

# **DiabetesPro Quarterly**

AMERICAN DIABETES ASSOCIATION NEWS FOR PROFESSIONAL MEMBERS



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# Association Provides New Guidance on Diabetes Screening, Therapies, Technology, and More

The American Diabetes Association (ADA) has published its much-anticipated *Standards of Medical Care in Diabetes—2022*, which is now live online and has been published as a supplement to *Diabetes Care*. The Standards of Care provides the latest in comprehensive, evidence-based recommendations for the diagnosis

and treatment of people with type 1, type 2, or gestational diabetes; strategies for the prevention or delay of type 2 diabetes and associated comorbidities; and therapeutic approaches that can reduce complications, mitigate cardiovascular and renal risk, and improve health outcomes.

AMERICAN DIABETES ASSOCIATION
STANDARDS OF
MEDICAL CARE
IN DIABETES—2022

Diabetes Care

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**DiabetesPro**°

### A Word from ADA's Chief Scientific & Medical Officer

Greetings, friends.

The newness of a fresh calendar is so exciting to me. It is a blank page—full of opportunity and just waiting to be filled up with ideas, events, and memories. I welcome 2022 with a sense of expectation and an attitude of readiness. The American Diabetes Association (ADA) impresses me every day. Our people are dedicated, disciplined, and devoted. With that strong commitment and expectation in mind, I want to share a bit about how we are poised for our greatest year yet!

In late December 2021, we released our *Standards of Medical Care in Diabetes—2022*. It is stunning to watch how the field of diabetes care is changing so rapidly and how the Association's talented team of volunteers and staff create such a remarkable product. This year, there are a few notable updates, including:

- Guidance on first-line therapy determined by comorbidities;
- Screening for prediabetes and diabetes beginning at age 35 for all people;
- · Changes to gestational diabetes mellitus recommendations regarding when to test and in whom testing should be done; and
- · Updated recommendations on technology selection based on individual and caregiver considerations.

This spring, these guidelines are going visual! We are calling this new effort "Guidelines Insight." The first few sections will be available this month, with more to be added later. This project is part of a broader effort to ensure greater implementation of the Standards of Care for all people affected by diabetes.

We recently reframed our former Advanced Postgraduate Course to become the 2022 Clinical Update Course. This late-winter event focused on updates to the Standards of Care and was designed as an interdisciplinary, interactive event. This year, because of the strain on health care professionals managing the COVID-19 pandemic, we held the event virtually on February 4–6. Next year, we hope to offer both in-person and virtual attendance options.

The ADA's 82nd Scientific Sessions will happen in New Orleans, LA, on June 3–7, as our first hybrid conference. The event will feature a robust schedule of onsite activities for those attending in person, as well as online sessions for those attending virtually. We can't wait to showcase the incredible science and progress being made in diabetes every day.

This year will also bring a significant number of new research grants, made possible by successful fundraising and our continued commitment to increasing ADA's research funding. We will continue to maximize the impact of our research funding through a more targeted approach. Be on the lookout for the forthcoming 2021 Research Annual Report to learn more.

As I think about what the new year holds, my mind often goes to the many resolutions people are making. People are committing themselves to a new and better year ahead. At the ADA, we, too, have resolutions. We insert our resolutions into our strategy that is revised each year and continuously assessed. Our principles of Bending the Curve through cutting-edge research and care, Helping People Living with Diabetes and Their Families Thrive, and Advocating for Change are our resolutions and our commitment to you. Throughout the year, we will measure ourselves against these priorities and specific targets in Advocacy, Communications, Development, Finance, Marketing, and Science & Health Care. With each passing

year, our goals deepen, our commitment grows, and our resolve strengthens. This year, we are poised to make impressive progress, but that only happens through our partnership with you. Thank you all for your continued support.

Won't you join us in a renewed commitment to do more for people with diabetes?

My warmest regards,

Robert Gabbay, MD, PhD, ADA Chief Scientific & Medical Officer

#### Highlights from the 2022 Standards of Care

Some notable updates and additions include:

- Guidance on first-line therapy determined by comorbidities
- Screening for prediabetes and diabetes beginning at age 35 for all people
- Changes to gestational diabetes mellitus (GDM) recommendations regarding when to test and in whom testing should be done
- Updated recommendations on technology selection based on individual and caregiver considerations, ongoing education on the use of devices, continued access to devices across payers, support of students using devices in school settings, use of telehealth visits, and early initiation of technology

Other noteworthy updates and additions to this year's Standards of Care include:

### **Diabetes Screening**

- Rrecommendations about adequate carbohydrate intake before oral glucose tolerance testing as a screen for diabetes were added (Recommendations 2.4 and 2.12).
- The discussion regarding use of point-of-care A1C assays for the diagnosis of diabetes has been revised.
- Recommendation 2.24 regarding genetic testing for individuals who do not have typical characteristics of type 1 or type 2 diabetes has been revised based on the recent publication of "The Management of Type 1 Diabetes in Adults: A Consensus Report by the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD)."

### **Pregnancy**

- The GDM recommendations have been revised regarding when to test and in whom testing should be done, with supporting evidence added to the text.
- Recommendation 15.16 and its related discussion includes the evidence on the value of telehealth visits for pregnant women with GDM.
- A new subsection on physical activity during pregnancy for women with diabetes has been added.

 Additional discussion was added regarding insulin as the preferred treatment for type 2 diabetes in pregnancy.

