

# Education for Life.



## A Message from the ADA's Chief Scientific and Medical Officer, Robert Gabbay, MD, PhD



On behalf of the American Diabetes Association® (ADA), please allow me to extend my personal and genuine appreciation to each and every diabetes care and education specialist (DCES) for the talent, dedication, and hard work you put forth in achieving and maintaining the ADA's recognition for diabetes self-management education and support (DSMES)!

The success of the ADA's Education Recognition Program (ERP) is built on your tireless efforts and I am so grateful for the impact you have had on the more than 700,000 people with diabetes within the largest provision of DSMES in U.S.! I would also like to thank those in administration that prioritize DSMES, its implementation, and sustainability. Your commitment to have evidence-based DSMES services that emphasize person-centered and diversified therapeutic education is critical in making a sustainable delivery model.

While so much progress has been made, we recognize that now more than ever, we need to address the social and environmental aspects of health in order to propel communities toward positive health outcomes. The ADA is proud to stand for health equity for all those living with and affected by diabetes and asks you to join us in this mission.

2023 has brought about some great successes for people with diabetes, which include:

- Publications such as the [ADA's Standards of Care in Diabetes](#) and the [2023 Economic Costs of Diabetes in U.S.](#)
- The [DSMES Toolkit](#) produced in collaboration with the Centers for Disease Control and Prevention (CDC)
- Our partnership with the Leapfrog Group on recognizing leading health systems that prioritize optimal hospital care for [people with diabetes](#)

- The launch of the ADA's Institute of Learning with over 70 free continuing education (CE) opportunities
- Our five-year award from the CDC to build an infrastructure backbone for the [National Diabetes Prevention Program](#) in six states

Thank you for your partnership with the ADA and your commitment to quality care for people with diabetes. You are pioneers and change makers that create the future of DSMES!

Sincerely,

Robert A. Gabbay, MD, PhD, FACP  
Chief Scientific and Medical Officer  
American Diabetes Association

### What's New: ERP Updates

## Chronicle Pro: Now Live

We are excited to announce that Chronicle Pro is now live. Chronicle Pro will provide your service with the following features:

- Each section of the participant chart will have an A-I indicator letting the user know if that component of the cycle has been met.
- Two new sections have been added to the participant record—one to document referral information and the other to document provider communication. Both sections have an upload function to house this documentation.
- Users now can filter participants based on if they have met all the A-I requirements within the participants search tool.
- A new patient audit report has been added that will allow the user to quickly print a complete chart that has met the A-I requirements.
- The new calendar function will allow users to see upcoming classes, sessions, and scheduled follow ups.

Services will be able to utilize Chronicle Pro for free until the services' 2024 anniversary date. Afterward, the Chronicle Pro features will be disabled and services can either subscribe to Chronicle Pro or continue to use the current standard version of Chronicle. There will be an email communication to all quality coordinators 30 days prior to the service anniversary date with instructions on how to renew the subscription.

### Chronicle Pro subscription fees:

- One year: \$150.00
- Four years: \$400.00 (\$200 savings)

Please note: The current version of Chronicle Diabetes will remain free and no data that already exists within the platform will change during or after the Chronicle Pro trial period.

[View the recorded Chronicle Pro webinar](#) or sign up for the next [Chronicle Q&A call](#).

Please email [ERP@diabetes.org](mailto:ERP@diabetes.org) if you have any questions about Chronicle Pro.

## **Behavioral Health in Diabetes Care**

For those DCEs who have completed the [ADA's mental health training](#), your service will now be recognized on [diabetes.org/erp](https://diabetes.org/erp) under your ERP listing as "Mental Health Trained." This is an excellent way to have your service promoted as having DCEs who have received training in this important area of DSMES. If you have completed the ADA mental health training, please let your service coordinator know and they will update your profile within the staff section of the ERP Portal.

## **Renewal Applications Reporting Period**

Renewal applications submitted starting January 3, 2024 will require services to provide 12 months of reporting data. Services will still be allowed to start the renewal application six months before the end of the current recognition period. This data collection period is already used for annual status reports. This change will allow each of you to highlight the incredible work you are doing by providing additional time for gathering outcome data on your participants!

