



Medicare Diabetes Prevention Program (MDPP) Shared Learning Resource

Spotlight on the Oregon Wellness Network: Partnership Development

In March 2023, as part of the Medicare Diabetes Prevention Program (MDPP) Enrollment Project*, the National Association of Chronic Disease Directors (NACDD) conducted an interview with Lavinia Goto from the Oregon Wellness Network (OWN), an MDPP supplier, to understand how OWN works with partners and builds lasting relationships that further diabetes prevention efforts in the state of Oregon. Lavinia was selected as an interviewee based on her role as a peer mentor in the MDPP Enrollment Project.

About This Resource

Based on the interview, this resource spotlights the unique structure of OWN and how it connects the populations it assists to services. Various best practices are distilled in the following sections:

- 1) [The Oregon Wellness Network](#)
- 2) [Oregon Wellness Network Partners](#)
- 3) [Best Practices for Partnership Development](#)

For more MDPP resources and webinars, please visit the [MDPP Implementation Resources](#) page on the National Diabetes Prevention Program (National DPP) Coverage Toolkit (Coverage Toolkit Home Page → Medicare → MDPP Implementation Resources). Please note, on the MDPP Implementation Resources page there is a section dedicated to webinars and resources about increasing referrals and retention that provide complementary information to this resource.

**The MDPP Enrollment Project is a technical assistance and funding opportunity for MDPP suppliers that are ready and able to focus efforts to increase enrollment in their programs but may be lacking the administrative and/or billing infrastructure to facilitate claims submission. In addition to providing access to a data management and billing and claims platform, this project provides access to technical assistance to help with provider referral support and communication and marketing support. The opportunity is funded and supported by the Centers for Disease Control and Prevention (CDC) Division of Diabetes Translation and NACDD with technical assistance support from the American Medical Association (AMA).*



To learn more, see the [MDPP Implementation Resources](#) page on the National DPP Coverage Toolkit.

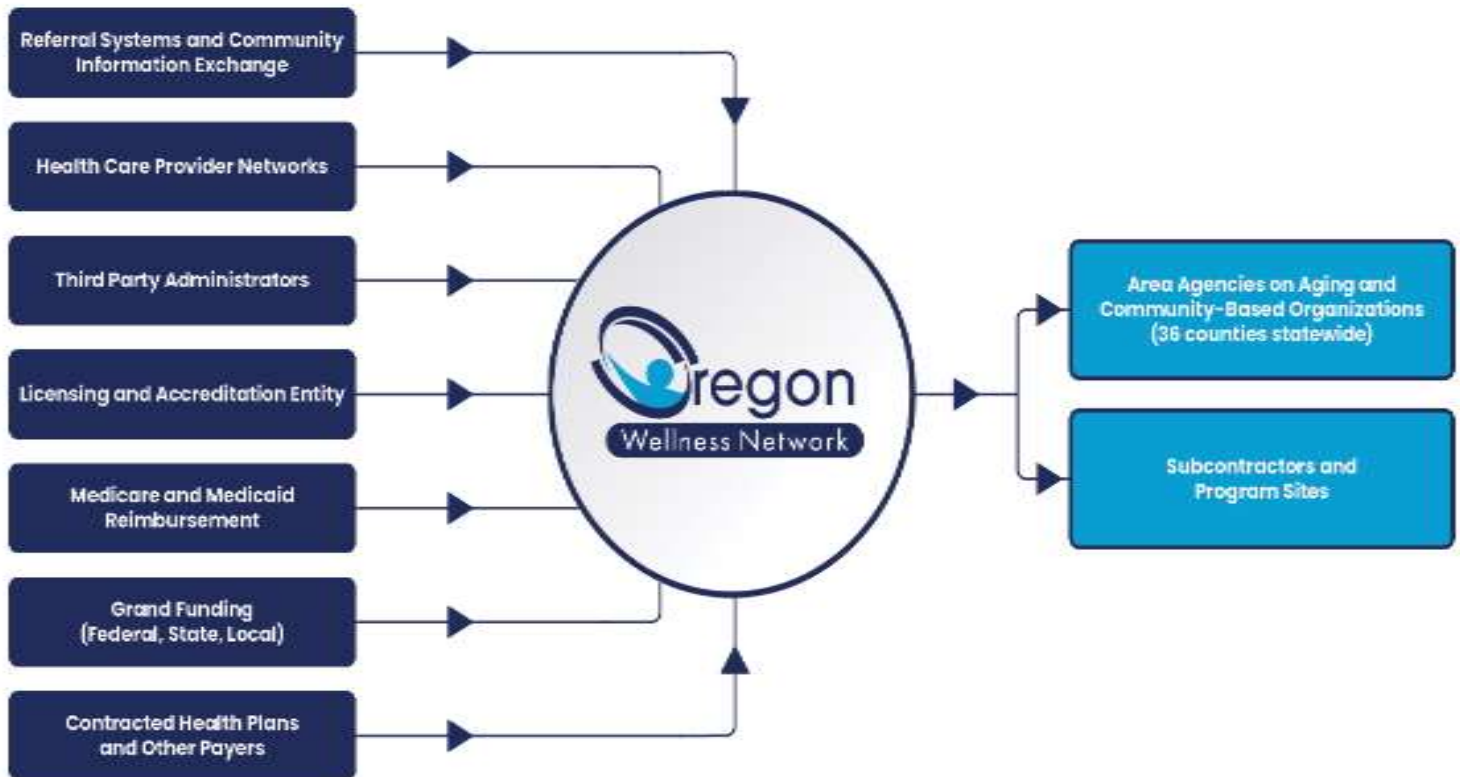
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The Oregon Wellness Network

