

**Form Approved
OMB No. 0920-1090
Exp. Date xx/xx/xxxx**

Spreadsheet for National DPP Grantees

Public reporting burden of this collection of information is estimated to vary from 30 minutes to 1 hour, with an average of 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the CDC/ATSDR Reports Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PFI (202) 462-1090)

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Instruction for Form Completion:Worksheet Definitions:

The "Site-level Data" tab is used for affiliate delivery sites that are CDC-recognized organizations wi

The "Coach-level Data" tab is used for all lifestyle coaches who deliver the CDC-recognized lifestyle

The "Class-level Data" tab is used for all lifestyle change classes offered at this site, as a result of th

The "Participant-level Data" tab is used for all participants attending the CDC-recognized lifestyle cl

Please note:

There are multiple boxes under each "response" column to allow for selection of more than one re:

For questions that require both a drop down response and a numeric value to be entered, there are

Please complete your data submission by September 30th, 2019 through the 1705 National Evaluat

PLEASE E-MAIL US AT NationalDPPEval@cdc.gov IF YOU HAVE ANY QUESTIONS. THANKS!

th assigned unique DPRP codes. It needs to be completed for each site receiving DP17-1705 change program offered at this site, as a result of the DP17-1705 cooperative agreement funding in each year of the project period.
ange program at this site, as a result of the DP17-1705 cooperative agreement funding in e

sponse per question.

e two separate boxes that are next to each other.

tion Reporting Portal in the Data Reporting for Evaluation and Monitoring of DP17-1705 (17

5 funding in each year of the project period.
unding in each year of the project period.

each year of the project period.

05 DREM) system with your assigned username and password.

Question	Code	Response				
Delivery Site (CDC-recognized organization with DPRP ORGCODE) Information						
1. Grantee Name	GRANTEE					
2. Site ORGCODE (MUST be the ORGCODE that is provided by the DPRP)	ORGCODE					
3. Grant Year	GRANTYR					
4. Fiscal Year	FISYR					
Strategy 1: Increase the availability of CDC-recognized organizations in underserved areas						
Activity 1: Identify new affiliate sites in underserved areas with the capacity to offer the lifestyle change program						
5. Did your site complete the CDC's Organizational Capacity Assessment before applying for CDC recognition?	SITECAPASSESS					
		If answered "Yes", please submit the results of your organization's capacity assessment as an attachment to NationalDPPEval@cdc.gov.				
6. In the current funding year, how did your site select class locations (if applicable) to deliver the lifestyle change program in underserved areas? Please select ALL that apply.	SITERECLOC		How did your site select class locations (if applicable) to deliver the lifestyle change program in underserved areas? Please select ALL that apply. (SITERECSTR)	For all the recruitment strategies selected, what types of locations were selected to deliver the lifestyle change program? Please select ALL that apply. (SITERECLOC)	Please describe why these locations were selected for program delivery (SITELOCWHY)	For each type of location selected, what was the number of locations selected to deliver the lifestyle change program? (SITELOCNUM)
		If you answered "Other", please specify.				
Activity 2: Provide affiliate sites the financial and technical assistance required to become a CDC-recognized organization						
7. What technical assistance (TA) did you receive during program start-up and/or for program implementation? Please provide up to 5 most helpful TA received for program implementation. Please select up to 5 that apply. Please also provide a brief description of additional TA that was needed but not received in the current funding year.	SITETA		Top 5 most helpful TA received (SITETA)	Please describe additional TA needed but not received, if any? (SITETANEED)		
		If you answered "Other", please specify.				
8. What resources did your site use for program implementation? Please provide up to 5 resources that were most needed for program implementation. For each resource used, please provide sources of funding. Please select ALL that apply.	SITERES		Top 5 resources needed for program implementation (SITERES)	Funding sources/In kind (SITERESFUND)	Please describe how all of the resources selected above were used (SITERESUSE)	
		If you answered "Other", please specify.				
9. In the current funding year, did your organization charge participants to attend the lifestyle change program (i.e. self-pay participants)? If able to report, what is the average annual enrollment cost for a participant who self-pays to participate in the National DPP lifestyle change program?	PARCHARGCOST		Did your organization charge participants to attend the lifestyle change program (i.e., self-pay participants)? (PARCHARGYN)	What is the average annual enrollment cost for a participant who self-pays to participate in the lifestyle change program? (PARCHARGCOST)		

