists in the provision of medication management or DSMES for people with diabetes	<ol style="list-style-type: none"> 1. 2017 National Standards for Diabetes Self-Management Education and Support. <i>Diabetes Care</i>. 2017; 40:1409–1419. Retrieved from http://care.diabetesjournals.org/content/40/10/1409.full-text.pdf. 2. Centers for Disease Control and Prevention. <i>Collaborative Practice Agreements and Pharmacists’ Patient Care Services</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/dhdsp/pubs/docs/Translational_Tools_Pharmacists.pdf 3. Joint Commission of Pharmacy Practitioners. <i>Pharmacists’ Patient Care Process</i>. 2014 https://jcpp.net/wp-content/uploads/2015/09/Patient_Care_Process_Template_Presentation-Final.pdf. 4. Klein HA, Jackson SM, Street K, Whitacre JC, Klein J. Diabetes self-management education: miles to go. <i>Nurs Res Pract</i>. 2013:581012.

	<ol style="list-style-type: none"> 5. Patient-Centered Primary Care Collaborative. <i>The Patient-Centered Medical Home: Integrating Comprehensive Medication Management to Optimize Patient Outcomes – Resource Guide</i>. 2nd ed. 2012. https://www.pcpcc.org/sites/default/files/media/medmanagement.pdf. 6. Powers, MA, Bardsley, J, Cypress, M, et al. Diabetes Self-management Education and Support in Type 2 Diabetes: A Joint Position Statement of the American Diabetes Association, the American Association of Diabetes Educators, and the Academy of Nutrition and Dietetics. <i>Diabetes Care</i>. Jul 2015; 38(7): 1372-1382. https://doi.org/10.2337/dc15-0730
<p>A4: Assist health care organizations in implementing systems to identify people with prediabetes and refer them to CDC-recognized lifestyle change programs for type 2 diabetes prevention</p>	<ol style="list-style-type: none"> 1. Albright, Ann L., and Edward W. Gregg. Preventing type 2 diabetes in communities across the US: The National Diabetes Prevention Program. <i>American Journal of Preventive Medicine</i> 44.4 (2013): S346-S351. https://doi.org/10.1016/j.amepre.2012.12.009 2. Centers for Disease Control and Prevention. <i>2018 CDC Diabetes Prevention Recognition Program Standards</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf 3. Centers for Disease Control and Prevention. <i>The National Diabetes Prevention Program</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/diabetes/prevention/index.html 4. Centers for Disease Control and Prevention. <i>Resources for Health Care Professionals</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/diabetes/prevention/lifestyle-program/resources/professionals.html 5. Centers for Disease Control and Prevention. <i>Community-Clinical Linkages for the Prevention and Control of Chronic Diseases: A Practitioner’s Guide</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; 2016. https://www.cdc.gov/dhdsp/pubs/docs/ccl-practitioners-guide.pdf 6. Centers for Disease Control and Prevention. <i>Preventing Type 2 Diabetes: A Guide to Refer Your Patients with Prediabetes to an Evidence-based Diabetes Prevention Program</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://preventdiabetesstat.org/toolkit.html 7. National DPP Customer Service Center https://nationaldppcsc.cdc.gov/s/
<p>A5: Collaborate with payers and relevant public and private sector organizations within the state to expand availability of the National DPP as a covered benefit for one or more of the following groups: Medicaid beneficiaries; state/public employees; employees of private sector organizations</p>	<ol style="list-style-type: none"> 1. Albright, Ann L., and Edward W. Gregg. Preventing type 2 diabetes in communities across the US: The National Diabetes Prevention Program. <i>American Journal of Preventive Medicine</i> 44.4 (2013): S346-S351. https://doi.org/10.1016/j.amepre.2012.12.009 2. Centers for Disease Control and Prevention. <i>National DPP Coverage Toolkit</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Service. www.coveragetoolkit.org 3. Centers for Disease Control and Prevention. <i>2018 CDC Diabetes Prevention Recognition Program Standards</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf 4. Centers for Disease Control and Prevention. <i>Diabetes Prevention Impact</i>