About OWN

The [Oregon Wellness Network](#) (OWN) was established in 2017 and is a community integrated network of evidence-based intervention programs in the state of Oregon. OWN is a division of the [Oregon Association on Aging & Disabilities](#) (O4AD), which is a non-profit organization that advocates for services for older adults and individuals living with disabilities.

OWN serves as a network hub that connects Oregon’s 16 [Area Agencies on Aging](#) (AAAs, pronounced ‘triple As’) and many associated community-based organizations (CBOs) to services. As a National DPP and MDPP supplier, OWN’s vision is to help communities across Oregon create a culture of health and well-being, where prevention and wellness are the norm. Their vision is accomplished through the partnerships that have been created across the state of Oregon to help provide services to older adults and individuals living with disabilities. The following graphic, developed by OWN, depicts the network structure:



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UMBRELLA HUB ARRANGEMENT (UHA)

OWN has operated as a network hub since its inception in 2017, contracting with different payers and vendors to provide marketing, referral assistance, web development, and revenue cycle management to its AAA partners. OWN is currently working to become an official CDC-recognized umbrella hub organization (UHO). For more information about UHOs, please visit the [Umbrella Hub Arrangements](#) pages on the National DPP Coverage Toolkit (Coverage Toolkit Home Page → Sustainability → Umbrella Hub Arrangements).