### **Technology**

- General recommendations on the selection of technology based on individual and caregiver preferences (Recommendation 7.1), ongoing education on the use of devices (Recommendation 7.2), continued access to devices across payers (Recommendation 7.3), support of students using devices in school settings (Recommendation 7.4), and early initiation of technology (Recommendation 7.5) now introduce the technology section, whereas previously these concepts were distributed throughout the section.
- The term "self-monitoring of blood glucose" was replaced with the more commonly used "blood glucose monitoring" (BGM) throughout the guidelines, and more information based on the U.S. Food and Drug Administration recommendation regarding when an individual might need access to BGM was added to the BGM subsection.
- Recommendations regarding use of continuous glucose monitoring (CGM) were divided between adults (Recommendations 7.11 and 7.12) and youth (Recommendations 7.13 and 7.14), and the recommendation regarding periodic use of CGM or the use of professional CGM has been simplified (Recommendation 7.17). Frequency of sensor use has also been added to the text of the subsection on CGM, which has been reorganized to summarize the evidence according to study design.
- "Smart pens" are now referred to as "connected insulin pens," and more discussion and evidence has been added to the content on these devices.

The ADA also publishes the Standards of Medical Care in Diabetes Abridged for Primary Care Providers yearly online and in Clinical Diabetes and offers a convenient Standards of Care app as well as a Standards of Care Pocket Chart. Other Standards of Care resources, including a webcast with continuing education credit and a full slide deck, can be found on our Practice Guidelines Resources page on the DiabetesPro website.

### **President's Corner**

We are thrilled to represent you as presidents of the American Diabetes Association (ADA) this year! There are many projects in the pipeline, and we are excited to move forward in 2022.

We are eager to engage deeply with the vibrant professional membership of the ADA, committed to growing the membership to increase professional and individual diversity, and equally committed to serving both the diabetes professional and patient communities.

We are excited to expand the ADA's professional education programs to encompass a deeper level of engagement and interaction. Already this year, the recently reimagined Clinical Update Course (previously the Advanced Postgraduate Course) was held February 4–6 in an interactive virtual format. We are also looking forward to participating in the ADA's 82nd Scientific Sessions, to be held June 3–7 in New Orleans, LA. This will be our first hybrid scientific meeting, offering both in-person and virtual attendance options, and it will be a wonderful exploration of the best science in diabetes.

We are also thrilled about a new initiative within the ADA to enhance its *Standards of Medical Care in Diabetes* with new resources collectively known as "Guidelines Insight." This set of visual tools is intended to support professionals' use and application of the Standards of Care in clinical practice.

We invite you to get involved and join local and national committees to raise awareness, inspire action, and support the 34 million individuals with diabetes and more than 80 million with prediabetes in the United States. Reach out to us directly or contact our marvelous staff at the ADA. We value your input and hope you connect with us to share your suggestions so that we might best serve you.

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### **ADA Member-Exclusive Webinar Series Wraps Year 2, Heads into Final Stretch**

The American Diabetes Association (ADA) will wrap up its second year of the member-exclusive "Hands On: Tips to Improve Diabetes Care" webinar series in March before beginning its third and final year of programs in April.

The last session of year 2, "50 Diabetes Care Tips in 60 Minutes: Reviewing Lessons from Year Two Webinars," will be presented on March 8 at 3:00 p.m. ET. The webinar will use case studies to review the tips presented during the 11 prior "Hands On" sessions of the program year. Panelists include Carla Miller, PhD, RD, Steven J. Russell, MD, PhD, and Piek Tan, RD, CDCES, three diabetes experts who also serve on the leadership teams for ADA's Behavioral Medicine and Psychology, Diabetes Technology, and Diabetes in Primary Care Interest Groups, respectively.

Unlike the other webinars in the series, the March session will be open to anyone regardless of membership status. ADA professional members are encouraged to invite their colleagues to join the event.

The third year of the series will begin in April. Topics will be announced by March. Visit **professional.diabetes.org/webinars** to see a listing and register for any of the upcoming sessions.

More than 1,500 ADA professional members have taken advantage of the member-exclusive "Hands On" series so far. The series offers professionals up to 1 CE credit for each webinar. Members can earn CE credit for any of the Year 2 sessions (April 2021–March 2022) by visiting ADA's **Professional Education Portal**, selecting the sessions they would like to watch, and following the steps to claim their credit.

The "Hands On" series was developed by leaders of the Behavioral Medicine and Psychology, Diabetes in Primary Care, and Diabetes Technology Interest Groups and is made possible by the generous support of the Leona M. and Harry B. Helmsley Charitable Trust.

To access all webinars in the "Hands On" series to date, visit the ADA webinar library.

### **DiabetesPro Career Center**

Find the latest jobs and high-quality job seekers in academic research, endocrinology, primary care, diabetes education, and more. DiabetesPro Career Center is your premier resource for employment opportunities and career development tools for professionals working in the field of diabetes. View numerous positions such as the ones shown below on the **Career Center website**.

#### Pediatric Diabetes Educator | UNM Hospital — Albuquerque, NM

The successful candidate will provide direct and group education for patients with diabetes in a manner consistent with current nationally recognized standards; assess, plan, develop, implement, and evaluate clinical and nonclinical diabetes educational programs; and ensure adherence to hospital and departmental policies and procedures. Patient care assignment may include pediatric, adolescent, adult, and geriatric age-groups. Candidates (nurses, dietitians, or pharmacists) must have a bachelor's degree in a related discipline and 3 years of relevant experience.

#### Endocrinologist | Adventist Health - Sonora, CA

Adventist Health Sonora is actively seeking a full-time, mission-minded endocrinologist to work out of a hospital-owned and -operated clinic to serve the ever-growing needs of the central California communities in Tuolumne and Calaveras counties. The ideal candidate will be experienced, but new graduates are encouraged to apply. The ideal incoming physician will work in an outpatient setting in tandem with one other provider who has practiced for more than 25 years.

#### Pediatric Endocrinologist | Penn State Health-Hershey, PA

Penn State Health Children's Hospital's Division of Pediatric Endocrinology and Diabetes is seeking a pediatric endocrinologist who is licensed to practice in Pennsylvania or willing to acquire such license. Clinical research interest is supported but not required. Responsibilities include seeing patients in the outpatient endocrine and diabetes clinics, providing inpatient consultation services 8–10 weeks per year, educating trainees and students, and sharing call with the other physicians.

