

Awareness of the Medicare Diabetes Prevention Program Among Healthcare Providers Caring for Older Adults



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Background

- Prediabetes affects an estimated 27.2 million US adults aged 65 years or older and substantially increases the risk of progression to Type 2 Diabetes Mellitus (T2DM).
- Early identification and implementation of lifestyle-based interventions remain central to prevention efforts. (NIDDK, 2024)
- In 2018, the Centers for Medicare & Medicaid Services implemented the Medicare Diabetes Prevention Program (MDPP), a 12-month, evidence-based lifestyle intervention fully covered for eligible Medicare beneficiaries.
- From 2018-2024, only 9,015 Medicare beneficiaries have participated in the MDPP. (RTI, 2025)
- Limited provider program awareness, barriers to prediabetes care, and knowledge of referral processes may contribute to underutilization of this preventative resource.

Objectives

- To assess the following, among physicians, nurse practitioners (NPs), and physician assistants (PAs) caring for older adults:
 - Healthcare providers' beliefs about prediabetes
 - Perceived barriers to screening and management
 - Awareness and knowledge of the MDPP

Study Design

- Using a cross-sectional survey design, healthcare providers received a 24-item questionnaire, *Healthcare Provider Prediabetes Survey*, (Keck, 2019) via Qualtrics.
- Providers were part of a registry where they had opted in to receiving medically-relevant emails.
- Participants received a \$40 Amazon gift card for completing the 10-minute survey.

Setting

- Participants were healthcare providers caring for older adults across the United States, and proportions of providers were sampled based on the density of MDPP locations in each region.

Eligibility Criteria

Healthcare providers were eligible to participate if they:

- Were licensed physicians, NPs, or PAs
- Provided care to older adult patients
- Were currently practicing in a clinical setting within the United States
- Were able to read and complete an electronic survey in English
- **Type and Number of Participants:**
 - A total of 195 providers completed the survey
 - Physicians (DO or MD, n=92)
 - Nurse Practitioners (NP, n=50)
 - Physician Assistants (PA, n=53)

Methods

- A cross-sectional electronic survey was distributed to a national sample of healthcare providers caring for older adults.
- Participants completed a structured questionnaire assessing:
 - Beliefs regarding prediabetes and screening
 - Perceived barriers to prevention and management
 - Awareness and familiarity with the MDPP
 - Knowledge of MDPP referral processes & Medicare coverage
- 5-point Likert-scale responses were collected and later categorized into:
 - Strongly Agree/Agree
 - Neither Agree nor Disagree
 - Strongly Disagree/Disagree

Data Analysis

- Descriptive statistics were used to summarize provider responses.
- Responses were coded into 3 categorical groups for analysis. Percentages were calculated to assess:
 - Recognition of prediabetes as a public health issue
 - Perceived effectiveness of lifestyle modification
 - Familiarity with the MDPP
 - Knowledge of referral pathways
 - Awareness of Medicare coverage
- Comparisons were conducted across provider types (Physicians, NPs, and PAs) using chi-square testing.

Results

- Most providers agreed that prediabetes is a significant public health issue (95.4%) and that screening should be a high priority (81.5%).
- Lifestyle modification was widely endorsed as an effective treatment strategy (93.3%), and 78.5% reported confidence in managing patients with prediabetes.

	Strongly Agree/Agree n(%)	Neither Agree nor Disagree n(%)	Strongly Disagree/Disagree n(%)
Beliefs and barriers to Prediabetes Care Among Older Adults			
Prediabetes is a significant public health issue	186 (95.4%)	5 (2.6%)	4 (2.05%)
Most PCPs consider screening for prediabetes a high priority	159 (81.5%)	21 (10.8%)	15 (7.7%)
Dx'ing prediabetes is effective to increase awareness of need for lifestyle changes	187 (95.9%)	4 (2.1%)	4 (2.1%)
Evidence supports effectiveness of tx'ing prediabetes with lifestyle modifications	182 (93.3%)	11 (5.6%)	2 (1%)
I am confident in my ability to manage prediabetes	153 (78.5%)	34 (17.4%)	8 (4.1%)
Prediabetic older adult patients are unaware of their status	134 (69.8%)	34 (17.7%)	24 (12.3%)
Not enough time to screen all older adults at increased risk	46 (24.1%)	25 (13.1%)	120 (62.8%)
Too difficult for older adults to comply with lifestyle changes	61 (31.9%)	29 (15.2%)	101 (52.9%)
There is a lack of resources for older adult prediabetic patients	88 (46.1%)	44 (23%)	59 (30.9%)

Results (cont.)

- Despite strong recognition of prevention importance, awareness of the MDPP was limited: 34.4% reported familiarity with the MDPP, 29.1% indicated knowledge of referral processes, and 35.4% were aware that Medicare fully covers the program.
- However, 61.4% of providers believed completing the MDPP would reduce progression to diabetes.

	Strongly Agree/Agree n(%)	Neither Agree nor Disagree n(%)	Strongly Disagree/Disagree n(%)
Diabetes Prevention Program Beliefs			
I am familiar with the MDPP	65 (34.4%)	24 (12.7%)	100 (52.9%)
I know how to refer a patient to a MDPP	55 (29.1%)	20 (10.6%)	114 (60.3%)
I am aware of local organizations that offer the MDPP	54 (28.6%)	21 (11.1%)	114 (60.3%)
I am aware that Medicare pays for the MDPP	67 (35.4%)	31 (16.4%)	91 (48.1%)
Expect older adults who complete MDPP to see long-term changes in behaviors	102 (54%)	69 (36.5%)	18 (9.5%)
Expect older adults who complete MDPP reduce progression to diabetes	116 (61.4%)	60 (31.7%)	13 (6.9%)
Expect older adults who complete MDPP to have resolution of prediabetes	60 (31.8%)	98 (51.9%)	31 (16.4%)

Conclusions and Future Work

- Although healthcare providers recognize the importance of diabetes prevention, substantial gaps remain in awareness and knowledge of the MDPP.
- Limited familiarity with referral pathways and Medicare coverage may represent system-level barriers contributing to underutilization of this fully-covered preventative intervention.
- Future efforts should focus on targeted provider education and integration of MDPP referral processes within electronic medical records to improve implementation and reduce progression to T2DM among older adults.

References

- <https://www.nidDK.nih.gov/health-information/health-statistics/diabetes-statistics#prediabetesfacts>
- RTI International. Evaluation of the Medicare Diabetes Prevention Program (MDPP) - Final Evaluation Report. 2025:Available at: <https://www.cms.gov/priorities/innovation/data-and-reports/2025/mdpp-finalevalrpt>
- Keck JW, Thomas AR, Hieronymus L, Roper KL. Prediabetes knowledge, attitudes, and practices at an academic family medicine practice. *Journal of the American Board of Family Medicine*. 2019;32(4):505-512. doi:10.3122/jabfm.2019.04.180375

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