Diabetes Resource Guide for People of New Hampshire

Take Charge of Your Diabetes & Live Free!





Publication by:
The New Hampshire Diabetes Coalition
Access Work Group

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Introduction

The Access Work Group of the New Hampshire Diabetes Coalition is pleased to offer this *Diabetes Resource Guide* for *People in New Hampshire*. The *Guide* is the product of a dedicated committee representing health and social service organizations across the state. Information provided in this Diabetes Resource Guide should not be considered an endorsement of any particular educational program or diabetes management service.

The idea to develop a resource guide grew from a series of planning meetings sponsored by the NH Diabetes Education Program during 2004-2005. The purpose of these meetings was to discuss ways to improve diabetes prevention and care in our state. As a result, the Diabetes Coalition's Access Work Group agreed to create a resource guide to address this need, and the *New Hampshire Action Plan for Diabetes* was published in 2006. The *Action Plan* meetings identified a need to better inform people about existing resources – primarily financial resources –- for diabetes prevention and care.

After reviewing possible models, the Work Group agreed to adapt a booklet produced by the Rhode Island Diabetes Prevention and Control Program. The NH Access Work Group gratefully acknowledges Rhode Island's gracious permission to use many quotations from its publication.

Diabetes is a serious condition which can cause further health complications. However, there is much you can do to protect your health. Many people with diabetes in New Hampshire have health insurance that covers their diabetes medication and supplies. However, both patients and providers are sometimes unaware which services are covered, and under what conditions. This guide offers explanation about insurance coverage and contact information.

Unfortunately increasing numbers of people with diabetes lack health insurance for their health care needs; many cannot afford to pay for the diabetes prevention and care needed to avert costly complications. This guide also includes sources of financial assistance for diabetes services, supplies, and lower-cost health care.

In addition The *Guide* includes sources of basic information about diabetes and educational materials. These references can help people increase their knowledge about ways to manage this serious disease.

We hope you find the *Diabetes Resource Guide* to be useful. The NH Diabetes Coalition's Access Work Group welcomes your comments on the information and resources included here. Together, we can work to prevent and control diabetes in New Hampshire.

The NH Diabetes Coalition Access Work Group includes individuals and representatives from the following health and social service organizations.

NH DHHS Medicaid Program

NH DHHS Diabetes Education Program

Anthem Blue Cross and Blue Shield

NH Association of Diabetes Educators

The Prescription Center

NH Dietetic Association

Avis Goodwin Community Health Center

Ann Turner, BSN, RN

Keene State College Dietetic Internship Program

The information provided in this NH Diabetes Resource Guide is intended to provide a summary of general information to the public. It is not intended to take the place of either the written law or regulation. Linking to any given resource in this guide does not constitute an endorsement by members of the NH Diabetes Access Work Group.

What is Diabetes Mellitus?

Diabetes Mellitus is a disease that occurs when the body is not able to use the sugar in food to make energy for daily life. This may be because the pancreas is unable to make enough insulin (a hormone), or because the body cannot properly use the insulin it has.

Major types of diabetes:

- **Type 1 Diabetes** the body no longer makes insulin so sugar cannot enter the cells to make energy (5-10% of cases).
- *Type 2 Diabetes* the body's cells do not use insulin properly, known as "insulin resistance" (90-95% of cases).
- **Gestational Diabetes** a form of diabetes diagnosed during pregnancy. Typically, related to pregnancy hormones and/or lack of insulin.
- **Pre-Diabetes** a condition which occurs when blood glucose (sugar) levels are higher than normal, but not high enough for a true diagnosis of Type 2 diabetes. Lifestyle change(s) may help prevent the progression to a true diabetes diagnosis.