## **Coming Soon! The CDC and CMS Collaborate to Expedite Participation of ADA-Recognized DSMES Delivery Organizations in the Medicare Diabetes Prevention Program**

ADA recognized DSMES delivery organizations will now be offered the opportunity to be fast-tracked by the CDC's Diabetes Prevention Recognition Program to preliminary recognition based on their experience working with populations with diabetes as an ADA-recognized DSMES delivery organization. However, they will still need to meet the basic application requirements for recognition:

- Delivering a CDC-approved lifestyle change program curriculum.
- Employing a lifestyle coach trained by a training entity holding a memorandum of understanding with CDC.
- Submitting required participant data every six months.

### **Benefits to fast-tracked recognition:**

With this action, you will be able to apply to be a Medicare Diabetes Prevention Program (MDPP) supplier and begin billing Medicare for the MDPP as soon as your application is approved. Check your email inbox for the application in early 2024!

For questions about the MDPP, please [contact](#) the Centers for Medicare & Medicaid Services (CMS).

## **New! *Standards of Care in Diabetes—2024***

The ADA just released our *Standards of Care in Diabetes—2024 (Standards of Care)*, a set of comprehensive and evidence-based guidelines for managing type 1, type 2, gestational diabetes, and prediabetes based on the latest scientific research and clinical trials.

This year's new guidelines include updates to recommendations around the new class of obesity drugs, new screening practices, diabetes technology, guidance around the use of teplizumab, and more. Key new messaging and takeaways include:

- Prioritizing cardiovascular disease risk reduction, as it is the number one cause of death of people with diabetes.
- Avoiding therapeutic inertia when treating obesity and using measures outside of BMI.
- Considering use of teplizumab in stage 2 type 1 diabetes.
- Addressing increased bone fracture risk in people with diabetes.
- Incorporating behavioral and lifestyle considerations into treatment plans, including recommendations on religious fasting, screening for fear of hypoglycemia,
- Using telehealth and digital interventions for diabetes self-management education and empowering health care professionals to be proficient in diabetes technology.

[The 2024 \*Standards of Care\*](#) is available online and will be published as a supplement to the January 2024 issue of *Diabetes Care*<sup>®</sup>. A shortened version of the guidelines, known as the *Abridged Standards of Care*, will be made available for primary care providers in the journal *Clinical Diabetes*<sup>®</sup>, along with a convenient [\*Standards of Care\* app](#) and a *Standards of Care* pocket chart. Through the “living” *Standards of Care* process, the online version will be annotated in real-time with necessary updates if new evidence or regulatory changes merit immediate incorporation.

### **ERP Spotlight**

The diabetes self-management education program at AM Diabetes & Endocrinology Center in Bartlett, Tennessee has maintained ADA recognition since 2004. Our program has grown and developed over the last 19 years.

We added our first multi-site in 2023 and plan to increase to more sites in the future. Having multiple education sites increases our availability to the community and improves patient access to our education services. Expansion has also allowed us to be more visible to local clinics for potential future referrals.

The current staff is a multi-disciplinary team composed of a board-certified endocrinologist, a pharmacist, two dietitians, two registered nurses, and a program coordinator. Three of our current staff are certified diabetes care and education specialists (CDCESs) and our two newest members are currently working on their CDCES certification.

The addition of a program coordinator greatly improved the program's efficiency and organization. Our coordinator organizes the class schedule and supervises the class process, which has provided the educators with more time to teach and spend on patient care.

Our class program is affiliated with AM Diabetes & Endocrinology Center, which is an outpatient endocrinology clinic. Our medical director and clinic staff require all people with diabetes to complete the comprehensive education class prior to coming to their initial clinic appointment.

This has been a great support for the program and emphasizes the importance of diabetes education and self-management to our patients and their referring physicians. Our diabetes education staff works closely with our clinic staff to improve patient communication and diabetes care. We encourage our patients to actively participate in their office visits and personal diabetes care and management.

Each patient is encouraged to bring a support person to class so that current diabetes management information is provided to both parties. This helps to develop a home-based support network. The comprehensive diabetes education team also remains available as a resource to our patients and their support person(s) after they have completed the class program.

Most class participants choose to attend the one-day class even though other options are available. The most common reasons for choosing the one-day comprehensive class are to miss less work time and to make fewer trips to the office. One interesting benefit from the one-day class is that the patients get to know each other and often supply support and personal anecdotes. It is not unusual to see participants swapping contact information at the end of the class.

We use the ADA curriculum, *Life with Diabetes: A Series of Teaching Outlines*, and the participant's book has recently been changed to the ADA's *How to Thrive: A Guide for Your Journey with Diabetes*. We provide a folder to each participant which contains the handouts and forms needed during the class presentation. There is also resource table filled with information on diabetes management and local programs such as diabetes camps, cooking classes, and the Yellow Dot program. Class participants are directed to pick up any information that best suits their needs and we provide other resource materials as requested.