#### Diabetologist | Intermountain Healthcare Nevada— Las Vegas, NV

Intermountain Healthcare is seeking a diabetes care specialist/diabetologist to join its team in Nevada. The successful candidate will deliver comprehensive clinical and cardiometabolic care to patients with diabetes. The diabetologist will be an integral part of the diabetes care team that provides collaborative, comprehensive personcentered care and education conducive to behavior change and improved quality of life for patients. Management of patients with diabetes involves implementing evidencebased therapies that are cost-effective to achieve individualized behavioral and treatment goals that reduce risks and optimize health outcomes. Applicants must have the necessary license and certifications for the position, have at least 1 year of experience, and be knowledgeable in pathophysiology, epidemiology, clinical management, cardiometabolic conditions, self-management of diabetes, cultural awareness, and diabetes technology.

### Endocrinology Nurse Practitioner | Providence Medical Group—Spokane, WA

Providence Medical Group is seeking an experienced nurse practitioner for a part-time (0.5 FTE) position with its endocrinology practice. The ideal candidate will have at least 1 year of experience in primary care or endocrinology and will be familiar with diabetes treatments, including insulin pump therapy and continuous glucose monitoring, in addition to treating patients with osteoporosis, and, if comfortable, treating hypo- and hyperthyroidism. This position will provide endocrinology care as part of a collegial staff of physicians, advanced practice nurses, registered nurses, certified diabetes care and education specialists, and medical assistants.

Looking for new career opportunities? Or looking to hire?

Visit ADA's **DiabetesPro Career Center** 



**DiabetesPro** 



### **American Diabetes Association Welcomes New Membership Advisory Group Members**

In January, the American Diabetes Association (ADA) welcomed new members to the Membership Advisory Group. This interdisciplinary group provides expert guidance on ADA's professional membership benefits and engagement strategies. The group has been instrumental in the development of the Association's 16 Interest Groups, early career and student membership categories, and marketing and engagement strategies. The Membership Advisory Group serves as a sounding board for new benefit ideas, votes on applicants for membership-based leadership teams, develops the long-term mission of and engagement strategies for ADA's Interest Groups, and provides insights regarding successful membership management strategies used by related organizations.

In addition to announcing the new Membership Advisory Group members, the ADA has also named Todd Hagobian, PhD, as chair-elect for 2022. He joins chair Henry Rodriguez, MD, in this leadership role.

#### New Membership Advisory Group members include:



Andrew Crisologo, DPM, FACPM, FFPM RCPS (Glasg)

Assistant Professor of Surgery Director, Advanced Diabetic Limb Salvage Fellowship University of Cincinnati



Zhenqi Liu, MD

James M. Moss Professor of Diabetes and Professor of Medicine University of Virginia



**Lucia M. Novak, MSN, ANP-BC, BC-ADM** President, Diabetes Consulting Services, North Bethesda, MD

Co-Executive Director, Capital Health and Metabolic Center, Capital Diabetes and Endocrine Associates, Camp Springs and Silver Spring, MD



Deborah Young-Hyman, PhD, CDCES, FTOS, Fellow SBM

Health Science Administrator, Office of Behavioral and Social Science Research, Office of the Director, National Institutes of Health

#### **Continuing Advisory Group members include:**



Henry Rodriguez, MD, Chair

Professor of Pediatrics, University of South Florida Clinical Director, University of South Florida Diabetes Center



Todd Hagobian, PhD, Chair-Elect

Professor, Department of Kinesiology and Public Health

Faculty Fellow, Division of Research, Economic Development, & Graduate Education California Polytechnic State University



**Brooke Baker, MSN, RN, CDCES, ADEPT**Faculty, School of Nursing
Langston University



Rebecca Burmeister, DPM, MPH

Podiatry Research Fellow in Diabetic Limb Preservation The University of Michigan Medicine



Edward Chao, DO, MA

Clinical Professor of Medicine University of California, San Diego and Veterans' Administration HealthCare System, San Diego



Amit Gupta, MBBS, DNB, MNAMS, FACE, FACP, FRCP (Glasgow, Edinburgh), FRSSDI, FICP

Director, Centre For Diabetes Care Greater Noida, India



Samar Hafida, MD

Staff Endocrinologist and Assistant Medical Director, Global Education & Care, Joslin Diabetes Center

Clinical Instructor Harvard School of Medicine



Cassandra Henderson, MD, CDCES

Maternal Fetal Medicine Consultant and Diabetes Care and Education Specialist. Garden OB GYN



Joan Hill, RDN, CDCES, LDN

Owner

Hill Nutrition Consultant



Tony Lam, PhD

Professor & John Kitson McIvor Endowed Chair in Diabetes Research Canada Research Chair (Tier 1) in Diabetes

& Obesity
Toronto General Hospital Research Institute
& University of Toronto

Associate Director of Research, Banting and Best Diabetes Centre

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Jessica Pierce, PhD
Research Scientist, Nemours Center for
Healthcare Delivery Science
Pediatric Psychologist, Nemours Children's
Hospital
Associate Professor, University of Central Florida



**Darleen Sandoval, PhD**Professor
University of Colorado, Anschutz Medical
Campus

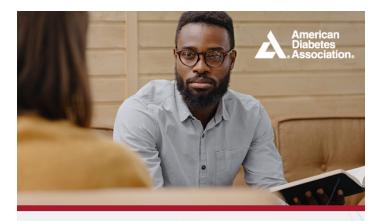


Joni Williams, MD, MPH
Assistant Professor of Medicine
Medical College of Wisconsin

College of Medicine



Jenise Wong, MD, PhD
Associate Professor of Pediatrics, Division of Endocrinology
University of California San Francisco



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professional.diabetes.org/mhp\_listing

The ADA sincerely thanks everyone who applied to join the Membership Advisory Group. Individuals who were not selected this year are highly encouraged to apply again in the future, as limited spots were available. For more information, visit **professional.diabetes.org/MAG**.