Risk factors for diabetes:

- Body mass index (BMI) over 25
- Family history of diabetes
- Over age 45
- Hispanic, African American, Asian American or Native American origin
- Having a baby over 9 lbs or having gestational diabetes during your pregnancy
- Sedentary (or inactive) lifestyle
- High blood pressure
- Poor cholesterol levels

Symptoms of high blood glucose

- Increased thirst
- Increased urination
- Dry mouth or skin
- Tiredness or fatigue
- Blurred vision
- More frequent infections
- Slow healing cuts and sores
- Unexplained weight loss

Symptoms of low blood glucose

- Hunger
- Nervousness
- Shakiness
- Perspiration
- Dizziness
- Light-Headedness
- Sleepiness
- Confusion

How do I get tested? Talk with your doctor and a simple blood test or oral glucose test may be provided.

What do my test results mean?

<u>Pre-diabetes</u> is indicated when your *fasting blood glucose level is between 100 and 125 mg/dl <u>or</u> your 2 hour blood glucose level is between 140 and 199 mg/dl.

<u>Diabetes</u> is indicated when your *fasting blood glucose level is 126 mg/dl or higher <u>or</u> your 2 hour blood glucose level is 200 mg/dl or higher.

<u>Hemoqlobin A1C</u>: A test to measure the amount of sugar that attaches to protein in the red blood cell. Because red blood cells live for about 3 months, the A1C test shows your average blood sugar during this time. <u>The American Diabetes</u>
Association recommends an A1C result of 7 or below.

^{*}Fasting is defined as no caloric intake for at least 8 hours.

Important Health Care for People with Diabetes

It is especially important for people with diabetes to take an active role in managing their health. Nutrition, physical activity, and medication are all important to keep blood sugar, cholesterol, and blood pressure under control. People with diabetes also need to see their health care provider regularly to prevent potential complications. **The American Diabetes Association recommends the care listed below**.

| Test | Recommended Frequency ¹ |
|--|--|
| Blood Glucose (self-monitoring patients using | Three or more times daily and at every visit |
| multiple insulin injections or insulin pump therapy) | |
| Hemoglobin A1c | Every 3 months |
| Blood Pressure | Every 3 months |
| Weight | Every 3 months |
| Cholesterol (including HDL, LDL and triglycerides) | Yearly |
| Urine test for protein (microalbumin) | Yearly |
| Foot Exam - Visual | Every visit |
| Foot Exam - Monofilament | Yearly |
| Dilated Eye Exam | Yearly |
| Dental Visit | Every 6 months |
| Influenza Immunization | Yearly every fall |
| Pneumococcal Immunization | Once ² |
| Hepatitis B immunization | Once ³ |

¹According to American Diabetes Association (ADA) and Centers for Disease Control: Clinical Practice Recommendations 2013 ²Re-vaccination may be recommended for persons with certain medical problems such as kidney failure. A second dose is also recommended for those people 65 and older who got their first dose when they were under 65, if five or more years have passed since the earlier dose.

Note: These guidelines are not intended to replace the clinical judgment of healthcare providers. They are general guidelines based on ADA recommendations.



www.diabetes.co.uk

³Hepatitis B vaccination should be administered to unvaccinated adults with diabetes mellitus, ages 19-59 years old, and may be administered at the discretion of the treating clinician to unvaccinated adults with diabetes who are ≥60 years old.

Health Care Law and Diabetes

The Affordable Care Act is the federal health care reform law that officially became part of United States legislation in 2010. The law now includes many new tools to increase health care needs and lessen the effects of diabetes. Under the old health care system, many with diabetes were faced with restrictions and were even denied health insurance, or health insurance costs were much more expensive. In fact, those with diabetes were often not even covered under basic level care plans for their diabetes. The American Diabetes Association works diligently and continues to advocate for those with, and at risk for diabetes to ensure that the new health care reform law meets their needs. As the law continues to develop over the next several years, a number of key concerns related to diabetes will be addressed. http://www.healthcare.gov/law/