Question	Code	Response				
Strategy 2: Increase clinician screening, detection, and referral of adults with prediabetes or at high risk for type 2 diabetes to CDC recognized organizations						
Activity 1: Provide technical assistance to CDC-recognized organizations on how to help health systems implement policy and practice changes to identify priority populations with prediabetes and refer them to the lifestyle change program						
10. Did you conduct any marketing activities to health care providers (HCPs) or health care systems about identifying priority populations and referring them to your organization's lifestyle change program? If No, skip to question 11.	SITEMARKHCPSPYN					
11. If Yes to Q10, what marketing strategies did you use to reach HCPs or health care systems to refer priority populations to your organization's lifestyle change program? Please select ALL that apply and note additional strategies under "other."			Marketing strategies used to reach HCPs or health care systems to refer priority populations (SITEMARKHCP)	Number of HCPs or health care systems exposed to each marketing strategy used (SITEMARKHCPNUM)		
		If you answered "Other", please specify.				
12. What tools/resources did you use to reach HCPs or health care systems to refer priority populations to your organization's lifestyle change program? If you provided additional resources beyond those listed, please note this under "other" and describe.	HCPTOOL		Tools/resources used to reach HCPs or health care systems to refer priority populations (HCPTOOL)	Number of HCPs or health care systems exposed to each tool or resource (if able to report) (HCPTOOLNUM)		
		If you answered "Other," please specify.				
13. Please select from the list all referral sources to the lifestyle change program. If able to report, please provide the total number of potential participants referred for each referral source. For referral sources from health care providers/systems, please provide mode of referral. Please select ALL that apply.	OREFLSOR		Referral sources (OREFLSOR)	For referral sources from health care providers/systems, please provide mode of referral (HCPREFMODE)	Total number of potential participants referred for each referral source (HCPREFNUM)	
		If you answered "Other", please specify.				

Question	Code	Response				
14. What were the recruitment places that your site used to reach priority populations of focus? For each place selected, please provide the total number of potential participants reached (if able to report). Among all of the recruitment places selected, please provide the recruitment methods you used. Please select ALL that apply.	RECRUTPL		What were the recruitment places that your site used to reach priority populations of focus? Please select ALL that apply (RECRUTPL)	Among all of the recruitment places selected, what were the recruitment methods you used? Please select ALL that apply. (RECRUMET)	Total number of potential participants reached for each recruitment place (RECRUTPARTNUM)	
		If you answered "Other", please specify.				
15. Please describe any factors that facilitated marketing to health systems and health care providers.	HCPSMARKFAC					
16. Please describe any barriers you experienced in marketing to health systems and health care providers, and strategies you used to address barriers.			Barriers in marketing to health care providers/systems to screen, test, and refer priority populations (HCPSMARKBAR)		Strategies to address barriers reported (HCPSMARKSTR)	

Strategy 3: Increase priority population awareness of prediabetes and enrollment in the lifestyle change program

Activity 1: Use the CDC National DPP Marketing Portfolio and other materials as appropriate to recruit, engage, and enroll priority populations in the lifestyle change program

17. For all priority populations of focus, what types of marketing strategies did you use to reach them? Please describe "Other" strategies used that don't fit into the categories provided. Please select ALL that apply.	SMARKSTR		For all priority populations of focus, what types of marketing strategies did you use to reach them? Please select ALL that apply. (SMARKSTR)			
			If you answered "Other", please specify.			
18. What channels did you use to reach people to enroll in the National DPP Lifestyle Change Program? Please describe "Other" channels used that don't fit into the categories provided. Please select ALL that apply. How many people did you reach with each channel? If able to report, please provide frequency per marketing channel used.	COMCHANNEL			What channels did you use to reach people to enroll in the National DPP Lifestyle Change Program? (COMCHANNEL)	If able to report, please provide frequency per marketing channel used. (COMCHANNELFREQ)	For each channel used, what was the total number of people reached? (COMCHANNELREACH)

Question	Code	Response				
		If you answered "Other", please specify.				
19. For current funding year, did you use a pay for outcome (PFO) or other type of value-based payment plan to cover enrollment costs for priority populations supported with 1705 funds? Please select the type of payment plan, and provide details of the payment/reimbursement arrangement. Please select ALL that apply.	PFOMODEL	Did you use a PFO or other value-based payment plan? (PFOMODELYN)	What type of PFO payment plan was used to cover enrollment costs for priority populations supported with 1705 funds? Please select ALL that apply. (PFOMODEL)	Please describe how payment/reimbursement was arranged. (PFOMODELDES)		
		If you answered "Other", please specify.				
Strategy 4: Ensure high rates of retention for priority population participants in the lifestyle change program						
Activity 1: Develop and/or adapt tools, materials, best practices, and advanced skills training for coaches to help CDC-recognized organizations support and retain priority population participants						
20. How have you adapted the lifestyle change program to address the specific cultural needs or preferences of one or more of your priority populations or focus? Please select ALL that apply.	SITEADAPT			Type of delivery adaptation (SITEADAPT)		
		If you answered "Other", please specify.				
21. For all priority populations of focus, what types of incentives are provided to participants to encourage program participation or completion? What are the funding sources for incentives provided? Please select ALL that apply. Please provide brief descriptions of how and when incentives were provided.	SITEINCENT		For all priority populations of focus, what types of incentives were provided? Please select ALL that apply. (SITEINCENT)	For each type of incentive selected, what are the funding sources for incentives provided? Please select ALL that apply. (SITEINCENTFUND)	Please describe how and when incentives selected were provided (SITEINCENTDES)	
		If you answered "Other", please specify.				
22. Which additional strategies or best practices (other than those reported in questions 20 & 21) did your site adopt in order to retain priority populations of focus? For all strategies or best practices adopted, please provide brief description of how and when they have been used to engage/retain priority populations of focus. Please select ALL that apply.	SRETAINSTR		Which additional strategies or best practices (other than those reported in questions 20 & 21) did your site adopt in order to retain priority populations of focus? Please select ALL that apply. (SRETAINSTR)	For all strategies or best practices adopted, please provide brief description of how and when they have been used to engage/retain priority populations of focus. (SRETAINSTRDES)		