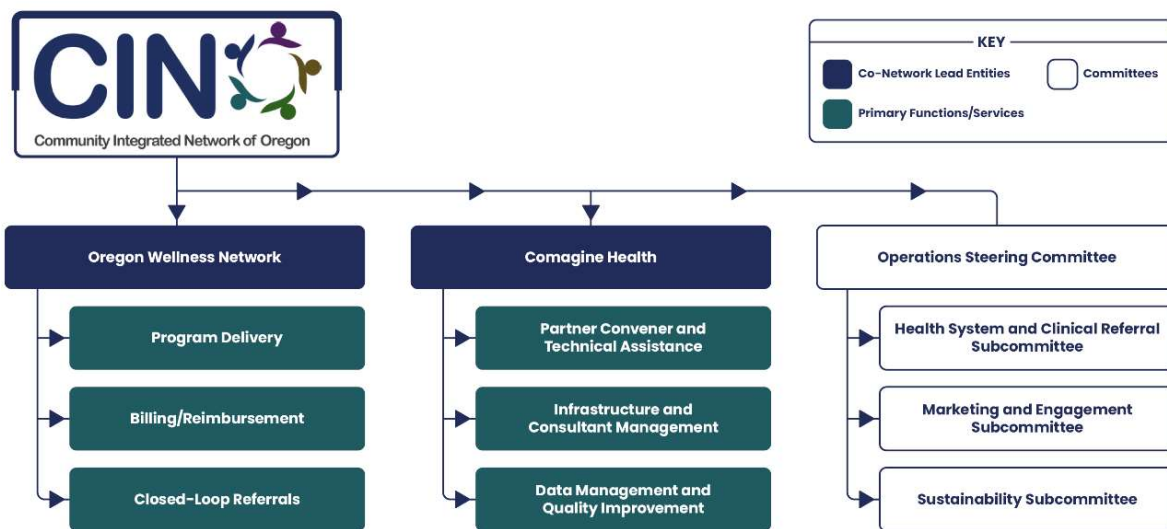
Oregon Wellness Network Partners

OWN leverages valuable partnerships to access the tools and resources needed to benefit the populations they serve. An example of this is the relationship that OWN maintains with [Comagine Health](#), a national, nonprofit, health care consulting firm. Together OWN and Comagine Health have created a network across the state of Oregon that providers of evidence-based programs can trust.

Comagine Health

Comagine Health is a Centers for Medicare & Medicaid Services Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for Idaho, Nevada, New Mexico, Oregon, Utah and Washington, a [CDC 1705](#) grant recipient, and an Administration on Community Living (ACL) grantee.

OWN has worked with Comagine Health for over five years, and together the organizations have had remarkable success in promoting and delivering the National DPP lifestyle change program and the MDPP. The relationship started with the QIN-QIO “Everyone with Diabetes Counts Initiative” to increase access to Diabetes Self-Management Education Training (DSMT) for Medicare beneficiaries. Since then, they have worked collaboratively to grow the state network infrastructure for a variety of different evidence-based health promotion programs, including the MDPP. This statewide network, illustrated below, was recently formalized as the **Community Integrated Network of Oregon (CINO)** with OWN and Comagine Health serving as co-lead network entities.



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COMMUNITY INTEGRATED NETWORK OF OREGON (CINO)

CINO is a network of diverse partners interested in and dedicated to building the statewide infrastructure to provide sustainable evidence-based chronic disease self-management education (CDSME). OWN works with Comagine Health to provide services and support to CINO members whereas OWN provides services related to CDSME program delivery, billing and reimbursement, and closed-loop referrals while Comagine Health supports convening network partners, technical assistance, infrastructure and data management, and quality improvement. There are no contractual agreements required to become a CINO member unless there is a financial or data sharing arrangement. All CINO members agree to update [Compass](#), a HIPPA compliant web-based workshop and data management tool, with scheduled classes and participant information as applicable.

CINO's work is guided by the **Operations Steering Committee** consisting of diverse partners committed to informing and improving the CINO infrastructure. In addition to the committee there are three sub-committees:

- Health System and Clinical Referral
- Marketing and Engagement
- Sustainability

Oregon Diabetes Prevention Alignment Workgroup (DPAW)

DPAW was formed in 2018 to bring together state level partners focused on scaling delivery of the National DPP lifestyle change program and MDPP in Oregon. The current members are Comagine Health, Coraggio Group, Harold Schnitzer Diabetes Health Center at Oregon Health & Science University (OHSU), Oregon Health Authority-Public Health Division, Oregon Medical Association (OMA), Oregon Primary Care Association, and OWN. Together these organizations have developed guidance for the group which aims to bring together the partners involved in the continuum of care: payers, policy makers, providers, and delivery organizations. Since the National DPP lifestyle change program became a covered Medicaid benefit in Oregon in January 2019, the group established a monthly meeting cadence to discuss how the state of Oregon can continue to promote and deliver the National DPP lifestyle change program as well as the MDPP.