The Act has many important requirements that impact diabetics, including policies about:

| Pre-existing conditions | In 2014, insurance companies will not be allowed to deny coverage because a | |
|---------------------------|---|--|
| | person has a pre-existing condition, such as diabetes. | |
| Preventative Care | Important preventive services are now covered with no cost sharing (co-payments, | |
| | deductibles, coinsurance) for those who have private plans. Preventative care | |
| | services for diabetes include, type 2 diabetes screening, nutrition counseling, and | |
| | blood pressure screening. | |
| Cost of medications | insurance companies cannot limit coverage to avoid paying for medical expenses | |
| | related to diabetes care and people cannot be charged higher premiums for health | |
| | insurance simply because they had diabetes. | |
| National Diabetes | which was established to expand on community-based programs to help prevent | |
| Prevention Program (NDPP) | type 2 diabetes. | |

Medicare recipients with diabetes are now able to receive a free annual wellness visit to identify health risks such as diabetes or diabetes-related complications. The Affordable Care Act also requires Medicare to cover certain preventive services for free, and to develop an individual prevention plan.

What is to come with the Affordable Care Act?

Once the provisions of the law are fully in place, a diagnosis of diabetes will no longer be a lawful reason to deny health care. Additional benefits effective in 2014, include:

- No increased insurance premiums based on health status or gender
- No annual limits on insurance coverage benefits
- All small group and individual health plans must offer a minimum essential health benefits package
- Premium and cost-sharing subsidies will make health care more affordable
- Medicaid expansion so that more low-income individuals and families receive coverage

In addition to the Affordable Care Act, New Hampshire mandated law states: "Any individual, group, blanket policy or HMO contract that provides benefits for medical or hospital expenses shall provide to insureds who are residents of this state, coverage for medically appropriate and necessary outpatient self-management training and educational services, pursuant to a written order of a primary care physician or practitioner. Required coverage includes, but is not limited to medical nutrition therapy for the treatment of diabetes provided by a certified, registered or licensed health care professional with expertise in diabetes." www.NH.gov

As a result of the NH state law, all companies selling health insurance in New Hampshire and to its residents, are required to cover medically appropriate and necessary medication, equipment, supplies, and other services related to diabetes care. Specific coverage guidelines do apply and it is important for any consumer to read carefully all the terms, conditions, and riders attached to his or her own policy. Certain conditions may also need to be met before insurance will pay for diabetes services and supplies. In general, coverage includes:

- outpatient self-management training and educational services, and
- insulin, oral agents, and equipment used to treat diabetes

The section of NH Insurance Law specific to diabetes services and supplies is Title XXXVII, Chapter 415 on Accident and Health Insurance. (The complete text of Section 415:6-e is in Appendix I.) For further information related to insurance and reimbursement for diabetes, please refer to the following page.

Insurance Coverage for Diabetes Services & Supplies

As indicated above, all health insurance policies sold in New Hampshire must cover diabetes services and supplies, but individual reimbursement terms and conditions vary. Most frequently "terms and conditions" require consumers to pay the deductible and co-payments before the insurer will reimburse for services.

Other conditions may also apply for coverage. For example:

- 1) Outpatient self-management and training must:
 - be deemed "medically appropriate and necessary,"
 - be ordered in writing by a primary health care provider
 - be provided by a certified, registered or licensed health care professional with expertise in diabetes, and
 - meet the "terms and conditions" of the health insurance policy.
- 2) *Diabetes medications* are covered only if a subscriber's policy includes prescription drug coverage. <u>Not all insurance policies include this</u>. Medication(s) must be:
 - medically appropriate and necessary, and
 - ordered in writing by a primary care physician or practitioner.
- 3) **Diabetes supplies** are covered if the policy includes a "rider" for durable medical equipment. (A rider is an addition to the main portion of the policy.) Coverage for supplies such as glucometers, diabetes test strips, and insulin pumps may fall under such a rider.

NOTE: A health insurance policy that does not include a rider to cover equipment requires people to pay ou of pocket for diabetes supplies. Often glucometers and pumps can be obtained by other means, but patient may not get reimbursed for the on-going expense of test strips.

