

#### WHY REFER YOUR PATIENTS to the Diabetes Prevention Program

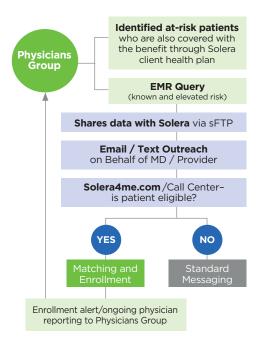
The National Diabetes Prevention Program (DPP) is a CDC sponsored, lifestyle change program to prevent or delay type 2 diabetes. Provided as a covered benefit by numerous health plans, the DPP is designed to help patients achieve long-term success in reducing their risk of type 2 diabetes. Referring your patients to DPP fulfills the USPSTF Grade B recommendation to refer patients at risk for cardiovascular disease (including patients with pre-diabetes) to intensive behavior counseling interventions to promote a healthful diet and physical activity. All DPP providers in the Solera network are recognized by the CDC to deliver the program.

Solera's consumer-driven approach matches people to the highest quality digital apps and in-person community DPP providers that meet each individual's goals, needs, and preferences.

### **NATIONAL DIABETES** PREVENTION PROGRAM



# PHYSICIAN/CARE TEAM REFERRAL MODEL



# **USPSTF RECOMMENDATION SUMMARY**

US PREVENTIVE SERVICES TASK FORCE RECOMMENDATIONS	POPULATION	GRADE
Offer intensive combined diet and physical activity intervention	Overweight or obese adults with cardiovascular risk conditions (including impaired fasting glucose levels and metabolic syndrome	<b>B</b> (Final) 2014

#### **NATIONAL REACH**





11,000+ LOCAL PROGRAM **LOCATIONS** 

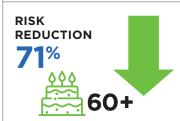
100,000+ **Enrolled in Solera DIABETES PREVENTION PROGRAM** 

Source: Solera 12 Month Member Satisfaction Survey Results - Q4 2018

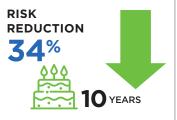
#### THE RESEARCH



Loss of 5 to 7% of body weight achieved by reducing calories and increasing physical activity to at least 150 minutes per week resulted in a 58% lower incidence of type 2 diabetes



For people 60 and older, the program reduced the incidence of type 2 diabetes by 71%



After 10 years, lifestyle change program participants had a 34% lower incidence of type 2 diabetes

Knowler WC, Barrett-Connor E, Fowler SE, et al. Reduction in the incidence of type 2 diabetes with lifestyle intervention or Metformin. The New England Journal of Medicine. 2002;346(6): 393-403.