Clinical News

### **ADA Journals Now Hosted on the Silverchair Platform**

The American Diabetes Association (ADA) is pleased to announce that its peer-reviewed scientific and medical journals—Diabetes, Diabetes Care, Clinical Diabetes, and Diabetes Spectrum—are now hosted on the cutting-edge Silverchair online platform. The migration to the Silverchair platform will bring the ADA's journals, clinical compendia, professional books, multimedia presentations, and other resources together within a single online infrastructure, providing a unified user experience for content discovery.

As of December 20, 2021, the ADA's new web portal for professional publications (**diabetesjournals.org**) hosts the following types of content on the Silverchair platform:

- The peer-reviewed scientific and medical journals Diabetes, Diabetes Care, Clinical Diabetes, and Diabetes Spectrum
- The Standards of Medical Care in Diabetes, the ADA's guidelines for diabetes treatment, care, and prevention
- Meeting abstracts from the ADA's annual Scientific Sessions, the largest conference in the world devoted to diabetes-related research, care, and professional education
- The ADA's Diabetes Core Update podcast and other forms of multimedia and custom content

Starting in April, the new platform will also host ADA professional books, including the popular Medical Management series, the Association's Clinical Compendia series, and timely news, interviews, and editorials for diabetes researchers and health care professionals.

If you have not already done so, please take a moment to activate your online access to your journal subscriptions on the new platform. You can do so by clicking on the "Sign In" link in the upper right corner of any of the pages on **diabetesjournals.org**, selecting "Reset Password," and then entering the email address associated with your subscriptions in the appropriate field. You will then receive instructions by email for setting up a user ID and password.

For more information related to the management of your ADA journal subscriptions, please refer to our list of **FAQs** or contact **ADApubs@diabetes.org**.

### New *Clinical Diabetes* Video Series: Combination Injectable Therapy in Patients With Type 2 Diabetes

The editors of *Clinical Diabetes*, the American Diabetes Association's journal for primary and point-of-care providers, are excited to announce the publication of a digital program focused on the use of combination injectable therapy in people with type 2 diabetes. In this short **video series**, Drs. Vivian A. Fonseca, Minisha Sood, and Rodolfo J. Galindo discuss the pathophysiological changes that occur during the progression of type 2 diabetes, with a particular focus on the key role of declining  $\beta$ -cell function, as well as the clinical characteristics—long duration of type 2 diabetes and A1C  $\geq 9\%$ —that are indicative of diminishing  $\beta$ -cell function.

Drs. Fonseca, Sood, and Galindo also review the clinical data that support the use of available treatment options for these individuals, consistent with current diabetes treatment guidelines, and specifically examine the role of fixed-ratio combination therapies of a basal insulin and a glucagon-like peptide 1 receptor agonist.

The **videos** and an **executive summary** of the panel's recommendations are available on the *Clinical Diabetes* website.

The is the second in an ongoing series of digital programs to be published in *Clinical Diabetes*. The **first video series**, moderated by John Anderson, MD, focused on approaches to effectively initiate

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Video 1. Need for Glycemic Control in Individuals With A1C ≥9%



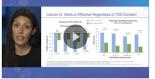
Video 2. Role and Clinical Characteristics of Beta-Cell Dysfunction in the Progression of Type 2 Diabetes



Video 3. Clinical Implications of Beta-Cell Status or Therapeutic Selection



Video 4. Insulin/GLP-1 RA Fixed-Ratio Combination Therapy After Failure of Oral Antihyperglycemic Agent



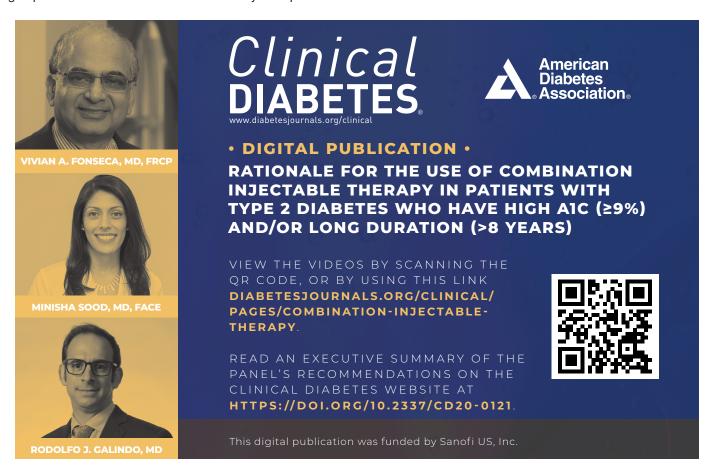
Video 5. Insulin/GLP-1 RA Fixed-Ratio Combination Therapy After Failure of Previous GLP-1 RA Therapy



Video 6. Practical Tips for Using Fixed-Ratio Combination Therapies

basal insulin treatment in people with type 2 diabetes. Financial support for both digital programs was provided by Sanofi.

Sign up for Clinical Diabetes e-Alerts to stay on top of the latest trends and innovations in diabetes care and treatment.



### **New Federal Regulations Expand Access to Continuous Glucose Monitoring**

After many months leading advocacy on behalf of the diabetes community, the American Diabetes Association (ADA) scored a major victory in late December 2021, when the U.S. government issued regulations—reflecting ADA's numerous requests—broadening access to continuous glucose monitoring (CGM) for people with diabetes.

The Centers for Medicare & Medicaid Services (CMS) released the Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) **final rule**, which will go into effect on February 19.