Major Insurance Companies of New Hampshire

Aetna

www.aetna.com 1-800-962-6842

Anthem Blue Cross www.anthem.com

1-866-920-1391

Cigna

www.cigna.com 1-800-882-4462

Harvard Pilgrim

www.harvardpilgrim.org
Medicaid - New Hampshire
http://www.dhhs.nh.gov/ombp/
medicaid/

603-271-4344 1-800-852-3345 ext. 4344

1-800-848-9995

Medicare

www.medicare.gov 1-800-633-4227

Mohawk Valley Plan (MVP)

www.mvphealthcare.com 1-888-687-6277

Frequently Asked Questions About Insurance

1) What is Medical Nutrition Therapy (MNT)?

Defined as "nutritional diagnostic, therapy, and counseling services for the purpose of disease management, which are furnished by a registered dietitian or nutrition professional.

- 2) Do I have coverage for nutrition counseling (Medical Nutrition Therapy)?

 Sometimes an insurance representative will say they do not see coverage for this. If that is the case, you can follow up with the question:
- 3) Do I have coverage for CPT Code 97802 and/or 97803, GO108 and GO109? (The 978 codes are for Medical Nutrition Therapy. The GO codes are for Diabetes Self-Management and Education. Some plans cover one or the other; some plans cover both.)

This may get a positive reply. If the answer is "yes," then ask:

- a) Do I need a referral?
- b) Is there a deductible that must be met?
- c) Is there any limit on the number of visits for this service (per calendar year or other time frame)?
- 4) Is there a preferred meter?
- 5) Is nicotine replacement therapy a covered service?

Common Reasons Why a Claim May Be Denied

- 1) <u>Error in Coding</u> Health conditions are represented by numerical codes. Incorrect codes can lead to incorrect reimbursements. Check your Explanation of Benefits (EOB) Form. (This will come by mail with your reimbursement check or a letter stating that reimbursement is denied.) Take a close look at the "description of service" column. Be sure the services you received at your doctor's office are the ones listed and that they are properly described.
- 2) <u>Utilization review</u> (UR) Insurance companies create guidelines that define "medically necessary," or "reasonable and customary" or "usual and customary" care for almost every kind of illness and injury.

The process of utilization review checks whether the health care you received meets these guidelines. Additional information may be submitted to the insurance company, which may change its decision. For example, information related to a test or procedure for which payment was denied may have been necessary in your case.

- 3) <u>Doctors' Fees</u> An insurance company decides how much it will reimburse health care providers based on the usual fees in your geographic area. Sometimes the amount you have been charged is more than the amount the insurance company will pay you. The company may change its payment based on additional information.
- 4) <u>Allowable Costs of Medical Services</u> Charges for health care services and supplies for which benefits are available under your health insurance plan. You may challenge your insurance company's decision about reimbursement for "allowable costs" of medical services. This process is called an "appeal." You should check your policy for specific information about your insurance company's appeal process.

How to Appeal if Your Insurance Claim is Denied

Consumers have the right to appeal an insurance plan decision. Be aware you must file an appeal within 180 days (6 months) of receiving a claim denial. <u>Contact your insurer for instructions and prepare your appeal carefully!</u>

Be prepared to complete the following:

- 1. A short, detailed, and written explanation of the situation.
- 2. Copies of applicable doctors' and/or hospitals' bills.
- 3. Copies of applicable Explanation of Benefit forms.
- 4. If your appeal involves documentation, obtain a letter confirming this from the provider.
- 5. Sign and date this information and send it to the insurance company. **BE SURE TO MAKE AND KEEP A COPY OF EACH DOCUMENT FOR YOURSELF.**
- 6. Some appeals are reviewed by a team of health care providers, also known as Peer Review. If your appeal is submitted to Peer Review, you will receive a notice of the decision after 6-8 weeks.
- 7. If Peer Review also denies your appeal, you may file an "external appeal" and write to the appropriate government agency:
 - **MEDICARE:** contact your local Social Security office.
 - **PRIVATE INSURANCE**: write to your state insurance commissioner explaining the dispute. The NH Department of Insurance has a Consumer Representative to help you with this process.
 - KEEP COPIES OF ALL CORRESPONDENCE.
- 8. If the government agency holds a hearing on your dispute, bring copies of the following documents on the day of the hearing:
 - Your original Explanation of Benefits form
 - Your correspondence with the insurance company