Question	Code	Response				
		If you answered "Other", please specify.				
Strategy 5: Ensure that participation in the lifestyle change program is included as a covered benefit for priority populations						
Activity 1: Work with employers and public and private payers to promote the lifestyle change program as a covered benefit for priority populations						
23. Which types of payers reimbursed for the costs of priority populations enrolled in your lifestyle change program. Please select ALL that apply. For all types of payers selected, what were the names of the payers who reimbursed for the costs of priority populations enrolled in your lifestyle change program? What was the number of participants who received reimbursement from all payers (if able to report)?	SPAYTYPE		Which types of payers reimbursed for the costs of priority populations enrolled in your lifestyle change program. Please select ALL that apply. (SPAYTYPE)	For all types of payers selected, what were the names of the payers who reimbursed for the costs of priority populations enrolled in your lifestyle change program? (SPAYNAM)	What was the number of participants who received reimbursement from all payers (if able to report)? (SPAYPARTNUM)	
			If you answered "Other", please specify.			
Activity 2 . Provide technical assistance to CDC-recognized organizations serving priority populations on how to implement administrative systems required to bill and receive payment from payers						
24. If your site received reimbursement from payers selected in Q23 in the current funding year, for all type of payers, please select from the list which types of billing and coding systems were used, or which entities your site contracted with to submit claims. If able to report, please also provide the name(s) of third-party administrators used and the date claims were initiated. Please select ALL that apply.	SMDPPBILL			For all type of payers, which types of billing and coding systems were used to submit claims to payers? Please select ALL that apply. (SMDPPBILL)	If contracted with a third-party administrator (TPA) to provide billing and payment services, what was the name(s) of TPA your organization contracted with? (SBILLTPA)	What date was the claims processing system implemented? (SBILLCLAIM)
			If you answered "Other", please specify.			

For all lifestyle coaches who deliver the CDC-recognized lifestyle change program offered at this site and for all lifestyle coaches who deliver the CMS's Medicare Diabetes Prevention Program (MDPP), please provide the following information:

GRANTEE	ORGCODE	COACHID	COACHROLES	COACHROLESOTH
		<p>Please enter a unique de-identified Coach ID for each of the lifestyle coach delivering the program at this site (Please do not include any personally identifiable information such as name, birth data, social security number for Coach ID)</p>	<p>What were the roles of the lifestyle coach? Please select all that apply. If you answered "Other", please specify.</p>	<p>Please describe other role(s) of lifestyle coaches.</p>

ite, as a result of DP17-1705 cooperative agreement funding in the current funding year, please provide the following information: Provide their National Provider Identifier (NPI) as their Coach ID.

<p>What percent time did the lifestyle coach spend on each role selected?</p>	<p>What curriculum was the lifestyle coach trained? Please select all that apply. If you answered "Other", please specify.</p>	<p>Please describe other curriculum lifestyle coach was trained.</p>	<p>What types of additional trainings did the lifestyle coach receive? Please select all that apply. If you answered "Other", please specify.</p>	<p>Please describe other type(s) of additional trainings that the lifestyle coach received.</p>
<p>COACH%TIME</p>	<p>COACHCURTRAIN</p>	<p>OTHERCURTRAIN</p>	<p>COACHADDTRAIN</p>	<p>COACHOTHTRAIN</p>

Following information. Please provide one unique de-identified Coach ID per row. For

What types of qualifications (if applicable) does the lifestyle coach have? Please select ONE.	What are the types of funding sources for the lifestyle coach? Please select all that apply. If you answered "Other", please specify.	Please describe other type(s) of funding for the lifestyle coach.	If able to report, what is the average annual salary of the lifestyle coach?
COACHQUAL	COACHFUND	COACHFUNDOTH	COACHSAL

For all lifestyle change classes offered at this site, as a result of the DP17-1705 cooperative agreeme per row.

		Please enter a unique de-identified Class ID for this class.	Please select from the list of unique de-identified Coach IDs for the main lifestyle coach who delivered the program for this class.	What curriculum was used for this class?
GRANTEE	ORGCODE	CLASSID	COACHID	CURUSE

nt funding in current funding year, please provide the following information. Please provide one unique c

If you answered "Other", please describe other type of curriculum used.	What language was used for this class?	If you answered "Other", please describe the other language used.	What was the type of location (if applicable) for this class?	If you answered "Other", please describe other type of location.
CURUSEOTH	LANGUSE	LANGUSEOTH	CLASSLOC	CLASSLOCOTH

de-identified class ID

What was the mode of delivery for this class?	If applicable, what is the address for this class?
CLASSMODE	CLASSADD

For all participants attending the CDC-recognized lifestyle change program at this site agreement funding in current funding year, please provide the de-identified participant ID for the Prevention Recognition Program (DPRP) in the row below. Please provide one unique ID per participant.