When the proposed rule was released in November 2020, it included a provision that would provide reimbursement under Medicare for all adjunctive CGM systems. The ADA strongly supported this provision and commended CMS for recognizing the functional benefits of the full range of CGM systems on the market. At the same time, ADA urged CMS not to finalize another proposed provision. That would have cut reimbursement for a different type of CGM—one the agency referred to as "manual and nonadjunctive because it does not include alarms—so greatly as to render it financially out of reach for tens of thousands of people with diabetes who currently use that system. The ADA could not be more thrilled that CMS' final rule aligned with its many requests. This is an important win for all Medicare recipients with diabetes and for the entire diabetes community because private insurers often adopt coverage policies first enacted by CMS.

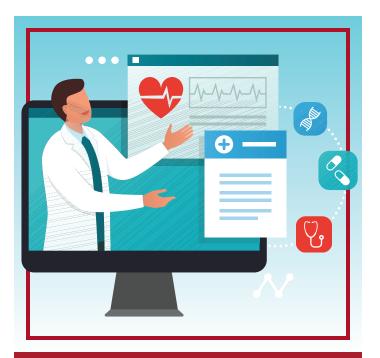
### **Summit Shines Light on Costs of Diabetes Care**

The American Diabetes Association held its firstever virtual Cost of Care Summit in November 2021. A diverse group of leading policymakers, people with diabetes, clinicians, advocates, and industry stakeholders gathered to discuss the current unparalleled high costs of living with diabetes. From the price of insulin and other drugs to the costs borne because of certain insurance practices, to the costs of hospitalization and outpatient treatment, to the enormous expense of devices and supplies, diabetes places an outsized burden on those with the disease. More information can be found here: Policy Action to Lower the Cost of Diabetes Care.

### **Updated Advocacy Position Statements Available**

- The American Diabetes Association's (ADA's)
   position statement on Diabetes Management in
   Detention Facilities was updated in October 2021.
   The statement outlines what constitutes adequate
   medical care for inmates in prisons and jails.
- The ADA's new statement on COVID-19 prevention strategies in the school setting was released on Dec. 2, 2021.
- The ADA's new Diabetes Medical Management Plan for schools is now available, along with an explanation of updates/changes and information on how to use this guidance. A special thanks to Safe at School Working Group member Janet Rodriguez, BSN, RN, CDCES, from the University of South Florida, who led the effort.

The ADA's Advocacy Team looks forward to continuing our work together to benefit people with diabetes.



#### **SmartBrief E-News**

DiabetesPro SmartBrief is a free daily diabetes briefing on what is going on in the clinical diabetes community.

Sign up today for daily emails.





### **Professional Education**

Making Diabetes Technology Work

"Using diabetes technology is a win-win proposition for everyone, including people living with diabetes, their families or care partners, and their health care teams. And, implementing diabetes technology in the clinical setting is easier than you think!"

Dr. Samar Hafida

Co-chair, Making Diabetes Technology Work program

Register for **Making Diabetes Technology Work**, a free continuing education program developed by leading diabetes experts for health care professionals like you!

Learn how to incorporate cutting-edge diabetes technology and data into your practice and discover how to match your patients to the right technology to reach their targets.

### Register today at professionaleducation.diabetes.org

This program is supported by an unrestricted educational grant from Abbott Diabetes Care.

### Diabetes Care and Education Specialists Can Help Prevent Type 2 Diabetes

One fact that can't be ignored: prediabetes is a serious health condition that affects millions of Americans.

People with blood glucose levels that are higher than normal, but not high enough to be diagnosed with type 2 diabetes, are considered to have prediabetes. In the United States, 88 million adults have prediabetes, but 85% of them don't know they have it. Risk factors include being over 45 years of age, having a family history of diabetes, being overweight, and not being physically active.

Without active intervention through lifestyle change, including improvements in exercise and nutrition, prediabetes often progresses to type 2 diabetes, which can result in dangerous complications, including kidney damage, nerve damage, amputations, blindness, heart disease, and stroke.

Early intervention is the first step on the path to prevent or delay the onset of type 2 diabetes.

"Diabetes prevalence is very high in my community of the Imperial Valley. Our community has both a DSMES program and a DPP program.

Many of our health care providers will refer patients with diabetes and patients with prediabetes to me. I have the privilege of sending patients with diabetes to our diabetes education program, as well as sending our patients with prediabetes to our diabetes prevention program. Having both of these educational programs is a win-win for our community."



CDCES Testimonial: Stephen Jaime, RN, MS, CNS, El Centro Regional Medical Center, El Centro, CA

#### The National Diabetes Prevention Program Can Help

The Centers for Disease Control and Prevention's (CDC's) **National Diabetes Prevention Program**—or National DPP—was created in 2010 to address the increasing burden of prediabetes and type 2 diabetes in the United States. This national effort created partnerships between public and private organizations to offer evidence-based, cost-effective interventions that help prevent type 2 diabetes in communities across the country.

One key feature of the National DPP is the **CDC-recognized lifestyle change program**, which is based on findings from the National Institutes of Health's (NIH's) **Diabetes Prevention Program research study** (Diabetes Prevention Program Research Group. N Engl J Med 2002;346:393–403). The National DPP focuses on nutritional and physical activity modification for individuals with prediabetes and others who are at risk for type 2 diabetes.

The year-long program follows a research-based curriculum that starts with weekly group meetings for the first 6 months, followed by routine follow-up sessions to keep participants on track.

### Attention CDCESs: Help Patients Prevent as Well as Manage Type 2 Diabetes

Certified diabetes care and education specialists (CDCESs) play a crucial role in helping people with diabetes manage their disease. But did you know that your training, background, and experiences make you a perfect fit for the National DPP's Prevent T2 lifestyle change curriculum?

We encourage you to consider starting a lifestyle change program in conjunction with your diabetes self-management education and support (DSMES) services to help proactively reduce the risk of diabetes in your community. Research has shown that people with prediabetes who complete this structured lifestyle change program can cut their risk of developing type 2 diabetes by up to 58% and that their reduction in risk continues for years to come.