- Medical bills
- Letter from the health care provider explaining the charges
- The insurance company's denial letter
- Any other relevant information such as notes you have taken from phone calls etc.
- 9. A written decision will follow in about 6 weeks. If the agency decides in your favor, a check from the insurance company should follow in a few weeks.
- 10. If the dispute involves Medicare, write your US Senator or Representative. Enclose a letter of explanation, plus copies of all the documents listed above.
- 11. If you cannot resolve your claim with the insurer, you may contact the customer service department. Contact information for major insurers in New Hampshire is listed on page 7 of this document.

Resources for People Who are Uninsured/Underinsured

People with diabetes often need help paying for diabetes care. Some have no insurance; others have high deductibles and co-payments. Also their insurance may not pay for medications and diabetes supplies. The organizations and websites listed below may help:

Diabetes Medications

New Hampshire Medicaid Pharmacy Program:

https://newhampshire.magellanmedicaid.com/portal/spring/main?execution=e2s1

You may use this link to check your medication coverage and further information related to insurance coverage for diabetes medication(s).

Medication Bridge Program: www.healthynh.com (603) 225-0900

Every major pharmaceutical company has a Patient Assistance Program for people who have trouble paying for their medications. The Medication Bridge Program is a service coordinated by the Foundation for Healthy Communities. It helps people find out if they are eligible for these programs and apply for lower-cost medications from pharmaceutical companies. The advantage of using Medication Bridge is that they will do all of the work for you in obtaining the providers' signatures, ordering refills, etc.

NH Partnership for Prescription Assistance: www.pparxnh.org (888) 477-2669

NH Partnership for Prescription Assistance is designed to help low-income, uninsured New Hampshire residents get access to patient assistance programs where they may qualify for free, or nearly free, prescription medicines.

Needy Meds: www.needymeds.org

Needy Meds is a non-profit organization with the mission of helping people who cannot afford medicine or healthcare costs. The information at Needy Meds is available anonymously and free of charge.

Together Rx Access: www.togetherrxaccess.com

Individuals may be eligible for the Together Rx Access Card if they do not qualify for Medicare, do not have public or private prescription drug coverage, and meet household income requirements. Together Rx Access offers potential cardholders three easy ways to enroll, and no documentation is required.

1.) Visit TogetherRxAccess.com to instantly enroll online.

2.) Call the toll-free phone number 1-800-250-2839.

3.) Complete a short paper application and return it by mail.



Certain retail stores sell diabetes medications at reduced rates:

Hannaford Healthy Savers Plus: www.hannaford.com

Walmart: www.walmart.com
Target: www.target.com

The Prescription Center: www.prescription-center.com

Contact your local pharmacies or markets in your area about other medication assistance programs.

Diabetes Supplies/Test Strips

Paying for test strips can be a big challenge for people who need to check blood sugar frequently. If you have this problem, please tell your doctor, nurse, or diabetes educator. They may have access to short-term supplies or know about lower-cost suppliers near you. Some retail stores (above) also carry lower cost test strips.

CHECK with your health care provider and the manufacturer of your glucometer about free resources for test strips.