		Please provide de-identified participant IDs who were enrolled as a result of 1705 funds.	Does the participant have a visual impairment and/or physical disability? Please select only ONE.
GRANTEE	ORGCODE	PARTICIP	VPDIS

te, as a result of the DP17-1705 cooperative
nant IDs (PARTICIP) submitted to the Diabetes
re participant ID per row.

Did the participant attend a Session Zero or Introductory Session before starting the lifestyle change program? Please select only ONE.	If able to report, what is the participants' ZIP code of residence?
SESSO	PARTICIPZIP

GRANTEE ORGCODE GRANTYR FISYR SITECAPASSESS SITERECSTR

1. AADE

Up to 25 alphanumeric characters; provided by DPRP

1. Year 1	1. 2018
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1. Yes

2. AAPCHO

2. Year 2	2. 2019
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2. No

3. ADA

3. Year 3	3. 2020
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3. Don't know/Not sure

4. APhA

4. Year 4	4. 2021
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1. Recruit via site organization's website

2. Recruit via email blast to partners

3. Recruit via leveraging pre-existing relationships with community-based organizations

4. Recruit via phone outreach to potential partners

5. Balm in
Gilead

5. Year 5	5. 2022
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5. Recruit via
press release

6. BWHI

6. Recruit via
collaborating with
other 1705
grantees and/or
affiliate sites

7.
HealthInsight

7. Select based on
demographics of
participants
targeted

8. NACDD

8. Partner with
employers to
offer the program
on-site

9. NAHH

9. Partner with third-party network to identify locations to deliver CDC-recognized lifestyle change program

10. Trinity Health

10. Other selection criteria

11. N/A

SITERECSTROTH	SITERECLOC	SITERECLOCOTH	SITELOCWHY	SITELOCNUM	SITETA
Open field for text	1. Local or community YMCAs	Open field for text	Open field for text	Number of locations selected per types of locations	1. Did not receive any TA for program start-up and/or for program implementation
	2. Community-Based Organizations				2. TA on how to apply for CDC recognition
	3. Universities/Schools				3. TA on how to collect and submit the required DPRP data elements to the CDC
	4. State/Local Health Departments				4. TA on how to select a CDC-approved lifestyle change program curriculum

5.
Hospitals/Health
Care
Systems/Medical
Groups/Physician
Practices

5. TA on how to
implement the
CDC-recognized
lifestyle change
program to meet
the DPRP
Standards
requirements

6. Community
Health Centers

6. TA on how to
interpret
participants' data
to monitor
program progress
and address
challenges in
meeting the DPRP
Standards

7. Federally
Qualified Health
Centers

7. TA on how to
collect and submit
the 1705
performance
measurement
data to CDC

8.
Pharmacies/Drug
Stores/Compounding
Pharmacies

8. TA on how to
collect and submit
the 1705 national
evaluation data
elements to CDC

9. Indian Health Service/Tribal/Urban Indian Health Systems

9. TA on how to tailor implementation of the lifestyle change program to meet the needs of specific priority populations

10. Business Coalitions on Health/Cooperative Extension Sites

10. TA on how to recruit and enroll targeted priority populations

11. Worksites/Employee Wellness Programs

11. TA on how to retain targeted priority populations in the yearlong lifestyle change program

12. Senior/Aging/Elder Centers

12. TA on how to interpret the 1705 performance measures and evaluation data to address challenges in meeting the 1705 goals/objectives

13. Health
Plans/Insurers

14. Faith-Based
Organizations/
Churches

15. For-profit
Private
Businesses

16. Telehealth

17. Other
(please specify)

18. N/A

13. TA related to
the MDPP (e.g.,
how to become
an MDPP supplier,
submitting claims,
etc.)

14. Other

15. N/A

SITETAOTH

TAPROVIDER

TAPROVIDEROTH

TAHELPYN

SITETANEED

SITERES

1. Your National Organization grantee

1. Yes

Open field for text

Open field for text

Open field for text

1. Office space, location to hold classes, materials, equipment, supplies

2. CDC

2. No

2. Labor/Personnel: lifestyle coaches and program coordinators and funding for staff training to deliver the lifestyle change program

