MIPCD State Summary: Minnesota

State	Minnesota
Project Title	Minnesota Medicaid Incentives for Prevention of Diabetes, also known as the We Can
	Prevent Diabetes Study
Organization	Grantee: Office of the State Medicaid Director, Minnesota Department of Human
and Partners	Services
	Partners:
	Minnesota Department of Health
	HealthPartners Institute
	YMCA of the Greater Twin Cities
	 Health Care Homes and other primary care and safety net clinics
	Diabetes Prevention and Control Alliance
Condition	Weight reduction, diabetes prevention
Target	Medicaid beneficiaries between the ages of 18 and 74 who live in the Twin Cities
Population	metropolitan area and who have been diagnosed with pre-diabetes or who have a
	significant risk of developing type 2 diabetes.
Goals	Test the effects of incentives on weight loss and attendance in the Diabetes Prevention
	Program among 18-74 year old Medicaid beneficiaries with pre-diabetes.
Activities	Diabetes Prevention Program (DPP) self-management training to encourage moderate
	weight loss, increased physical activity, and improved dietary behaviors.
Recruitment	Working through an RFP, 24 primary care and safety net clinics within 13 healthcare
Approach	organizations were recruited to identify potentially eligible participants, offer them the
	opportunity to participate in the DPP at no cost, and support them during program
	delivery.
Incentives	• Incentives for participants in the two incentives groups were valued between \$10
	and \$50 for participation, goal attainment, and goal maintenance, and were
	provided via reloadable debit cards.
	• Incentives were provided to participants in the "individual incentives" group based on individual attainment of attendance and weight loss goals.
	 Incentives for the "individual plus group incentives" group included individual
	incentives for the individual plus group incentives group included individual incentives plus tiered group incentives for overall group attainment of attendance
	and weight loss goals. The total amount of possible incentives was the same in the
	individual and the individual plus group incentives conditions.
	• Support to address barriers to participation, including light snacks during sessions,
	transportation to sessions, and child care during sessions, was provided to
	participants in all three conditions.
	• Weight loss tools, such as a bathroom scale, pedometer, food scale, measuring cups
	and a healthy foods cookbook were also provided to participants in all three
	conditions.
Evaluation	Prospective group randomized trial. DPP groups, with 10 to 15 participants in each
Design	group, were randomized to one of three conditions: control (no incentives), individual
	incentives, and individual plus group incentives. Analysis will assess:
	• The impact of DPP on weight, HbA1c levels, and cardiovascular risk for participants in
	the three conditions.
	• Whether individual and group incentives facilitate increased retention, participation,
	and weight loss in the diabetes prevention program.
	The long-term cost effectiveness of patient incentive programs.