

A Market Analysis of Certified Diabetes Educators in New York: Initial Findings

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BACKGROUND

Between 1994 and 2007, the prevalence of diabetes in New York has almost doubled.¹ This number is expected to double again by 2050.² In response, the New York State Health Foundation (NYSHealth) has embarked on a statewide campaign to prevent diabetes and its complications.

Certified diabetes educators (CDEs) are health professionals with specialized knowledge of diabetes education and management. Although 1.8 million New Yorkers live with diabetes and another 4.2 million are estimated to have pre-diabetes,³ there are only 1,000 CDEs certified in New York.⁴ As of January 1, 2009, New York State Medicaid began reimbursing for a range of CDE services in clinical settings.⁵ Medicare also reimburses for similar CDE services. To understand more about the CDE workforce, the NYSHealth Diabetes Policy Center partnered with the Center for Health Workforce Studies at the School of Public Health, University at Albany to conduct a market analysis of CDEs in New York. The goal of the analysis is to inform strategies to increase New Yorkers' access to CDEs and diabetes self-management support services. The analysis included interviews of key informants and surveys of CDEs and their employers across the state. This research brief provides initial findings.

NEW YORK STATE DIABETES CAMPAIGN

NYSHealth established the New York State Diabetes Campaign, a five-year, \$35 million initiative to reverse the diabetes epidemic in New York State. The Campaign focuses on three priority areas:

- Improving clinical care and patient outcomes in primary care settings;
- Mobilizing communities to support diabetes identification and management; and
- Promoting policies that sustain comprehensive, coordinated systems of care and healthy living environments.

¹ Centers for Disease Control and Prevention, "New York – Percentage of Adults with Diagnosed Diabetes," Centers for Disease Control and Prevention Web site, <http://apps.nccd.cdc.gov/DDTSTRS/Index.aspx?stateId=36&state=New%20York&cat=prevalence&Data=data&view=TO&trend=prevalence&id=1>, accessed November 2009.

² New York State Department of Health, "Diabetes," New York State Department of Health Web site, <http://www.health.state.ny.us/diseases/conditions/diabetes/>, accessed November 2009.

³ Cowie, C. et. al. (2008). "Full Accounting of Diabetes and Pre-Diabetes in the U.S. population in 1988-1994 and 2005-2006." *Diabetes Care*, 32(2): 287-294. Note: estimates for the number of people with diabetes and pre-diabetes were created by applying national percentages from this publication to New York population estimates disaggregated by age, gender, and race/ethnicity.

⁴ National Certification Board for Diabetes Educators, Custom Data and Zip Codes in New York, 2009.

⁵ New York State Department of Health. "Diabetes and Asthma Self-Management Training Soon Offered to Medicaid Beneficiaries." New York State Medicaid Update, October 2008, 24 (11).

Certified Diabetes Educators: Certification and Reimbursement

CDEs give patients the knowledge, skills, and necessary tools to manage diabetes and avoid complications. To become certified, a diabetes educator must already be a licensed health professional such as a registered nurse, registered dietitian, or registered pharmacist. Prospective CDEs must complete two years of professional experience in the underlying profession, provide proof of 1,000 hours of professional practice experience in diabetes self-management education, and complete a minimum of 15 hours of continuing education related to diabetes. In addition, the educator must submit an application and fee (currently \$350) and demonstrate competency in diabetes through an extensive written exam. Certification must be renewed once every five years by completing 1,000 hours of diabetes education and continuing education or retaking the exam.