3. Your national organization grantee's contractors

3. N/A

3. Incentives from other sources (not from 1705 funds) to health care providers/systems for participant referrals

4. Partners

4. Funding to offer an information session/session zero to potential participants

5. Other 1705
grantees

5. Travel budget for
site visit

6. Other 1705
affiliate sites

6. Marketing
materials; resources
for marketing
campaigns

7. Other

7. Other

8. N/A

8. N/A

SITERESOTH

SITERESFUND

SITERESFUNDOTH

SITERESUSE

PARTENRLCOSTYN

Open field for text

1. 1705 funding

Open field for text

Open field for text

1. No, did NOT use 1705 funding for participant enrollment

2. Employer/ Insurer reimbursement

2. Yes, used 1705 funding for participant enrollment and able to report (please report)

3. Other governmental funding

3. Yes, used 1705 funding for participant enrollment but NOT able to report

4. Other non-governmental funding

5. Participant fees
(for self-pay
participants)

6. In-kind from
partner
organization

7. Other

8. N/A

PARTENRLCOST

PARCHARGYN

(PARCHARGCOST

SCOVPOL

SCOVPOLOTH

Open field for text

1. No, do not charge a participant fee
2. Yes, and able to report
3. Yes, but not able to report
4. N/A

Open field for text

1. No policy in place for financing/reimbursement for the lifestyle change program

Open field for text

2. Employer

3. Private Insurer

4. Public Insurer

5. Grant Funds

5.
Organizational:
in-kind support
via participant
fee waiver

6. Don't
know/Not sure

7. Other

9. N/A

SITEMARKHCP

SCOVPOLTYPE	SCOVPOLTYPEOTH	SCOVPOLDES	SITEMARKHCP SYN	
			1. Yes	1. Conduct presentations about the National DPP lifestyle change program for health care providers at their practice sites or at health care organizations
1. Covered benefit	Open field for text	Open field for text		2. Distribute Prevent Diabetes STAT (Screen, Test, Act Today) toolkit's print materials at health care providers' practice facilities
2. Wellness program/benefit			2. No	3. Distribute grantee's developed print materials at health care providers' practice facilities
3. Enrollment fee waiver			3. N/A	4. Place media (TV, radio) or video ads targeting health care providers in delivery sites' markets or at their practices or systems
4. Pay for outcomes				

5. Conduct promotional activities at professional conferences targeting health care providers

5. Don't know/Not sure

6. Collaborate with local medical societies to conduct promotional activities targeting health care providers

6. Other

7. Use social media to conduct marketing campaigns targeting health care providers

7. N/A

8. Use health care provider champions to conduct promotional activities among their peers

9. Provide incentives (from other sources, not from 1705 funds) to health care providers to screen, test, and refer their patients to grantee's delivery sites

10. Direct contact via phone, email or face-to-face interaction

11. Other

12. N/A

SITEMARKHCPOTH	SITEMARKHCPNUM	SITEMARKHS	SITEMARKHSOTH
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Open field for text

Number of HCPs exposed to each marketing strategy used

1. Conduct presentations about the National DPP lifestyle change program for health care providers at their practice sites or at health care organizations

2. Distribute Prevent Diabetes STAT (Screen, Test, Act Today) toolkit's print materials at health care providers' practice facilities

3. Distribute grantee's developed print materials at health care providers' practice facilities

4. Place media (TV, radio) or video ads targeting health care providers in delivery sites' markets or at their practices or systems

Open field for text

5. Conduct promotional activities at professional conferences targeting health care providers

6. Collaborate with local medical societies to conduct promotional activities targeting health care providers

7. Use social media to conduct marketing campaigns targeting health care providers

8. Use health care provider champions to conduct promotional activities among their peers

9. Provide incentives (from other sources, not from 1705 funds) to health care providers to screen, test, and refer their patients to grantee's delivery sites

10. Direct contact via phone, email or face-to-face interaction

11. Other

12. N/A

SITEMARKHSNUM

HCPTOOL HCPTOOLOTH HCPTOOLNUM HSTOOL HSTOOLOTH

Number of health care systems exposed to each marketing strategy used

1. AMA/CDC STAT (Screen, Test, Act, Today) Open field for text

Number of HCPs exposed to each tool or resource

1. AMA/CDC STAT (Screen, Test, Act, Today) Open field for text

2. Community Clinical Linkages Guide

2. Community Clinical Linkages Guide

3. CDC PreventT2 marketing resources for health care providers

3. CDC PreventT2 marketing resources for health care providers

4. Handouts/materials developed by the grantee

4. Handouts/materials developed by the grantee

5. Other

5. Other

6. N/A

6. N/A

HSTOOLNUM	OREFLSOR	OREFLSOROTH	HCPREFMODE	HCPREFMODEOTH
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Number of health care systems exposed to each tool or resource

1. Health care providers/systems

Open field for text

1. Use CDC-developed bi-directional electronic-referral model/guidance via EHRs

Open field for text

2. Employers or employer's wellness programs

2. Use CDC-developed bi-directional referral model/guidance via fax, phone, or paper

3. Insurers or **Third-party administrators (TPAs)**

3. Use national organization grantee-developed bi-directional electronic-referral system via EHRs

4. State or local health departments or other government entity

4. Use national organization grantee-developed bi-directional referral system via fax, phone, or paper

5. Faith-based organizations or other non-profit/community-based organizations

5. Use one-way referral systems via EHRs

6. Self-referral or referral via org website/online participant portal or from family/friends

6. Use one-way referral systems via fax, phone, or paper

7. Community Health Workers

7. Receive a contact list of potential participants with prediabetes/at risk

8. Pharmacists or pharmacies

8. Other

9. Other

9. N/A

10. N/A or No
referral sources

HCPREFNUM	HCPREFENRNUM	RECRUTPL	RECRUTPLOTH	RECRUMET
Number of potential participants referred per each source of referrals	Number of participants enrolled (out of those referred) per each source of referrals	1. Did not conduct active recruitment from any places	Open field for text	1. Approaching participants one-on-one in their health care providers' offices
		2. Hospitals or health care systems (including hospital owned practices)		2. Call potential participants from contact list provided
		3. Physician practices not affiliated with a health care system		3. Mail promotional materials to potential participants from contact list provided
		4. Federally Qualified Health Center (FQHC)		4. Conduct or participate in health fairs and/or other community outreach activities (including blood glucose screening events at worksites)