New Hampshire Medicaid Diabetic Supply Program

This program applies to all NH Medicaid recipients without other insurance or Medicare coverage for coverage of glucose monitors and test strips.

https://newhampshire.magellanmedicaid.com/portal/spring/main;jsessionid=1t1NRd0JMblvz8ylfNPwTr9dkKltWqpQzTnZTd1qTd6YmQxGDrZZ!-683662420?execution=e1s1

Eye Care for People with Diabetes

Eye Care America
www.eyecareamerica.org
1-800-222-3937

Eye Care America is the website of the American Ophthalmologic Association. Click the link provided to see if you qualify for a free eye exam and medication. Call 1-800-272-EYES (3937) for services related to diabetes.

Vision USA www.aoa.org/x5607.xml 1-800-766-4466 Vision USA is the American Optometric Association's (AOA) financial assistance program. The website can help people who need free or reduced cost care, and can direct you to an optometrist in your area.

Lion's Club

www.nhlions.org/clublist.htm

See website for phone listing

The Lion's Club is the world's largest service club organization. Members give back to local communities and around the world. Lions have gained worldwide recognition for their work to improve eyesight.

Listing of NH Optometric Association members: www.nheyedoctors.org

Ophthalmologists in NH: www.localeyecare.com

Foot Care for People with Diabetes

American Podiatric Medical Association (APMA): www.apma.org 1-800-FOOTCARE

The APMA provides information about diabetic foot care, tips for healthy feet, footwear and related products, as well as where and how to find a podiatrist in your local community.



Mrsasiainternational.blogspot.com

General Financial Assistance

National Diabetes Information Clearinghouse

www.diabetes.niddk.nih.gov/dm/pubs/financialhelp/index.htm

If you go to this site and select the "Local Resources" link on the menu, several charitable organizations that can help people get diabetes services and supplies for a reduced price will appear. Lions Clubs, Elks, Shriners, Rotary, and Kiwanis are among these organizations.

National Kidney & Urological Diseases Clearinghouse

http://kidney.niddk.nih.gov/kudiseases/pubs/financialhelp/index.aspx

Information and Referral for Health & Social Services

SeaCare: www.seacarehealthservices.org

Portsmouth, Exeter or Seabrook (603) 772-8119 SeaCare Health Services helps low income adults who do not have health insurance and cannot afford it. SeaCare clients see primary care doctors, specialists and get lab work done. Seacare has programs to provide prescriptions to help families.

211 New Hampshire: www.211nh.org

2-1-1 is an easy to remember phone number that connects callers, **at no cost**, to information about critical health and human services available in their community. Residents in NH can dial **2-1-1** in-state or **1-866-444-4211** outside of NH. Both are toll-free.

United Way: www.liveunited.org

United Way supports many local agencies that assist people with health, education, and social service needs. There are many local United Way offices in NH with expertise about agencies in their communities. By dialing 211 people can be referred to organizations that

Families USA: www.familiesusa.org

Most Family USA materials are intended for policy specialists and advocates. However, few resources are written for individual consumers, these include publications on health insurance programs and benefits.

ServiceLink: www.nh.gov/servicelink

1-866-634-9412.

Statewide network of 13 community- based resource centers and satellite offices that provide information and referral services for elders, adults with disabilities and their families. The website contains a searchable database of community resources.

Eldercare: www.eldercare.gov

The eldercare locator is your fist step for finding local agencies, in every U.S. community that can help older persons and their family services like transportation, meals, home care, and caregiver support services.

Hillsboro (603)464-5835 / 1-877-757-7048 Milford (603)673-0756 / 1-877-757-7048 Greenville (603)878-3364 Toll-Free 1-800-322-1073

Community Action Program Belknap-Merrimack

Counties Inc. www.bm-cap.org

Concord (603) 225-6880

Franklin (603) 934-3444

Laconia (603) 524-5512

Meredith (603) 279-4096

Suncook (603) 485-7824

Warner (603) 456-2207

Rockingham Community Action Inc.

www.rcaction.org Toll Free: 1-800-639-3896

Portsmouth (603) 431-2911 Raymond (603) 895-2303 Salem (603) 893-9172 Seabrook (603) 474-3507 Derry (603) 965-3029

Southern New Hampshire Services, Inc.

