



**Fall 2026**

Greetings from the Education Recognition Program (ERP) team!

This fall, we are excited to provide you with updates on various initiatives, webinars, and CEU opportunities from the American Diabetes Association® (ADA). We are also pleased to spotlight one of our ERP programs: The Boice-Willis Clinic's diabetes self-management education and support (DSMES) program.

We would like to thank each and every one of you for all that you do for people with diabetes.

## What's New

### ERP Updates

Registration for the upcoming **ERP Medicare Diabetes Services Reimbursement Symposium: From Guidance to Multi-Practice Models** is now live.

This symposium is an accredited healthcare professional continuing education program that will award physicians, physician assistants, nurses, registered dietitian nutritionists (RDNs), pharmacists, and certified diabetes care and education specialists (CDCESs) that attend 5.5 CEUs. The program's goal is to increase participant access to quality, evidence-based, and sustainable DSMES services.

The one-day course will take a deep dive into billing for diabetes self-management training (DSMT), medical nutrition therapy (MNT), and other services that are provided to people with diabetes at various locations such as hospitals, physician offices, RD private practice, federally qualified health centers (FQHCs), and pharmacies. Current information on delivery of DSMT via telehealth will also be discussed. The program is designed for adult learners, is interactive, and promotes networking and best practice sharing.

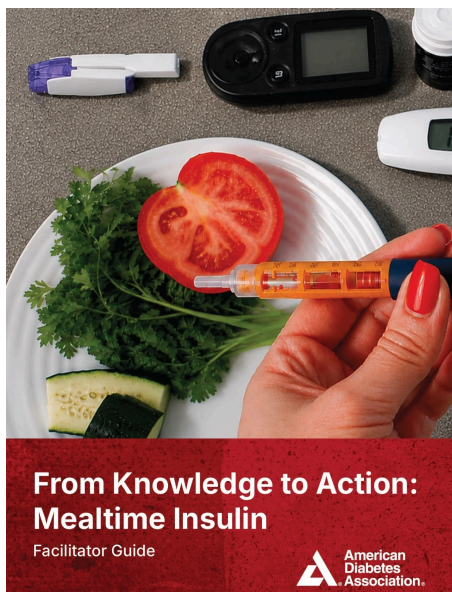
**Please note:** This symposium will be available on demand a few weeks after the live event for those who were unable to attend the live meeting or who wish to rewatch the content.

- **When:** Friday, September 25
- **Time:** 11:00 a.m.-5:00 p.m. ET

- **Cost:** \$150.00
- **CEU opportunity:** 5 CEUs
- **Where:** Zoom

[Register Now](#)

## Coming Soon to ERP University: The ADA's New Mealtime Insulin Toolkit Webinar!



Mealtime insulin is a critical part of diabetes management, but safe and effective use requires more than simply taking insulin before meals. Individuals need clear education on how to match insulin doses to food intake, blood glucose levels, activity, and changing daily needs. The ADA's mealtime insulin toolkit is designed to help diabetes education programs address these challenges by supporting clear, consistent, and practical education about prandial insulin.

The toolkit consists of a large poster, accompanying facilitator guide, as well as a patient take-home handout. English and Spanish versions are available!

## ERP Spotlight

### The Boice-Willis Clinic's Diabetes Self-Management Education and Support Program

The Boice-Willis Clinic's DSMES program plays a vital role in improving glycemic outcomes, enhancing patient self-efficacy, and supporting long-term chronic disease management for individuals living with diabetes in rural North Carolina. Our program, accredited since 1999, is part of the multi-specialty practice, Boice-Willis Clinic, PA, with over 50 providers representing specialty care in nine areas of practice. Serving over 40,000 patients across seven locations, the DSMES program aligns nicely with Boice-Willis' commitment to provide value-based care to our patients and community.