<p>5. Indian Health Service (IHS) or tribal health systems</p>		<p>5. Conduct presentations about evidence-based lifestyle change program to promote recruitment and enrollment activities at employer worksites</p>
<p>6. Employers/worksites (including employer wellness programs)</p>		<p>6. Use alumni champion from previous lifestyle change classes (through word-of-mouth, phone, or email)</p>
<p>7. State or local health departments</p>		<p>7. Distribute grantee's developed print marketing materials at recruitment places</p>
<p>8. Other government entity</p>		<p>8. Other</p>

<p>9. Community center (i.e., library, Rotary Club, Lions Club, senior center, etc.)</p>	<p>9. N/A</p>	
<p>10. YMCA facilities</p>		
<p>11. Other fitness centers/gyms, not YMCA</p>		
<p>12. Faith-based organizations</p>		

RECRUMETOTH RECRUTPARTNUM RECRUTPARTENR HCPSMARKFAC HCPSMARKBAR

Open field for text Number of potential participants reached per each recruitment method Number of participants enrolled per each recruitment method Open field for text Open field for text

HCPSMARKSTR

SMARKSTRPOP

1. Not targeting specific priority populations

SMARKSTRPOPOTH

SMARKSTR	SMARKSTROTH
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Open field for text

2. Hispanics

Open field for text

Open field for text

1. Advertising/
media campaign

2. Print campaign or
dissemination

3. African-Americans

3. Public relations

4. Asian-Americans

4. Digital marketing

5. American Indians

5. Interpersonal approaches (talking with people individually or in groups)

6. Alaska Natives

6. Using champions

7. Pacific Islanders

7. Working through healthcare providers

8. People with visual impairments or physical disabilities

8. Working through employers or insurers

9. Men

9. Offering
monetary incentives

10. Geography: rural
or frontier

10. Offering non-
monetary incentives

11. Medicare
Beneficiaries

11. Other	
12. N/A	

12. Other

SMARKSTRREACH	COMCHANNEL	COMCHANNELOTH	COMCHANNELFREQ	COMCHANNELREACH
Number of priority population participants reached with each marketing strategy	1. Broadcast media (radio, TV) – measure of frequency = number of spots or broadcast stories	Open field for text	Open field for text	Number of priority population participants reached with each channel
	2. Newspapers/newsletters – measure of frequency = number of stories published			
	3. Web (web pages, banner ads, videos, pdfs) – measure of frequency = number of materials posted			
	4. Social media (Facebook, Twitter) – measure of frequency = number of posts made			

5. Print materials -
measure of
frequency =
number of different
materials produced
and number
actually
disseminated

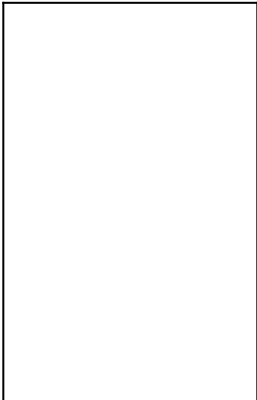
6. Billboards, bus or
bus shelter ads -
measure of
frequency =
number of
billboards or ads
displayed

7. Events (health
fairs, health
screenings, group
meetings) -
measure of
frequency =
number of health
fairs, health
screenings, etc.
held

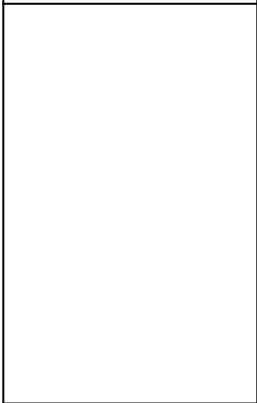
8. Presentations
(e.g., at community
centers) - measure
of frequency =
number of
presentations given

9. Community members (e.g., CHWs, pastors) - measure of frequency = number of times CHW contacted people, number of sermons given

10. Other

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11. N/A

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	PFOMODEL	PFOMODELOTH	PFOMODELDES	SITEADAPTPOP
PFOMODELYN				1. Not targeting specific priority populations
1. Yes, we used a pay for outcome (PFO) method	1. Pay-for-outcome model based on aggregated participant outcomes	Open field for text	Open field for text	2. Hispanics
2. Yes, we used a value-based method	2. Pay-for-outcome model based on individual participant outcomes			3. African-Americans
3. No, we used another method to cover enrollment costs for priority populations	3. Use Medicare's value-based-payment model 4. Other			4. Asian-Americans
4. No, we didn't use any PFO or value-based method to cover enrollment costs for priority populations				