	<p><i>Toolkit</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Service. https://nccd.cdc.gov/Toolkit/DiabetesImpact/</p> <p>5. Centers for Disease Control and Prevention. <i>Diabetes State Burden Toolkit</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://nccd.cdc.gov/Toolkit/DiabetesBurden</p> <p>6. Centers for Disease Control and Prevention. <i>Preventing Type 2 Diabetes: A Guide to Refer Your Patients with Prediabetes to an Evidence-based Diabetes Prevention Program</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://preventdiabetesstat.org/toolkit.html</p> <p>7. Centers for Disease Control and Prevention. <i>CDC 6/18 Initiative: Prevent Type 2 Diabetes</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/sixeighteen/diabetes/index.htm</p>
<p>A6: Implement strategies to increase enrollment in CDC-recognized lifestyle change programs</p>	<ol style="list-style-type: none"> 1. Albright, Ann L., and Edward W. Gregg. "Preventing type 2 diabetes in communities across the US: The National Diabetes Prevention Program." <i>American Journal of Preventive Medicine</i> 44.4 (2013): S346-S351. https://doi.org/10.1016/j.amepre.2012.12.009 2. Centers for Disease Control and Prevention. <i>2018 CDC Diabetes Prevention Recognition Program Standards</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf 3. Centers for Disease Control and Prevention. <i>Addressing Chronic Disease through Community Health Workers</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; 2018. https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf
<p>A7: Develop a statewide infrastructure to promote long-term sustainability/reimbursement for Community Health Workers (CHWs) as a means to establish or expand their use in a) CDC-recognized lifestyle change programs for type 2 diabetes prevention and/or b) ADA-recognized/AADE-accredited DSMES programs for diabetes management</p>	<ol style="list-style-type: none"> 1. 2017 National Standards for Diabetes Self-Management Education and Support. <i>Diabetes Care</i>. 2017; 40:1409–1419. Retrieved from http://care.diabetesjournals.org/content/40/10/1409.full-text.pdf. 2. Albright, Ann L., and Edward W. Gregg. "Preventing type 2 diabetes in communities across the US: The National Diabetes Prevention Program." <i>American Journal of Preventive Medicine</i> 44.4 (2013): S346-S351. https://doi.org/10.1016/j.amepre.2012.12.009 3. Centers for Disease Control and Prevention. <i>2018 CDC Diabetes Prevention Recognition Program Standards</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services. https://www.cdc.gov/diabetes/prevention/pdf/dprp-standards.pdf 4. Centers for Disease Control and Prevention. <i>Addressing Chronic Disease through Community Health Workers</i>. Atlanta, GA: Centers for Disease Control and Prevention, U.S. Department of Health and Human Services; 2018. https://www.cdc.gov/dhdsp/docs/chw_brief.pdf

Category B: Cardiovascular Disease Prevention and Management	
Strategy	References that Provide Evidence Base for Recommending these Strategies

<p>B1: Promote the adoption and use of electronic health records (EHRs) and health information technology (HIT) to improve provider outcomes and patient health outcomes related to identification of individuals with undiagnosed hypertension and management of adults with hypertension</p>	<p>Centers for Disease Control and Prevention. Implementing clinical decision support systems. <i>Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services</i>. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017: 43-47.ⁱ</p>
<p>B2: Promote the adoption of evidence-based quality measurement at the provider level (e.g. use dashboard measures) to monitor healthcare disparities and implement activities to eliminate healthcare disparities</p>	<p>Centers for Disease Control and Prevention. Implementing clinical decision support systems. <i>Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services</i>. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017: 43-47.</p>
<p>B3: Support engagement of non-physician team members (e.g., nurses, nurse practitioners, pharmacists, nutritionists, physical therapists, social workers) in hypertension and cholesterol management in clinical settings</p>	<p>Centers for Disease Control and Prevention. Promoting team-based care to improve high blood pressure control. <i>Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services</i>. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017: 18-22.</p>
<p>B4: Promote the adoption of MTM between pharmacists and physicians for the purpose of managing high blood pressure, high blood cholesterol, and lifestyle modification</p>	<p>Centers for Disease Control and Prevention. Pharmacy: Community pharmacists and medication therapy management. <i>Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services</i>. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017: 55-59.</p>
<p>B5: Develop a statewide infrastructure to promote sustainability for CHWs to promote management of hypertension and high blood cholesterol</p>	<p>Centers for Disease Control and Prevention. Integrating community health workers on clinical care teams and in the community. <i>Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services</i>. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017: 50-54.</p>
<p>B6: Facilitate use of self-measured blood pressure monitoring (SMBP) with clinical support among adults with hypertension</p>	<p>Centers for Disease Control and Prevention. Self-measured blood pressure monitoring with clinical support. <i>Best Practices for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services</i>. Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017: 28-32.</p>
<p>B7: Implement systems to facilitate systematic referral of adults with hypertension and/or high blood</p>	<p>Centers for Disease Control and Prevention. Self-management support and education. <i>Best Practices</i></p>

cholesterol to community programs/resources	<i>for Cardiovascular Disease Prevention Programs: A Guide to Effective Health Care System Interventions and Community Programs Linked to Clinical Services.</i> Atlanta, GA: Centers for Disease Control and Prevention, US Dept of Health and Human Services; 2017: 33-37.
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ⁱ Electronic source: <https://www.cdc.gov/dhds/pubs/docs/Best-Practices-Guide-508.pdf>