Through the year-long program, trained lifestyle coaches provide tailored, culturally competent guidance to participants, ensuring they stay motivated to:

- Make small changes to the way they eat without giving up the foods they love
- Increase their physical activity levels to at least 30 minutes per day, a few days per week
- Manage their stress

Your patients may be eligible to participate in a lifestyle change program if they have had gestational diabetes or qualify through the results of any of three blood tests (A1C,

"As a CDCES, I am receiving more referrals for patients with insulin resistance and prediabetes. Simultaneously implementing a lifestyle change program for diabetes prevention (using the Prevent T2 curriculum) allows me to provide a research-based intervention to patients who in the past wouldn't have been referred to me until they had been diagnosed with type 2 diabetes. Offering the lifestyle change program in addition to DSMES ensures that I can help patients regardless of where they are on their journey."



CDCES Testimonial: Brent Wilson, RD/LD, CDCES, INTEGRIS Diabetes Center, Oklahoma City, OK

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#### **Professional News**

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fasting plasma glucose, or 2-hour plasma glucose after a 75-g glucose load), as well as through the **ADA Risk Test**. Given the genetic component of type 2 diabetes risk, this is also an opportunity to prevent the disease before it develops among your patients' family members.

Anyone can learn more about their risk for type 2 diabetes and how to connect to a CDC-recognized lifestyle change program by visiting **diabetes.org/myrisk**.

CDC-recognized lifestyle change programs are also billable to Medicare for beneficiaries participating in the program. Review these **CDC resources** to prepare for offering and maintaining a program in your area.

More information on the clinical benefits and structure of lifestyle change programs for preventing type 2 diabetes is available from the **ADA**. For your data collection and reporting needs, check out the ADA's **DPP** *Express* charting platform developed for programs providing a National DPP lifestyle change program.

### **Key Medical Organizations Recommend Lifestyle Change Programs**

The ADA's *Standards of Medical Care in Diabetes* recommends that providers refer patients with prediabetes to a lifestyle change program that is modeled on the NIH's Diabetes Prevention Program. In addition, the U.S. Preventive Services Task Force recommends that providers offer or refer patients with abnormal blood glucose to intensive behavioral counseling interventions such as the National DPP to promote a healthy diet and physical activity.

Relevant International Classification of Diseases, 10th revision, **codes** for prediabetes are available from the American Medical Association.

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### **DPP** Express: Do More With Your Data



### **DPP** Express

Simplify data collection and reporting for your Centers for Disease Control and Prevention (CDC)–recognized lifestyle change programs with DPP *Express*.

If you have a CDC-recognized lifestyle change program as part of the National Diabetes Prevention Program, you know how difficult it can be to collect and report data accurately and meet all the requirements of CDC's Diabetes Prevention Recognition Program (DPRP). If you are tired of spending hours tracking the evaluation data required by the DPRP and manually generating required reports, then it is time to try the American Diabetes Association's (ADA's) DPP Express!

DPP Express is a user-friendly, Health Insurance Portability and Accountability Act (HIPAA)—compliant, Web-based charting platform that allows users to collect data and generate reports that align with DPRP requirements. The newest version of DPP Express allows an unlimited number of users to access the platform with features that include:

- The ability to import data from previous DPRP submission files
- A unified class documentation page, allowing you to quickly chart across an entire cohort of participants
- The ability to move a participant from one cohort to another quickly and easily
- Documentation of patient biometric data such as A1C, blood pressure, and lipid panels
- · Powerful reporting features including:
  - » Accurate comma-separated value reports available at the click of a button to meet all current and future CDC guidelines
  - » Medicare Diabetes Prevention Program (MDPP) billing and cross-walk reports for easy Medicare reporting submissions

- » Comprehensive program metric reporting showing your program's performance
- » Multiple report filters allowing you to focus on specific segments of your program
- » Detailed participant summary reports showing progress over time in a polished PDF format suitable for sharing with participants and health care providers
- » At-a-glance participant attendance reports by cohort

The ADA offers optional advanced features to help increase the efficiency and success of your program. Some of these include:

- Recruitment features allowing you to record recruitment activities and track potential participants and their level of interest in enrolling in your program
- The ability to send texts and email messages to several or all of your recruits and participants directly from DPP Express
- Identification and tracking of who is referring participants to your program
- · Additional billing functionality

ADA's complete onboarding process will get you up to speed quickly, with monthly training seminars to ensure that you are always supported. DPP *Express* also includes access to a support site that will walk you through all of the platform features, with helpful videos and tutorials to make using the system a breeze. If you need additional assistance, our friendly customer service staff are happy to help at no additional charge.

DPP *Express* is available for a minimal fee to all CDC-recognized lifestyle change programs, including ADA-recognized diabetes self-management education and support services. To learn more about DPP *Express* and its capabilities or to join, email **DPPExpress@diabetes.org** or visit **diabetes.org/dppexpress**.





### **Important Dates**

**Poster Submission Opened** December 1, 2021

**Poster Submission Deadline** March 20, 2022

**Early-bird Registration Cutoff** March 21, 2022

**Pre-Registration Deadline** May 22, 2022

**Ponte Vedra Beach** (Jacksonville), FL

Earn up to 20.5 CE Credits

Join your colleagues in Ponte Vedra Beach, Florida for the

### 36th Annual Clinical Conference on Diabetes — Diabetes Reset: Resilience & Reframing Diabetes Care

This conference is designed for both primary care providers and diabetes experts who see patients every day, including physicians, physician assistants, nurses, nurse practitioners, dietitians, pharmacists, psychologists, social workers, certified diabetes care and education specialists and other health care professionals who care for patients with diabetes, at risk for diabetes, and who manage diabetes related complications.

