As a health center, your mission is to improve the health and well-being of your community. You work every day to prevent disease, address the social drivers of health, and reduce barriers to care. That work is especially important for people with diabetes. By helping individuals with diabetes get active, eat healthy, take their medication, and other self-care behaviors, you help your patients make positive lifestyle changes that reduce their risk of diabetes complications and deaths.

Did You Know?

- Health centers have experienced a 30% growth in the number of patients with diabetes, with 1 out of 7 patients having diabetes.
- Diabetes causes more blindness, kidney failure, and lower limb amputations than any other single disease.
- Underserved populations, including agricultural workers, may be less likely to be screened, tested, or connected to diabetes self-management education and support services.

But, what if you could help your patients prevent or delay type 2 diabetes? Before the high A1C, high blood pressure, and high cholesterol? Before the vision loss, kidney disease, and heart disease?

Reducing the Risk for Type 2 Diabetes

Through the Centers for Disease Control and Prevention’s National Diabetes Prevention Program, people with prediabetes can make small changes that reduce their risk of developing type 2 diabetes by more than half. Health centers can offer and integrate this highly effective lifestyle change program into chronic care management, diabetes education and support, and other services.

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Improve your community health and deliver care that matters!

2. HRSA Bureau of Primary Care 2017 Uniform Data System and 2016 National Committee for Quality Assurance.
Don’t miss out on the opportunity to improve your diabetes prevention and care by implementing the National DPP at your health center!

<table>
<thead>
<tr>
<th>Patient Benefits:</th>
<th>Health Center Benefits:</th>
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<tbody>
<tr>
<td><strong>Early detection and treatment</strong> lowers the risk of type 2 diabetes, heart disease, and stroke</td>
<td><strong>Increased revenue</strong> through more billable services</td>
</tr>
<tr>
<td><strong>Support from a coordinated care team</strong> to address social drivers of health and connect patients to high value care that addresses their needs</td>
<td><strong>Integrated diabetes care team</strong> that connects patients to the care they need including blood glucose testing, blood pressure monitoring, intensive behavioral treatment for obesity, and more!</td>
</tr>
<tr>
<td><strong>Increased access</strong> to evidence-based interventions that improve health</td>
<td><strong>Obtain incentive payments</strong> for improved overall performance in Clinical Quality Measures</td>
</tr>
</tbody>
</table>

**Here is what other DPP providers have to say about the program!**

“Patients need to learn healthy behaviors to reduce their risks for pre-diabetes and diabetes. It takes time and education and the National DPP program has helped us educate our patients and help them reach their health goals!”

-Vicky Reyes Acosta, MS, RDN, CDCES, Center for Healthy Living Dignity Health Bakersfield Memorial Hospital, Bakersfield, CA

“Diabetes management and prevention is not easy and there are many barriers our patients face, but the National DPP helps patients get the support they need to succeed!”

-Oliva Hernández Maruri, Health Educator, Seamar Monroe Clinic, Yakima, WA.

**Are you ready to start your own National DPP program?**

Get the support you need with resources designed to help community health centers activate this program!

**Association of Diabetes Care & Education Specialists (ADCES):**

https://www.diabeteseducator.org/prevention/work-in-prevention

**The Centers for Disease Control and Prevention (CDC):**

https://www.cdc.gov/diabetes/prevention/about.htm

**The National Center for Farmworker Health:**

http://www.ncfh.org/diabetesresourcehub.html

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