

IDOH point of contact:

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Background of public health issue

In 2020, 12.4% of Indiana's adult population was diagnosed with diabetes compared to the national average of 10.6%. Overall, diabetes was the seventh-leading cause of death in Indiana in 2020. Not all those with diabetes have similar outcomes; disparities exist. Diabetes was the fourth-leading cause of death for blacks, seventh for white males, third for black males, and third for black females. *Data source, Indiana Behavioral Risk Factor Surveillance, 2020.*

While effective treatment exists, diabetes is often uncontrolled or poorly controlled, needlessly interfering with school, work, and leisure activities. Anyone, anywhere, at any age can develop type 2 diabetes. Many adults have had type 2 diabetes for several years before their symptoms are recognized. By the time they are diagnosed, many have already started to develop complications of type 2 diabetes, such as visual impairment, kidney failure, heart disease, stroke, and nerve damage. Detecting and diagnosing type 2 diabetes early means that it can be treated, and the risk of serious complications can be reduced.

Purpose/description of proposal and funded activities

Type 2 diabetes is influenced by behaviors that can be modified to reduce or avoid the onset of this disease. Smoking, overweight and obesity, physical inactivity, high blood pressure and high cholesterol can be addressed with programs that have been shown to work. These include the Centers for Disease Control and Prevention's (CDC) National Diabetes Prevention Program (National DPP).

This grant opportunity is seeking proposals which will increase the use of the National DPP by offering more physical and virtual programs and diabetes self-management opportunities by starting a program and/or training staff to deliver the program.

This grant is designed to accomplish the following:

1. Increase the number of Hoosier adults with pre-diabetes who have completed the National DPP (from 661 persons in 2017 to 1,000 persons by 2021)
 - a. Increase the number of CDC recognized National DPP in Indiana.
 - b. Increase the number of National DPP that are reimbursed by insurance
2. Applicants will be required to develop a recognized National DPP at their facility, using the CDC National DPP curriculum.
 - a. Create an National DPP program using the CDC's [Diabetes Prevention Recognition Program](#)
 - b. Use the CDCs curriculum [PreventT2](#)
 - c. Describe how COVID-19 will be incorporated into the screening process

Eligible groups to receive funding include

Note: Applicants should be able to provide diabetes screening, diagnosis and treatment or referral to treatment for program participants whose blood pressure, hemoglobin A1C, or cholesterol values are high or abnormal.

- Hospitals, especially those with Diabetes Self-Management Education Programs in place
- Federally Qualified Health Centers
- Community health centers
- Associations serving specific populations, including people of color and people over 65 years of age
- Other non-profit and for-profit community-based organizations.

Health equity statement (required):

Describe populations disproportionately impacted by the specific topic area and how applicant will address these populations specifically.

Please refer to the General Grant Guidance for additional details.

Metrics and evaluation of funded activities

Measures to be collected regularly and submitted monthly to the Indiana Department of Health (IDOH):

1. Demographics:
 - a. Number of individuals served by race (Black/African American, American Indian/Alaska Native/Native Hawaiian/Other Pacific Islander, Asian, Caucasian/White, etc.)
 - b. Number of individuals served by ethnicity [Hispanic/Latin(a/o/x), other]
 - c. Number of individuals served by gender/gender identity (males, females, those who prefer not to answer)
 - d. Number of members of the LGBTQ+ community served
 - e. Age ranges served
 - f. Number of individuals served with a primary language other than English
 - g. Number of unique individuals served who meet at least one of the following:
 - i. Active enrollment in MEDICAID/HIP or
 - ii. Active enrollment in SNAP/Food Stamps or
 - iii. Active enrollment in TANF or
 - iv. Residing in a household at or below 200% of poverty per the HHS Poverty Guideline as noted in the HHS Poverty Guidelines for 2022 ([Poverty Guidelines | ASPE \(hhs.gov\)](#))
 - h. Additional factors, including but not limited to education level, disability, substance abuse, mental illness, etc.



2. Health Equity: Please share progress made toward achieving your health equity goals (as defined in your Health Equity Statement).
3. Participation: Number of unique individuals served
4. Program Area Metrics:
 - a. Screening
 - i. Number of individuals completing a pre-diabetes risk test
 - ii. Number of individuals completing a diabetes screening
 - iii. Number of participants diagnosed with diabetes (based on CDC guidelines)
 - iv. Number of diabetic individuals receiving a metabolic screening
 - b. Hemoglobin A1C Levels
 - i. Number of individuals 18-75 years of age with diabetes who had hemoglobin A1C $\geq$ 9.0%
 - ii. Number of individuals 18-75 years of age with diabetes who had hemoglobin A1C between 6.5% and 9.0%
 - iii. Number of individuals with a Hemoglobin A1C above 9.0% during a previous screening that lowered their A1C below 9.0%
 - c. National Diabetes Prevention Programs
 - i. Has your program implemented a National DPP?
 - ii. Does your organization plan to implement a new National DPP?
 - iii. Number of participants enrolled in a National DPP
 - iv. Number of staff members completing National DPP educator training
 - v. Number of individuals educated by your program (regardless of enrollment status)

Provide a plan for how you will evaluate the program over your grant project period.

The above measures may be altered at any time at the discretion of the Health Innovation Partnerships and Programs Division of IDOH.

These are the metrics required for submission to IDOH; however, grantees implementing a National Diabetes Prevention Program in accordance with CDC guidelines will also be required to report additional measures to the Diabetes Prevention Recognition Program (DPRP). These measures can be found at [Data Dictionary: Evaluation Data Elements \(cdc.gov\)](https://data.cdc.gov/dpprc/DataDictionary).

References

- National Diabetes Prevention Program Customer Service Center: <https://nationaldppcsc.cdc.gov/s/>
- National Diabetes Prevention Program Coverage Toolkit: <https://coveragetoolkit.org/>
- CDC National Diabetes Prevention Program: <https://www.cdc.gov/diabetes/prevention/index.html>



- CMS Diabetes Prevention Programs: Equity Tailored Resources:
<https://www.cms.gov/files/document/culturally-and-linguistically-tailored-type-2-diabetes-prevention-resource.pdf>