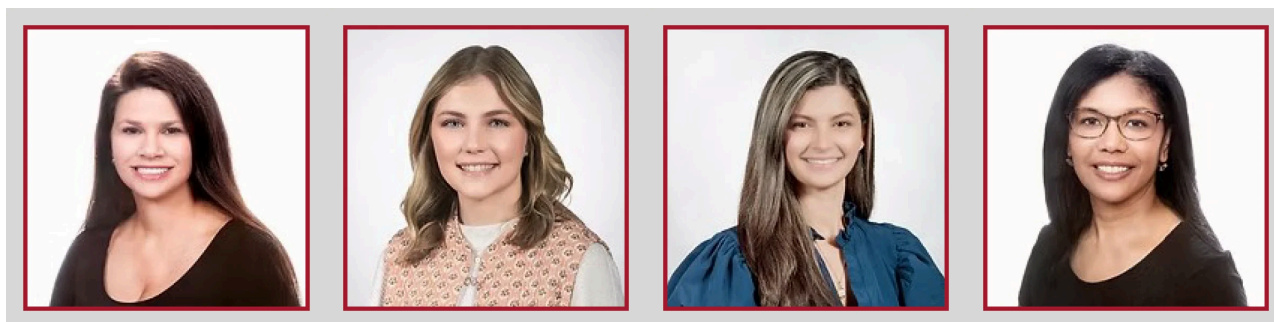
The program provides a monthly, three-session DSMES class series facilitated by CDCESs, RDNs, and registered nurses (RNs). The curriculum is grounded in health literacy principles, adult learning, and evidence-based behavior change strategies that empower participants to develop practical, sustainable self-management skills.

Our interdisciplinary Endocrinology team consists of two endocrinologists supported by nurse practitioners, RDNs, RNs—many of whom maintain CDCES certification—and experienced medical assistants. This collaborative care model ensures coordinated, comprehensive diabetes management through medical nutrition therapy, medication education, individualized goal setting, blood glucose monitoring education, and ongoing self-management support tailored to each patient's needs.

The program consistently demonstrates meaningful clinical outcomes. During the most recent reporting year, DSMES participants achieved a mean A1C reduction of 1.7 percentage points, with average A1C levels improving from 9.3% at baseline to 7.6% following program completion.

Our program is focused on a patient-centered, value-based care that extends beyond medical history, laboratory values, and medication management. We recognize the critical role that social determinants of health, individual goals, health literacy, and access to community resources play in successful diabetes management. By addressing these factors alongside evidence-based clinical care, we help patients overcome barriers, build confidence, and achieve lasting behavior change.

This comprehensive approach has resulted in consistently high patient satisfaction, measurable improvements in quality of life outcomes assessed annually, and strong patient engagement and retention. Through interdisciplinary collaboration, individualized education, and ongoing support, the Boice-Willis Clinic's DSMES program equips individuals with the knowledge, skills, and confidence needed to successfully manage diabetes and improve their long-term health outcomes.



Pictured (from left to right): Allison Jenkins, MS, RDN, LDN, CDCES; Jessica Staton, MS, RDN, LDN; Drew Newton, MS, RDN, LDN; and Wendy Moore, RN, CDCES

## ADA Webinars and Podcasts

### On-Demand Webinar: *Ketone 101: Monitoring, Management, and DKA Risk Across Populations*

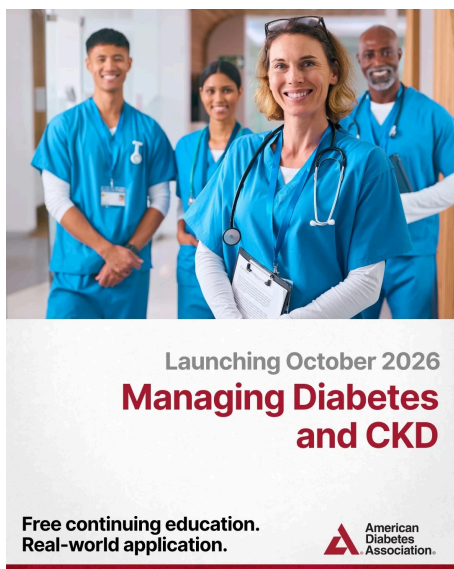
ERP instructional team members are encouraged to watch the recording of this webinar to strengthen their understanding of ketones, why ketone monitoring matters, and how greater awareness can support diabetes care and education. This engaging discussion offers practical insights to help instructional team members feel more informed and confident when discussing ketone awareness, ketone monitoring, and strategies to reduce the risk of diabetic ketoacidosis (DKA). Watch the recording to learn how ketone education can make a meaningful difference for people living with diabetes.

[View the Webinar](#)

### Podcast: Continuous Ketone Monitoring

Watch the latest Diabetes Core Update special edition podcast episode to learn more about continuous ketone monitoring and its potential impact on diabetes care. In this episode, host Neil Skolnik, MD, speaks with Guillermo Umpierrez, MD, about why ketone monitoring matters, how real-time ketone tracking may help identify risk for DKA earlier, and the potential role of this emerging technology in improving diabetes care.