The 36th Annual Clinical Conference on Diabetes will provide a comprehensive update on the treatment of diabetes, cardiovascular disease, obesity, and comorbidities. Organized by the American Diabetes Association® (ADA), the Clinical Conference is designed to share current clinical information using different teaching methods, including didactic general sessions and small-group, interactive learning opportunities.

Sessions will include the latest information on the management of diabetes and its complications, practical tips, and proven strategies for improving patient care, and translation of the latest diabetes research into clinical practice.

### Registration is open.

For more information visit www.professional.diabetes.org/cc.



The latest, cutting-edge advances in diabetes research, prevention, and care.



### The 82nd Scientific Sessions will be held in New Orleans, LA, and Virtually!

We know many of you are eager to get back to participating in the Scientific Sessions in person, networking with colleagues, attending presentations on the latest scientific advances and groundbreaking research, and experiencing live Exhibit and Poster Halls. Therefore, we encourage everyone to join us June 3–7, 2022, at the Ernest N. Morial Convention Center in New Orleans, LA. The health and safety of our attendees remain our top priority, and we will follow all recommended COVID-19 safety practices. Please visit our website for more information about our COVID-19 policy.

For those unable to join us in person, we are also planning a virtual program to ensure that as many people as possible can participate. More information about the hybrid meeting is available on scientificsessions.diabetes.org.

### Registration and Housing Is Open

Visit scientificsessions.diabetes.org to register and reserve your hotel today! Hotel reservations will be available on a first-come, first-served basis. Reserve your room early to get your first-choice hotel. Also, register early to take advantage of the discounted rates.

Become a member or renew your membership now to be eligible for the Member registration rates. To qualify for the Member rate, your Medicine & Science or Health Care & Education membership must be active through June 30, 2022, at the time of registration.



There are companies claiming to offer registration and housing services for the ADA's

Scientific Sessions that are not affiliated with the ADA and do not offer any services on our behalf. You may receive emails or phone calls from these companies urging you to book hotel rooms or register. Registration and housing should only be accessed from scientificsessions.diabetes.org, and reserved through the ADA's official

registration and housing provider, Convention Management Resources, (CMR) and ADA Internationals Group Department (ADA-IGD). If you do not see this logo on the website, it is not our official provider!

If you are contacted by any agency other than CMR or ADA-IGD, please immediately notify CMR at https://ada.cmrushelp.com/s/contactsupport.

### Important Registration and Housing Deadlines

- Early Bird Registration Deadline February 17, 2022
- Advance Registration Deadline April 21, 2022
- Housing Deadline May 6, 2022
- Registration opens in New Orleans June 2, 2022

### Late-Breaking Abstract Submission Is Open

Submit your research through the late-breaking abstract program. The program allows for inclusion of later

submissions of newly completed research and clinical trials. Abstracts should describe a noteworthy and timely research advance that has not been previously published or submitted.

Late-breaking abstracts will be accepted until Monday, March 7, 2022, at 5:00 p.m. ET.

Visit scientificsessions.diabetes.org and click on the Abstracts tab to view detailed submission guidelines and to submit your research.

#### Scientific Sessions Portal

This time-saving system eliminates the process of re-entering contact information and disclosures for authors listed on more than one abstract. All abstract authors are responsible for entering their information into the Portal once per meeting.

**Don't wait until the last minute!** Individuals who plan to be a co-author on an abstract submission should complete the disclosure process now.

Abstract submitters must first finalize their disclosure record to gain access to the abstract submission site.

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**Note:** Authors who submitted an abstract or were listed as an author on an abstract during this year's regular submission period already have an account in the Scientific Sessions portal. Those authors do not need to create a new account or re-enter their disclosure record.

Visit **scientificsessions.diabetes.org** to view step-by-step Portal instructions.

#### **Spotlight on Sessions**

We are excited to highlight a few sessions you do not want to miss at this year's meeting. In addition to more than 180 other sessions, make sure to leave room in your schedule for the following sessions:

- NIDDK Early Career Investigator Symposium: Novel Diabetes Prevention and Treatment Approaches in Underserved Populations
- Future of Diabetes—The Next Frontier with Dual Incretin
- Type 1 Diabetes Intervention Trials: TrialNet Abatacept Prevention

Trial & Low-dose IL-2 in Recently Diagnosed Type 1 Diabetes

### Professional Interest Group Discussions

Share your views during hot-topic sessions hosted by the ADA's Professional Interest Groups on the latest in research and care specific to your specialty. The following interactive, lunchtime sessions will be offered:

- Behavioral Medicine & Psychology
- Clinical Centers & Programs
- Diabetes & Cardiovascular Disease
- Diabetes In Youth
- Diabetes Self-Management Education & Support
- Diabetes Technology
- Exercise Physiology
- Eye Health
- Foot Care
- Health Care Delivery & Quality Improvement

- Immunology, Immunogenetics, & Transplantation
- Islet Biology, Development, & Function
- Nutritional Science & Metabolism
- Pregnancy & Reproductive Health
- Public Health & Epidemiology

Several of the Interest Groups will also present awards at the 82nd Scientific Sessions. To learn more and join Interest Groups, visit professional. diabetes.org/interestgroups.

#### Women's Interprofessional Network Session

The Women's Interprofessional Network of the American Diabetes Association (WIN ADA) is the world's leading network of women clinicians, scientists, and educators in the diabetes field. WIN ADA will host multiple events at the 82nd Scientific Sessions, including an interactive mini-symposium and an evening networking reception. Learn more and become a WIN ADA member today at professional.diabetes.org/WINADA.