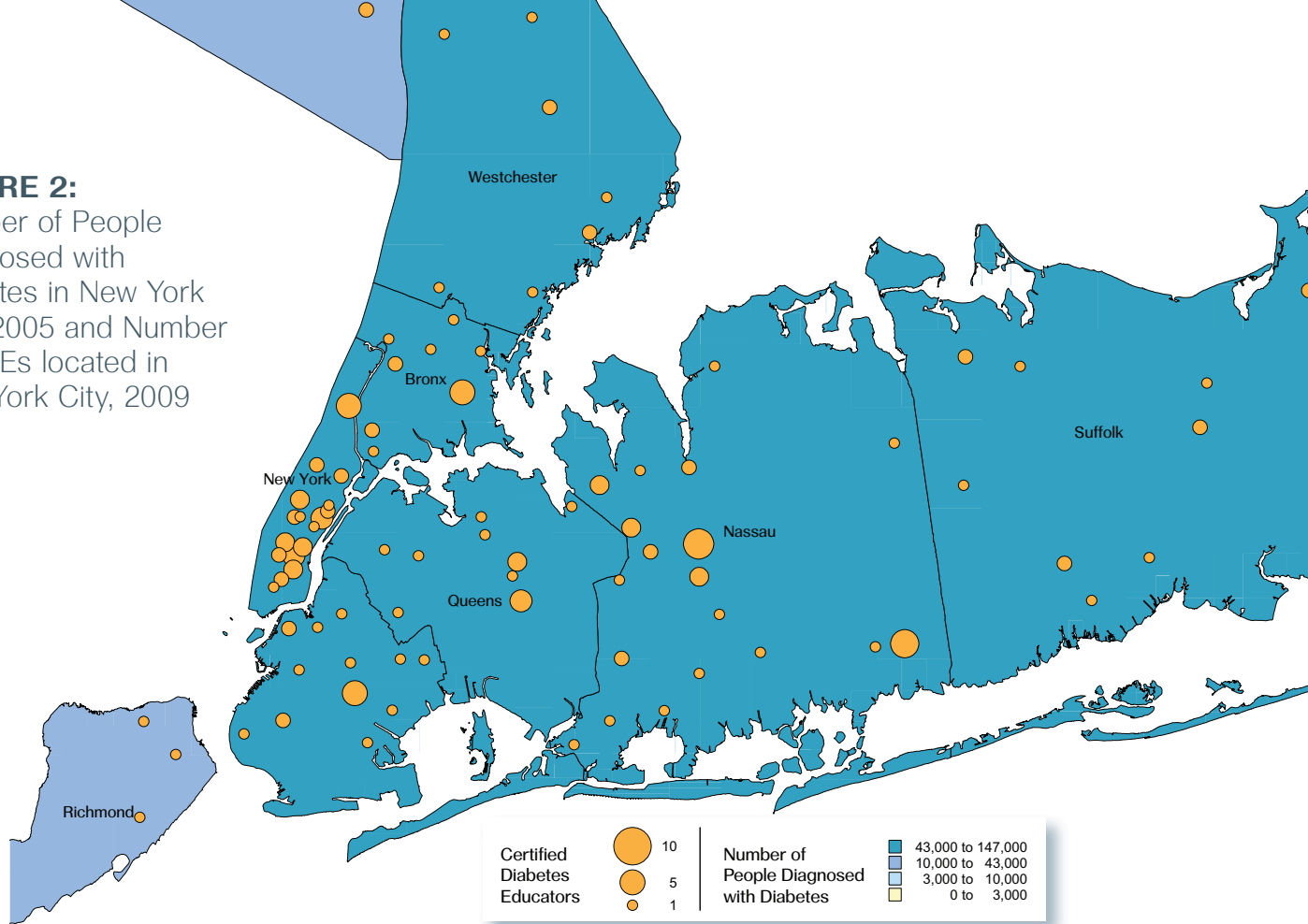
In New York, Medicaid offers reimbursement for CDEs to provide diabetes self-management training in hospital outpatient departments, diagnostic and treatment centers, and federally qualified health centers that elect to use Ambulatory Patient Groups. Reimbursement covers 10 hours of training during six continuous months for newly diagnosed individuals with diabetes or individuals with diabetes and a medically complex condition. For individuals with diabetes who are medically stable, no more than one hour of training is reimbursable. Reimbursement does not cover telephone follow-up or case management or services for patients with pre-diabetes. Medicare also reimburses for similar CDE services.

DESCRIPTION OF CDE WORKFORCE

As part of the market analysis, the Center for Health Workforce Studies surveyed CDEs across New York. The survey response rate was 69%. Initial results show:

- Most survey respondents (89.7%) indicate that they are currently providing diabetes education services. The remainder (10.3%) indicate that they are not providing diabetes education services.
- CDEs are predominately registered dietitians (45.1%) and registered nurses (43.9%). Nearly one-third (30%) of registered nurse CDEs also are nurse practitioners.
- About one-third (32%) of CDEs provide 26 or more hours per week of diabetes education services. More than two-thirds of CDEs (68%) provide 25 or fewer hours per week of diabetes education services to patients.
- One in four survey respondents (23.5%) provide more than 20 hours of other health services other than diabetes education in an average week.
- The majority of CDEs are located in densely populated urban areas of the State. (See Figures 1 and 2.)
- About 97% of CDEs in New York are female.
- Ninety percent of CDEs in the State are non-Hispanic white. A small percent of CDEs report being Asian or Pacific Islander (4.3%), Black/African American (3.5%), or “Other” (2.4%). A few CDEs (2.6%) report being Hispanic/Latino.
- Fewer than 17% of CDEs report speaking a language other than English.
- The median age of CDEs is 53.

FIGURE 2:
 Number of People Diagnosed with Diabetes in New York City, 2005 and Number of CDEs located in New York City, 2009



Sources: CDC, 2005, NCBDE, 2009

Access to and Need for CDE Services Does Not Match Current Demand for Services

Almost half of CDEs report some difficulty finding a job as a CDE. More CDEs (47.4%) indicate that it is either difficult or very difficult to find employment as a CDE in their geographic area compared to just 17% of CDEs who report that it is easy or very easy to find a job as a CDE.

CDEs identify several factors that limit demand for their services. The main factor CDEs identify as affecting demand is “limited health insurance reimbursement for CDE services” (44.5%). Seventy-one percent of CDEs also indicate that physicians are not generally well-informed about the competencies of CDEs or the services they provide. CDEs report that this is especially true for primary care physicians. In particular, CDEs indicate that physicians do not refer patients with diabetes at diagnosis (51%) or patients with pre-diabetic conditions (57%) for diabetes education services.

CDEs report limited access to diabetes education services for New Yorkers with diabetes. Almost 69% of CDEs agree that there is a significant unmet need for diabetes education in their geographic area. Nearly 54% indicate that access to diabetes education is inadequate at initial diagnosis, and 61% indicate that long-term access to follow-up diabetes education services is inadequate.

Full CDE Market Analysis Coming Soon

The full CDE market analysis and recommendations for improving access to CDEs and diabetes self-management services will be released in March 2010.

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