5. N/A

5. American
Indians

6. Alaska Natives

7. Pacific Islanders

8. People with
visual impairments
or physical
disabilities

9. Men

10. Geography:
rural or frontier

11. Medicare
Beneficiaries

12. Other

13. N/A

SITEADAPTPOPOTH

SITEADAPT
1. Have not adapted the lifestyle change program
2. Used bilingual coaches to deliver the lifestyle change program to non-English speaking participants
3. Used cultural themes, images, or sayings
4. Used a culturally adapted curriculum or supplemental materials to address specific needs of priority populations

SITEADAPTOTH

SITEINCENT

SITEINCENTOTH

Open field for text

Open field for text

Open field for text

1. No incentives for participation or completion were offered

2. Pedometers

3. Digital physical activity trackers or wearables (e.g. FitBit)

4. Gym memberships

5. Incorporated cultural dietary restrictions or preferences
6. Provided incentives to retain participants
7. Other

5. Physical activity videos or CDs

6. Athletic gear or clothing

7. Calorie King or other types of diet tracking books

8. MyPlates; food scale or measuring devices

9. Cookbooks or kitchen tools

10. Vouchers for farmers markets or grocery stores

11. Discount coupons (e.g. for healthy food)

12. Gift cards

SITEINCENTFUND

SITEINCENTFUNDOTH

SITEINCENTPOP

SITEINCENTPOPTH

1. Not targeting specific
priority populations

1. 1705 funding

Open field for text

2. Hispanics

Open field for text

2. Employer/ Insurer
reimbursement

3. African-Americans

3. Other CDC
cooperative
agreement funding

4. Asian-Americans

4. Grant/cooperative
agreement funding
(other governmental)

5. American Indians

5. Grant funding
(other
nongovernmental)

6. Alaska Natives

6. Participant fees
(for self-pay
participants)

7. Pacific Islanders

7. In-kind from
partner organization

8. People with visual
impairments or physical
disabilities

8. Other

9. Men

9. N/A

10. Geography: rural or
frontier

11. Medicare
Beneficiaries

12. Other

13. N/A

SITEINCENTDES

SRETAINSTR

SRETAINSTROTH

SRETAINSTRPOP

1. Monitor participants' data to identify potential drop-outs

1. Not targeting specific priority populations

Open field for text

Open field for text

2. Use participants' data to intervene with people at risk to prevent them from dropping out before the end of the yearlong program

2. Hispanics

3. Send emails or text message reminders about upcoming scheduled sessions

3. African-Americans

4. Offer flexible schedules for make-up sessions

4. Asian-Americans

5. Offer additional modes of delivery for make-up sessions such as video conference, phone, online interaction with lifestyle coaches

5. American Indians

6. Engage participants outside of class settings such as field trips to grocery stores, cooking demo, group physical activities

6. Alaska Natives

7. Use social media platforms such as Facebook or Twitter for participants to share tips and challenges in meeting their lifestyle change goals

7. Pacific Islanders

8. Use CDC retention tool application to engage participants in the yearlong lifestyle change program

8. People with visual impairments or physical disabilities

9. Use other applications (please describe in text field) to engage participants in the yearlong lifestyle change program

9. Men

10. Conduct group celebrations (with/without family and friends) at certain milestones of the program (i.e. at 3, 6, and 9 months) to celebrate participants' successes

10. Geography: rural or frontier

11. Provide non-monetary tokens such as trophies or plaques to individual participants who meet milestones/achieve progress in the program

11. Medicare Beneficiaries

12. Other

12. Other

13. N/A

13. N/A

SRETAINSTRPOPOTH

SRETAINSTRDES

SPAYTYPE

SPAYTYPEOTH

SPAYNAM

1. Private or
commercial
health plans

Open field for text

Open field for text

Open field for
text

Open field for
text

2. Fully-insured
employers

3. Self-insured
employers

4. Medicaid
agencies

5. Medicaid
managed care
organizations
(MCOs)

6. Medicare via
MDPP

7. Other public
payer: TriCare
(Veteran Affairs)

8. Other

9. N/A

SPAYMARK	SPAYPARTNUM	SBILLPAYTYPE	SBILLPAYTYPEOTH	SMDPPBILL
Open field for text	Open field for text	1. Private or commercial health plans	Open field for text	1. Did not use any billing and coding systems to submit claims to payers
		2. Fully-insured employers		2. Used grantee's developed billing and coding systems to submit claims to payers
		3. Self-insured employers		3. Contracted with a third-party administrator (TPA) to provide billing and payment services
		4. Medicaid agencies		4. Established own invoicing method for billing directly to payers