### **WIN ADA**

The Women's Interprofessional Network of the American Diabetes Association (WIN ADA)

LEARN MORE AT professional.diabetes.org/winada





### **Recipients Selected for Health Disparities and Diabetes Research Awards**

The American Diabetes Association (ADA) has selected eight award recipients for its Health Disparities and Diabetes Research Awards (Junior Faculty Development and Innovative Clinical or Translational Science award mechanisms). This research is crucially important and prioritizes the impact of health disparities on the diabetes community to address health inequities. The ADA has broadened its reach into the health disparities space to accomplish the goal of identifying and ending systemic health inequities and reducing the impact of disproportionately high rates of diabetes in underrepresented communities. These research awards, which began on November 15, 2021, provide up to \$200,000 per year for up to 3 years, depending on award type.



Healthy Outcomes through Peer Educators (HOPE) Eva Marie Vivian, PharmD

University of Wisconsin-Madison



SMS texting for diabetes control among homeless persons

Ramin Asgary, MD
The George Washington University



Pilot study of a culturally tailored diabetes education curriculum with real-time continuous

glucose monitoring in a Latinx population with type 2 diabetes

**Nicole Ehrhardt, MD** University of Washington



Diabetes learning in virtual environments just in time for community reentry Louise Reagan, PhD

University of Connecticut School of Nursing



Improving appetite self-regulation in African Americans with type 2 diabetes Rachel Goode, PhD

University of North Carolina at Chapel Hill



Intensive behavioral health intervention for improving health equity in pediatric diabetes

Anthony Vesco, PhD
Ann and Robert H. Lurie Children's
Hospital of Chicago



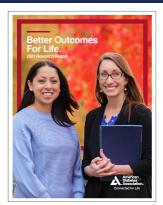
Tailoring initial type 2 diabetes care to meet the needs of younger Latinx adults: a randomized pilot study

**Anjali Gopalan, MD**Kaiser Permanente Northern California



Diabetes inspired culinary education (DICE): an innovative approach to type 1 diabetes management

for at-risk youth
Catherine McManus, PhD
Case Western Reserve University



# Coming Soon: the ADA's 2021 Annual Research Report

Watch for the American Diabetes Association's 2021 Annual Research Report, which will be published on the ADA's **DiabetesPro** website in February 2022.

### New Spotlight the Science Series

The American Diabetes Association (ADA) recently launched a new monthly digital series through Facebook LIVE called *Spotlight the Science*. This engaging and informative conversation features ADA-funded investigators highlighting the critically important work being done to accelerate innovations ensuring the best possible therapies for people with diabetes, drive research that improves the lives of those affected by diabetes, and make life better for people with diabetes by creating resources and tools to support them throughout their life journey. We invite you to view our initial three webinars. Click on each presenter name below to access the programs.

**Dr. Marie-France Hivert** 

Dr. Judith Agudo

Dr. Senta Georgia

Be sure to **follow us on Facebook** to stay updated on the latest funded research to prevent, cure, and manage diabetes!

Upcoming Grant Administration Deadlines for Currently Funded Investigators	
Final reports for award holders with a December 31, 2021, end date	March 1, 2022
Scientific progress reports for award holders with a July 1 start date	May 1, 2022
Pathway mid-year progress reports	May 1, 2022

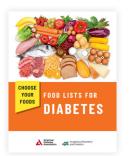


### **Choose Your Foods**

### Diabetes meal planning based on choice!

Published with the Academy of Nutrition and Dietetics, the Choose Your Foods series is the most trusted meal planning tool for diabetes and has been used by nutrition professionals for years to help patients make meal planning decisions, lose weight, and manage glucose levels. Recently updated, it is now better than ever!

# **Choose Your Foods Series: Patient Diabetes Nutrition Education Made Simple**



### Choose Your Foods: Food Lists for Diabetes, 5th Edition

No more "exchanging" — Diabetes meal planning based on choice! Now readers can plan meals with these comprehensive food lists to help manage blood glucose levels. Patients can use these comprehensive food

lists to plan meals. This new edition includes carbohydrate counts and choice values for a wider variety of foods; portion weights in ounces; and more. Lists are grouped into carbohydrate, fat, and protein choices and now allow patients to understand the overall patterns of healthy eating by choosing foods from lists categorized by starches, protein, fat, fruit, milk, snacks, and desserts.



### Choose Your Foods: Food Lists for Weight Management, 5th Edition

Choose the best foods for weight loss! Diabetes food lists for weight management help create the best diabetes care plan. Patients with diabetes can achieve weight-loss goals with food lists that make it easy

to build healthy meals by understanding how carbohydrate, protein, and fat can be combined into eating plans they choose. This new edition includes carbohydrate counts and choice values for a wider variety of foods; portion weights in ounces; and more. Lists are grouped into carbohydrate, fat, and protein choices and now allow patients to understand the overall patterns of healthy eating by choosing foods from lists categorized by starches, protein, fat, fruit, milk, snacks, and desserts.

For more information call 1-800-232-6733 or shop at ShopDiabetes.org.



### Choose Your Foods: Plan Your Meals with the Plate Method, 3rd Edition

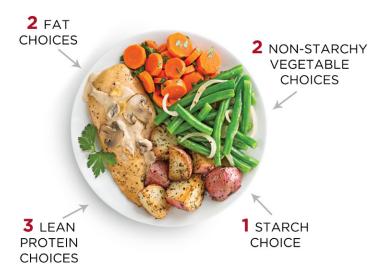
Diabetes meal planning made easy! The Plate Method helps simplify healthy meal planning and better management of blood glucose levels.

### Choose Your Foods: Match Your Insulin to Your Carbs, 4th Edition

Get better glucose control! Help patients manage their blood glucose levels by matching their insulin to their carbohydrate consumption.

### Choose Your Foods: Count Your Carbs, 4th Edition

Carb counting doesn't need to be difficult! This simple guide shows where the carbs are and how to make balanced food choices throughout the day.



## **DiabetesPro** QUARTERLY

AMERICAN DIABETES ASSOCIATION NEWS FOR PROFESSIONAL MEMBERS

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Connected for Life

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