www.snhs.org

Toll Free: 1-800-322-1073 Manchester (603) 647-4470

Nashua (603) 889-3440 / 1-877-211-0723

Peterborough (603) 924-2243 / 1-877-757-7048

Southwestern Community Services

www.scshelps.org

Toll-Free 1-800-529-0005

Keene (603) 352-7512 or (603) 352-7513

Claremont (603) 543-0148 or (603) 542-9528

Strafford County Community Action

www.straffcap.org

Dover (603) 749-5160

Rochester (603) 332-3963

Milton (603) 652-9893

Tri-County Community Action www.tccap.org

Berlin (603) 752-7001 / 1-800-552-4617

Colebrook (603) 237-8168

Lancaster (603) 788-4477

Ossipee (603) 539-4165

Littleton (603) 444-6653

Plymouth (603) 536-8222

Woodsville (603) 747-3013

Lebanon (603) 448-4553

Community Action Programs & Health Centers

The network of Community Health Centers in New Hampshire provides primary health care for people in all geographic areas of the state. These health centers are committed to serve people who cannot afford necessary health care. They charge for services on a sliding fee scale, according to a patient's ability to pay. Other doctors and hospitals also work to help patients who cannot afford to pay for care.

CONCORD AREA & LAKES REGION

Capital Region Family Health Center

250 Pleasant Street Concord, NH 03301

(603) 228-7200

www.concordhospital.org/services/

primary/family.php

Health First Family Care Center

841 Central Street Franklin, NH 03235

NORTH COUNTRY

Ammonoosuc Community Health Services, Inc.

25 Mount Eustis Road Littleton, NH 03561-(603) 444-2464 Route 25, Main Street Warren, NH 03279 - (603) 764-5704 79 Swiftwater Road Woodsville, NH 03785-(603) 747-3740 www.achs-inc.org

Coos County Family Health Services

133 Pleasant Street Berlin, NH 03570 (603) 752-2040 59 Page Hill Road Berlin, NH 03570 (603) 752-2900 2 Broadway Ave Gorham, NH 03581 (603) 466-2741 (603) 934-146422 Strafford Street, Suite 1 Laconia, NH 02346(603) 336-0177www.healthfirstfamily.org

Hillsboro Family Health Center

15 Antrim Road Hillsboro, NH 03244 (603) 464-3434

Mid-State Health Center

101 Boulder Point Drive Building A Suite 1 Plymouth, NH 03264 (603) 744-6200 859 Lake Street Bristol, NH 03222 (603) 536-4000 www.midstatehealth.org

Newport Health Center

11 John Stark Hwy Newport, NH (603)863-4100 www.newlondonhospital.org

SOUTHERN NEW HAMPSHIRE

VA Medical Center

718 Smyth Road Manchester, NH 03104 (603) 624-4366 or Toll Free: (800) 892-8384 www.manchester.va.gov

Manchester Community Health Center

145 Hollis Street Manchester, NH 03101 (603) 626-9500 www.mchc-nh.org

Nashua Area Health Center (a center for Lamprey Health Care)

10 Prospect Street, Suite 102 Nashua, NH 03060 (603) 883-1626 www.lampreyhealth.org

White Mountain Community Health Center

298 White Mtn Highway Conway, NH 03818 (603) 447-8900

www.whitemountainhealth.org

Indian Stream Health Center, Inc.

141 Corliss Lane Colebrook, NH 03576 (603) 237-8336 www.indianstream.org

SEACOAST

Families First Health and Support Center

100 Campus Drive Portsmouth, NH 03801 (603) 422-8208 www.familiesfirstseacoast.org

Lamprey Health Care

207 South Main Street Newmarket, NH 03857 (603) 659-3106

128 State Route 27 Raymond, NH 03077 (603) 895-3351 www.lampreyhealth.org

Goodwin Community Health Center

311 New Hampshire #108 Somersworth, NH 03878 (603) 749-2346 www.goodwinchc.org

Families First - Health Care for the Homeless

Portsmouth, Hampton, Dover, and Rochester, NH (888) 922-0005 or (603) 766–9220

Diabetes Education Programs and Support Groups

The following programs are recognized by the American Diabetes Association and the Accreditation Association for Diabetes Educators for meeting national standards for diabetes self-management education. However, inclusion in this listing should not be considered an endorsement of the education services provided. A 🌣 indicates that there is a support group associated with that diabetes program.