Partners in the Making

While OWN continues to promote and collaborate with their existing partners, the organization would like to move forward with efforts to develop additional partnerships that can assist MDPP suppliers in the state of Oregon. OWN is interested in working more with referring partners such as [Unite Us](#) and its local referral system called [Connect Oregon](#) with the goal of making it easier for health care providers to refer potential participants to OWN's MDPP and other evidence-based programs.

Currently, OWN would like to develop these referral partnerships with health systems and health information exchanges (HIEs). Lavinia serves on multiple committees that discuss the value of community information exchange and the potential of uniting HIEs and community information exchanges to promote prevention. As addressing health-related social needs (HRSN) continues to rise as a priority, OWN wants to ensure that prevention is central to the development of the referral partnerships being created.



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Best Practices for Statewide Partnership Development

The recommendations below are based on OWN's history of developing productive partnerships to advance the MDPP:



Emphasize the importance of conducting assessments – As addressing HRSN continues to be a priority, an increased number of social determinants of health (SDOH) screenings will be conducted. SDOH screenings require trust and skill to help a potential participant openly share their social needs. This trust is paramount to successfully delivering companion social resources that support recruitment and retention in the MDPP.



Employ social media and text campaigns – Conducting campaigns on social media and over text messages can recruit potential participants and help educate partners about the MDPP.

OWN Tip – As part of the CDC's 1705 cooperative agreement initiative, OWN was able to conduct their latest text campaign at a relatively low cost. When conducting these campaigns, OWN found that directing people towards the diabetes risk test and then guiding those who scored a five or above to an MDPP supplier in their area was an effective way to recruit potential participants.



Promote diabetes prevention everywhere – Recently, OWN heard about a spa owner who decided to become an MDPP supplier and Lifestyle Coach. The spa owner normalized weight management with clients as another self-care activity like spa services (e.g., nails, eyebrows, etc.). There is now a wait list of participants ready to enroll in the MDPP through the spa.



Utilize a data collection system – Data collection is essential to capture outcomes that can be used to promote the effectiveness of the MDPP to potential and existing partners. Since MDPP reimbursement is performance based, monitoring performance and promoting it when there is success is essential. Monitoring performance also supports continuous quality improvement efforts.

OWN Tip: OWN uses Compass, a web-based self-management education data management and consumer facing platform, to assist with data collection and program marketing. There are various platforms that exist to help MDPP suppliers collect data, however there is not one system that has features to help with the entire data collection process. Right now, rather than being integrated with an electronic health record (EHR), OWN maintains their own data by manually entering it into their system for claims to be submitted and processed. In the future, OWN would like to collaborate with partners to develop a community portal that serves as a one-stop-shop where data can be entered and sent to the relevant entities without resulting in a large burden for MDPP suppliers.



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Create agreements for each specific partnership – OWN uses a variety of agreements to facilitate MDPP work with their partners. Standard Business Associate Agreements (BAA) are often used for the exchange of MDPP participant information. A Memorandum of Understanding (MOU) is used when there is a data-exchange component but no monetary exchange. A standard contract is employed with partners when there are monetary arrangements for services rendered such as claims processing. Whether dealing with independent contractors or organizations, direct service providers are required to hold liability insurance and agree to or attest to doing background checks.

*The **Building Capacity for Public and Private Payer Coverage of the National DPP Lifestyle Change Program** project is supported by the Centers for Disease Control and Prevention (CDC) of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling **\$4.3 million for grant year 5** with 100 percent funded by CDC/HHS. The contents are those of author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.*

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