We prefer the use of a positive teaching style that encourages healthy lifestyle changes. Our educators are encouraged to use a more relaxed, informal teaching presentation and to acknowledge the experience and knowledge of our patients who have had a long history of diabetes. We often encourage patients to share anecdotes from their diabetes management life experiences during class. This allows the class to be more discussion based and invites participants to actively engage in the program.

We use two computer programs to document class participation—Greenway is our current clinic EMR. The Chronicle Diabetes program, supported by the ADA, helps maintain the documentation required for yearly program reviews and maintenance of ADA recognition. Chronicle also helps maintain an education database that is the organizational framework of our education program and provides a quick resource for data on our program.

In summary, we hope our diabetes education program embodies the mission statement of AM Diabetes & Endocrinology Center: Comprehensive Endocrine Solutions and Personalized Care.



## Advocacy Corner

### Four Diabetes Drugs Selected for Price Negotiation in Medicare

The [Medicare Drug Price Negotiation Program](#), which provides Medicare the ability to directly negotiate the prices of certain high-expenditure, single-source drugs without generic or biosimilar competition, was created as a part of the [Inflation Reduction Act of 2022](#). Of the 10 drugs selected for negotiations for the initial price applicability year 2026, four of them are used to treat diabetes.

In October 2023, the ADA submitted public comments to the CMS on the 10 initially selected drugs and their therapeutic alternatives. These drugs include:

- Eliquis, a blood thinner
- Xarelto, a blood thinner
- Januvia, a diabetes drug
- Jardiance, a diabetes drug
- Enbrel, a rheumatoid arthritis drug
- Imbruvica, a drug for blood cancers
- Farxiga, a drug for diabetes, heart failure, and chronic kidney disease
- Entresto, a heart failure drug
- Stelara, a drug for psoriasis and Crohn's disease
- Fiasp and NovoLog, for diabetes

The Department of Health and Human Services recently announced that all 10 pharmaceutical companies whose products were selected for the first round of drug

price negotiations have agreed to participate in price-setting discussions with the CMS.

The ADA commends the CMS for taking action to reduce the costs of drugs that are essential to the health of people with diabetes. The ADA looks forward to continuing to work with the CMS and other stakeholders to make a positive impact on costs for the diabetes community.

The ADA will share updates periodically on the multifaceted process of implementing the new Medicare drug pricing program.

## Downloadable Health Equity Resources

We are excited to provide you with five [resources](#) that highlight our key health equity advocacy initiatives:

1. Obesity treatment and access
2. Amputation prevention
3. Continuous glucose monitors (CGMs)
4. Insulin affordability
5. Sign up to become a Diabetes Advocate

These resources can be printed in multiple sizes and used as handouts for health fairs, community events, doctor's offices, visits with legislators, and more. We encourage you to spread the word about our health equity work by sharing these resources.

## Focus on Diabetes®

### Look Closer at Eye Health

See your patients with diabetes from a new perspective. Learn how to provide optimal care and earn free CE credits with our courses that have been updated for current guidelines. Our newest course, [Diabetes, Nutrition, and Eye Health](#), showcases the important connection between eye health and nutrition.



## Diabetes and Chronic Kidney Disease Resources in Spanish!

We are excited to announce that the [diabetes & kidney health website](#)—which helps connect the dots between diabetes and chronic kidney disease (CKD)—is now available in Spanish. Now is the time to share kidney health resources with the Spanish-speaking diabetes community, including:

- The new Diabetes Placemat: Kidney-Friendly Meal Planner, a simple guide to planning meals and managing portions for people with diabetes and CKD.
- Healthy living tips and recipes.
- The opportunity to register for a no-cost Kidney Smart<sup>®</sup> class from DaVita. These kidney education classes are available in 10+ languages in person or online and help people take steps to prevent CKD or slow its progression.



## Know Diabetes by Heart<sup>™</sup>

### Living with Diabetes: Ask the Experts Q&A Series

Our Ask the Experts series is designed to help people living with diabetes and their loved ones navigate all the information and questions they might have about diabetes. In 2023, we covered a range of topics from healthy eating, trouble sleeping, how to prevent kidney disease, and more. Share our Ask the Expert videos with the people you see to help support them on their health journey and give them the tools and resources they might need to help manage their diabetes. [Learn more](#) and [watch the videos](#).





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