

PREDIABETES

A Guide for Referring Your Patients



PREDIABETES DEFINITION

Prediabetes is a condition in which blood glucose levels are higher than normal but not high enough yet to be diagnosed as Type 2 Diabetes.



RISK FACTORS FOR PREDIABETES

- Age, especially after age 45
- Being overweight or obese
- A family history of diabetes
- Having an African American, Hispanic/Latino, American Indian, Asian American, or Pacific Islander racial or ethnic background
- A history of gestational diabetes
- Given birth to a baby weighing nine pounds or more
- Being physically active less than three times a week



PREDIABETES IN THE UNITED STATES



TYPE 2 DIABETES RISK CAN BE **REDUCED BY 58%** THROUGH GOOD NUTRITION AND PHYSICAL ACTIVITY BEHAVIORS

1 OUT OF **3** AMERICAN ADULTS HAVE PREDIABETES



9 OUT OF 10 PEOPLE WITH PREDIABETES DON'T KNOW THEY HAVE IT



PREDIABETES IN SOUTH DAKOTA



THE AVERAGE PRIMARY CARE PRACTICE HAS **1/3 OF PATIENTS OVER AGE 18 AND 1/2 OVER AGE 65 WITH PREDIABETES.**

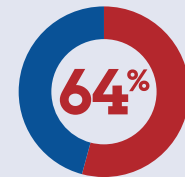
APPROXIMATELY
218,000
ADULTS HAVE PREDIABETES



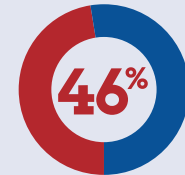
PREDIABETES AND DIABETES COST AN ESTIMATED **\$751 MILLION** EACH YEAR.



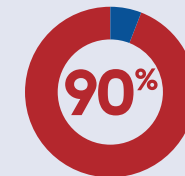
SOUTH DAKOTA ADULTS ARE AT HIGHER RISK FOR DEVELOPING PREDIABETES



OVERWEIGHT AND OBESE



DO NOT MEET THE PHYSICAL ACTIVITY RECOMMENDATIONS



DO NOT CONSUME AT LEAST FIVE SERVINGS OF FRUIT AND VEGETABLES PER DAY



DIAGNOSING PREDIABETES

NORMAL		PATIENT INTERVENTION	
HbA1C	<5.7 %	<ul style="list-style-type: none"> Encourage patient to maintain a healthy lifestyle. Retest within three years of last negative test. 	
FASTING PLASMA GLUCOSE	<100 mg/dL		
ORAL GLUCOSE TOLERANCE	<140 mg/dL		

PREDIABETES		PATIENT INTERVENTION	
HbA1C	5.7 – 6.4 %	<ul style="list-style-type: none"> Refer patient to nearest resources for diabetes prevention, such as the National Diabetes Prevention program (NDPP), Registered Dietitian, and/or fitness center. Encourage healthy eating and exercise. Retest every three years, or more frequently if risk factors are present. 	
FASTING PLASMA GLUCOSE	100-125 mg/dL		
ORAL GLUCOSE TOLERANCE	140-199 mg/dL		

DIABETES		PATIENT INTERVENTION	
HbA1C	6.5 + %	<ul style="list-style-type: none"> Refer patient to a local Diabetes Self-Management Education/ Training Program (DSME/T) when: newly diagnosed, uncontrolled/poorly controlled diabetes, change in treatment regimen such as new device, recent hospital related admission. NOTE: Many health plans, including Medicare and Medicaid cover an annual DSME/T visit. Check with the specific health plan for more information. 	
FASTING PLASMA GLUCOSE	126 + mg/dL		
ORAL GLUCOSE TOLERANCE	200 + mg/dL		

RESOURCES:

- South Dakota Department of Health: www.doh.sd.gov
- South Dakota Diabetes Coalition: www.SDDiabetesCoalition.org
- Centers for Disease Control and Prevention: www.cdc.gov/prediabetes
- Prevent Diabetes STAT: www.preventdiabetesstat.org
- American Diabetes Association: www.diabetes.org



ICD AND CPT CODES

CPT and ICD codes are updated frequently. Connect with your organization's coder or medical records personnel to ensure the correct codes are used for screening and/or diagnosis.

COMMON CPT AND ICD CODE DESCRIPTIONS INCLUDE:

ICD
Abnormal Glucose
Impaired Fasting Glucose
Impaired Glucose Tolerance
Overweight
Obesity
CPT
Fasting Plasma Glucose
Post-meal Glucose
Oral Glucose Tolerance
Hemoglobin A1C
Overweight

A PARTNERING MESSAGE BY:

