THE DIABETES PREVENTION PROGRAM
A proven method for saving lives and saving money

- The Diabetes Prevention Program (DPP) is a year-long lifestyle intervention for people living with pre-diabetes.
- There is robust evidence that DPP cuts the risk of developing diabetes by 58% despite a low cost of only $250 per patient. If all pre-diabetic New Jerseyans received DPP, net healthcare costs could decrease by an estimated $1.77 billion.
- Despite its proven effectiveness, neither Medicare nor New Jersey Medicaid pay for DPP. As a result, thousands more New Jerseyans develop diabetes, costing an average of $7,900 per patient per year, not including costs from lost productivity.

What is the Diabetes Prevention Program (DPP)?
The DPP is a year-long program made up of 16 weekly classes and monthly check-ins with a trained lifestyle coach. Classroom sessions teach participants how to increase their physical activity, manage stress, and eat a healthy diet, while the monthly check-ins focus on staying motivated and sustaining healthy habits. Participants aim to lose 7% of their body weight and exercise at least 150 minutes per week. The New Jersey YMCA Alliance offers this program in partnership with private insurance.

Why should New Jersey Medicaid cover the DPP?
DPP cuts the risk of developing diabetes by 58%. A 10-year randomized clinical trial comparing DPP, drug therapy, and standard advice to lose weight and exercise found that DPP achieved the best results among these interventions. Nearly two million New Jerseyans are pre-diabetic. If all pre-diabetic New Jerseyans could access DPP, net savings could reach $1.77 billion per year.

What should New Jersey do?
1. Medicaid managed care organizations (MCOs) can make arrangements with the YMCA or other organizations to provide the DPP to their beneficiaries.
2. The state Division of Medical Assistance and Health Services (DMAHS) can require MCOs to cover the DPP as part of the MCO contract, or work with MCOs to develop a pilot program under which beneficiaries receive the DPP.
3. The New Jersey State Legislature can add a statutory requirement for both fee-for-service Medicaid and MCOs to cover this lifesaving program, either through a pilot program or otherwise.

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