5. Medicaid managed care organizations (MCOs)

5. Established a claims billing method (using a combination of ICD-10 and CPT codes) to submit claims directly to payers

6. Medicare via MDPP

6. National grantee organization submitted claims on behalf of sites to payers

7. Other public payer: TriCare (Veteran Affairs)

7. Other

8. Other

8. N/A

9. N/A

SMDPPBILLOTH

SBILLTPA

SBILLCLAIM

CURUSE

LANGUSE

1. CDC's Prevent T2 curriculum - English

1. English only

Open field for text Open field for text Open field for text

2. CDC's Prevent T2 curriculum - Spanish

2. Spanish only

3. 2012 CDC's National DPP curriculum- English

3. English but supplemented with Spanish materials

4. 2012 CDC's National DPP curriculum- Spanish

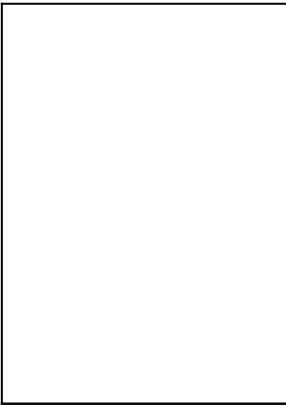
4. Chinese only

5. Y-DPP (Plan Forward) curriculum	5. English but supplemented with Chinese materials
6. Group Lifestyle Balance (U Pitt) curriculum	6. Native Hawaiian or Other Pacific Islander language or dialect only
7. Native Lifestyle Balance - Preventing Diabetes in American Indian Communities curriculum	7. American Indian or Alaska Native language only
8. Help Prevent Diabetes (Wake Forest) curriculum	8. English but supplemented with Native Hawaiian or Other Pacific Islander language or dialect materials

9. English but supplemented with American Indian or Alaska Native language materials

9. Other (please specify)

10. Other (please specify)

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CLASSLOC	CLASSMODE	VPDIS	SESSO	COACHROLES
1. Employer worksite	1. In-person only	1. Has visual impairment	1. Yes, attended a Session Zero or Introductory Session before starting the lifestyle change program	1. Deliver the National DPP lifestyle change program only
2. Faith-based location	2. Online only	2. Has physical disability	2. No, did not attend any Session Zero or Introductory Session	2. Serve as Program Coordinator or help with administration related to the National DPP lifestyle change program
3. Community center	3. Distance learning	3. Has visual impairment and physical disability	3. Don't know/Not applicable	3. Help with data collection and monitoring related to the National DPP lifestyle change program
4. Government building (non-community center)	4. Combination	4. Does not have visual impairment and/or physical disability		4. Help with participant recruitment and engagement related to the National DPP lifestyle change program

5. Small business worksite where participants are not employed (i.e., car dealership, grocery store, etc.)

5. Other role related to National DPP lifestyle change program

6. Health care or medical center/practice/clinic (non-hospital)

6. Other role within the organization not related to National DPP lifestyle change program

7. Hospital or building on hospital campus, not affiliated with university

8. University hospital building

9. YMCA facilities

10. Other fitness
centers/gyms, not
YMCA

11. Pharmacies/
drug stores/
compounding
pharmacies

12. Indian Health
Service/tribal/
urban Indian
health systems

13. University
Cooperative
Extension
Program

14. Other (please
specify)

15. Not
Applicable

COACHCURTRAIN	COACHADDTRAIN	COACHQUAL	COACHFUND
1. CDC's Prevent T2 curriculum - English		1. Certified Diabetes Educator	
2. CDC's Prevent T2 curriculum - Spanish	1. CDC's DPRP webinar: Welcome to the DPRP	2. Licensed Nutritionist or Dietitian	1. No additional funding needed: volunteer
3. 2012 CDC's National DPP curriculum-English	2. CDC's DPRP webinar: Submit for Success (data collection and monitoring)	3. Pharmacist	2. No additional funding needed: site-level staff responsibility added without pay increase
4. 2012 CDC's National DPP curriculum-Spanish	3. CDC's 1705 data system: Data Reporting for Evaluation And Monitoring	4. Registered Nurse	3. Insurance reimbursement
	4. Training to comply with federal Health Insurance Portability and Accountability Act (HIPAA)		4. Cooperative agreement funding (CDC)

<p>5. Y-DPP (Plan Forward) curriculum</p>		<p>5. Physician/Physician Assistant</p>	
<p>6. Group Lifestyle Balance (U Pitt) curriculum</p>	<p>5. Motivational interviewing training</p>	<p>6. Health Educator</p>	<p>5. Grant/cooperative agreement funding (other governmental)</p>
<p>7. Native Lifestyle Balance - Preventing Diabetes in American Indian Communities curriculum</p>	<p>6. Additional refresher training or training to develop new skills needed to effectively manage and deliver the yearlong lifestyle change program</p>	<p>7. Exercise Specialist</p>	<p>6. Grant funding (other nongovernmental)</p>
<p>7. Help Prevent Diabetes (Wake Forest) curriculum</p>	<p>7. Participate in lifestyle coach mentoring or a community of practice within the grantee's National DPP network</p>	<p>8. Community Health Worker</p>	<p>7. Participant fees pay part of lifestyle coach salary</p>
	<p>8. Training on a specific technology platform to be used to deliver the online lifestyle change program and engage participants</p>		<p>8. In-kind from partner organization</p>

9. Other lay coaches without any academic credentials

9. Other (please specify)

9. Other (please specify)

9. Other

10. Prior experience working with priority populations served

10. N/A

11. N/A

10. N/A