

# Wisconsin Diabetes Weekly

Monday, September 30, 2019

Volume 14, Number 29

## In the News

### U.S. Obesity Rates Reach Historic Highs: Disparities Continue to Persist

Nine U.S. states had adult obesity rates above 35% in 2018, an historic level of obesity in the U.S., according to the [State of Obesity: Better Policies for a Healthier America](#) report provided by the Trust for America's Health (TFAH). The report, based in part on newly released data from the Centers for Disease Control and Prevention's Behavioral Risk Factor Surveillance System, and analysis by TFAH, provides an annual snapshot of obesity rates nationwide.

### Study: SGLT2 Inhibitors Protect Against Kidney Failure in Diabetics

The results of a recent meta-analysis of multiple trials, including CREDENCE and EMPA-REG, is providing further evidence of the impact of SGLT2 inhibitors in reducing the risk of kidney failure in patients with diabetes. The study found SGLT2 inhibitors reduced the risk of dialysis, transplantation, or death due to kidney disease by 33%. [Read more.](#)

### Do Patterns of Change in CV Health Affect Risk for T2D?

Changes in cardiovascular (CV) health over time may affect risk for type 2 diabetes (T2D) and impaired fasting glucose, according to new study. The risk for T2D was significantly lower in patients who improved their CV health from low to moderate or high compared with patients whose CV health remained low over time. [Read more.](#)

## Important News

### NACDD Newsletter Features Wisconsin DOC DPP Project

The Centers for Disease Control and Prevention (CDC) recently awarded the Wisconsin Department of Corrections (DOC) full-recognition status as a supplier of the National Diabetes Prevention Program (DPP) lifestyle change program. Wisconsin's DOC is the only correctional system in the United States providing this program to inmates. DOC has partnered with the Chronic Disease Prevention Program to build infrastructure for program sustainability. Read more about this successful project in the National Association of Chronic Disease Directors' (NACDD) quarterly newsletter, [The Connector](#).



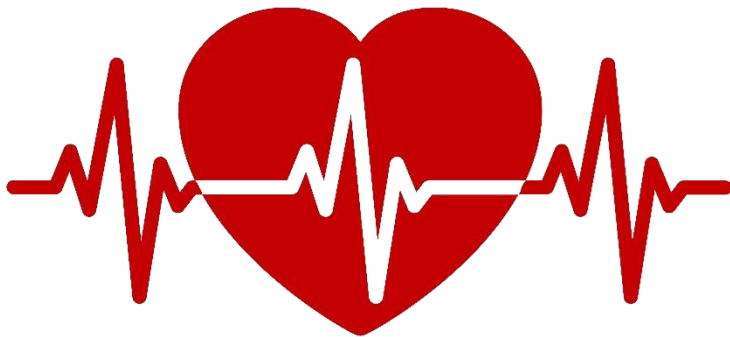
### Diabetes Patients Missing Out on Medicare's Nutrition Help

Louis Rocco has lived with diabetes for decades but, until he met with a registered dietitian in August, he didn't know eating too much bread was dangerous for him. After getting a referral this summer from his doctor, Rocco learned that Medicare covers personal nutritional counseling for people with diabetes or kidney disease. The estimated 15 million Medicare enrollees with diabetes or chronic kidney disease are eligible for the benefit, but the federal health insurance program for people 65 and older and some people with disabilities paid for only about 100,000 recipients to get the counseling in 2017, the latest year billing data is available. [Read more.](#)

## In the News *continued* . . .

### Heart Failure Deaths Highest in Poorest U.S. Counties

People living in U.S. counties with the highest rates of poverty are more likely to die from heart failure than those from more affluent areas, a new study suggests. Researchers examining data from more than 3,000 U.S. counties found that for each percentage-point increase in poverty, heart failure mortality increased by 5.2 deaths per 100,000 county residents, according to the report. After adjusting for other factors that could contribute to heart failure outcomes, about two-thirds of the effect of poverty on heart failure mortality was explained by rates of diabetes and obesity, researchers noted. [Read more.](#)



## In the News *continued* . . .

### AMA Supports Remote Patient Monitoring, Telehealth, Self-Reported Blood Pressure Monitoring in 2020 CPT Codes

Remote patient monitoring (RPM) and telehealth play prominently in the 2020 CPT codes unveiled this month by the American Medical Association (AMA). Among the 248 new codes added to the list for the coming year, the AMA has created six for online digital evaluation services, or e-visits, in which care providers can connect with patients at home to exchange information. Three codes—99421, 99422, and 99423—relate to patient-initiated digital communication provided by a physician or other qualified healthcare professional, while three others—98970, 98971, and 98972—focus on communications with a “non-physician healthcare professional.”

The new codes represent a continuing trend toward RPM services, as hospitals and health systems look to extend care to the home or other non-traditional settings and collaborate with patients and other care providers on care management. In addition, the AMA has added two codes—99473 and 99474—to cover self-reported blood pressure monitoring. [Read more.](#)



Resources in this newsletter are compiled by the Wisconsin Chronic Disease Prevention Program.

## Journal Articles and Reports of Interest

### Evaluation of the Cascade of Diabetes Care in the United States, 2005-2016.

Kazemian P, et al. *JAMA Intern Med.* 2019 Aug 12. doi: 10.1001/jamainternmed.2019.2396. [Epub ahead of print]

**LEARN MORE ABOUT  
Patient Self-Measurement  
of Blood Pressure**



### For More Information

If you received the *Wisconsin Diabetes Weekly* as a forward, **SIGN UP** to receive the publication directly from the listserv.

For more about our program, check out [www.preventdiabeteswi.org](http://www.preventdiabeteswi.org).