[Listen Now](#)



### Managing Diabetes and CKD

This October, join us for Managing Diabetes and CKD—a free continuing education program that will feature three engaging modules on diabetes and kidney disease management.

Learn through interactive cases, videos, simulations, and knowledge checks while earning CE credit and an ADA certificate of completion. Registration will open soon!

## Share Practical Guidance for Understanding and Managing Insulin Therapy

Share trusted resources with the people you care for to encourage insulin self-management and support-informed decision-making between visits. Whether they are newly diagnosed or looking for practical guidance, this insulin routines page is designed to help them better understand their options and take an active role in their treatment journey.

[Explore Resources](#)

## Elevate Your Practice and Earn CE

Earn FREE CE with the ADA's [Institute of Learning](#). Access 200+ expert-led courses, webinars, case studies, and more professional development opportunities built to fit your schedule and improve care. Course and program highlights include:

- [Diabetes Is Primary® 2026](#)
- [Changing the Conversation on Obesity](#)
- [Making Diabetes Technology Work](#)
- [Integrating Continuous Glucose Monitoring Into Personalized Nutrition for Diabetes Care](#)

[Explore Resources](#)

## Encourage Patients to Share Their Story

Personal stories can help people feel understood, encouraged, and connected. Invite the people you treat to share their lived experiences with obesity to inspire others, foster understanding, and help build a more supportive community.

[Learn More](#)

## Nutrition and Wellness

### Free ADA Cooking Classes Online

You and your patients are invited to the ADA's virtual cooking classes that feature a professional chef preparing a recipe from [Diabetes Food Hub®](#). Participants will

also learn about diabetes management from the ADA's RDN and diabetes educator.

Sign up for and share upcoming classes on September 16, October 6, November 10, and December 8. [Registration](#) for each class will be posted several weeks prior to the event date.

Cooking class recordings are hosted on the [ADA's YouTube Channel](#).

## Advocacy Corner

### **The INSULIN Act Advances Out of Senate Committee—Action Still Needed**

On July 22, the bipartisan Improving Needed Safeguards for Users of Lifesaving Insulin Now Act (INSULIN) Act passed out of the Senate Health, Education, Labor and Pensions Committee by a vote of 17-5. This important milestone moves the legislation one step closer to helping millions of people afford the insulin they need. The bill includes a provision that would limit out-of-pocket insulin costs to \$35 per month for people with private or employer-sponsored health insurance. Now, we must build support for the INSULIN Act across the full Senate. Contact your senators and urge them to support the bill and help bring it to the Senate floor for a vote.

#### Take Action Today

### **New Survey: Nearly 40% of Insulin Users Polled Pay More Than \$150 Per Month**

Newly released polling by the ADA finds that among respondents who rely on insulin, 72% report paying more than \$35 per month, and nearly 40% pay more than \$150 monthly.

#### Learn More

### **Advocates Halt Proposed Overhaul of Federal Grant Rules**

Thanks to nearly half a million advocates, Congress heard our message loud and clear! As a direct result of your advocacy, the Senate's continuing resolution (CR) pauses the administration's proposed changes to federal financial assistance guidelines for research and programs. While this is an important step forward, the fight is not over. We will need all voices to urge the House to include the same

protection in their CR this fall. Read more and stay tuned for updates and requests for action.

### Read More

**[Learn more about the ADA's statement](#)** on continued federal funding for diabetes research and prevention programs.

## Medicaid Study

A new study released by the ADA estimates that, absent policy change, nearly 500,000 Medicaid beneficiaries with diabetes will lose healthcare coverage by 2034. According to the research—commissioned by the ADA from Health Management Associates—coverage losses will disproportionately affect Americans who live in rural communities and states that expanded their Medicaid programs following the Patient Protection and Affordable Care Act. Under current law, 1.5 million Medicaid enrollees with diabetes who maintain coverage through the program will be subject to new cost-sharing obligations by 2029. Average cost-sharing for these individuals with diabetes could add up to \$1,000 per year in new out-of-pocket costs in some states.

### Read the Study

You are receiving this email as part of your participation in the ADA's ERP. These quarterly messages include important participant information and are not subject to marketing email opt-outs. Please email [ERP@diabetes.org](mailto:ERP@diabetes.org) with questions.



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