Granite State Diabetes Educators www.nhdiabetes.org

Group classes and individual consultation can help people learn to manage their diabetes. Many of the hospitals and organizations listed below offer classes and support groups in your area. Appointments for diabetes education are recommended especially after a new diagnosis of diabetes. Individual diabetes education appointments are available by referral from your primary care doctor.

Androscoggin Valley Hospital ☼

Diabetes Self-Management Education Program 59 Page Hill Road Berlin, NH, 03570 (603) 326-5631

Valley Regional Hospital 🌣

Diabetes Self-Management Education Program 243 Elm Street Claremont, NH 03743 (603) 542-7771 x 1372

Upper Connecticut Valley Hospital

UCVH Diabetes Self-Management Education Program 181 Corliss Lane Colebrook, NH, 03576 (603) 237-4971 x 4233

Capital Region Health Care

CRHC Diabetes Self-Management @ Concord Hospital 253 Pleasant Street Concord, NH, 03301 (603) 227-7101

Parkland Medical Center

Diabetes Self-Management Education Program 1 Parkland Drive Derry, NH, 03038 (603) 432-1500 x 3229

Wentworth-Douglass Hospital 🌣

Diabetes Self-Management Education Program 789 Central Avenue Dover, NH, 03820 (603) 740-3208

Weeks Medical Center 🌣

173 Middle Street Lancaster, NH 03584 (603) 788-5284

Wentworth-Douglass Hospital

Endocrinology and Diabetes Consultants 10 Members Way - Suite 400 Dover, NH 03820 (603) 742-1143

Exeter Hospital 🌣

HealthReach Diabetes, Endocrine & Nutrition Center

881 Lafavette Road Hampton, NH, 03842 (603) 926-9131

Dartmouth Hitchcock Keene 🌣

Cheshire County Diabetes Self-Management **Education Program** 590 Court Street Keene, NH, 03431 (603) 354-5454 x 3815

LRGHealthcare

LRGH Diabetes Center 80 Highland Street Laconia, NH, 03246 (603) 527-2850

Dartmouth-Hitchcock Medical Center--The Hitchcock Clinic 🌣

Adult Outpatient Diabetes Self-Management **Program** 1 Medical Center Drive Lebanon, NH, 03756 - (603) 650-8630

Littleton Regional Hospital 🌣

Diabetes Self-Management Education Program 600 St. Johnsbury Road Littleton, NH, 03561 (800)-464-7731 / (603)-444-9000

Dartmouth Hitchcock Manchester

Diabetes Self-Management Education Program 100 Hitchcock Way Manchester, NH, 03104 (603) 629-1795

CHaD/Dartmouth-Hitchcock

Pediatric Diabetes Education Program 4 Elliot Way, Suite 105 Manchester, NH, 03103 (603) 695-2790

Elliot Hospital

Elliot Center for Diabetes Management 1070 Holt Ave. Suite 1400 Manchester, NH, 03109 (603) 663-3130

St. Joseph Hospital 🌣

Diabetes Self-Management Education Program 172 Kinsley Street Nashua, NH 03060

VA Medical Center

Diabetes Self-Management Education Program 718 Smyth Road Manchester, NH, 03104 (603) 624-4366 X 6753

Catholic Medical Center 🌣

Outpatient Diabetes Resource Institute 100 McGregor Street Manchester, NH, 03102 (603) 663-6431

Southern New Hampshire Medical Center 🌣

Joslin Diabetes Center affiliate - West Campus 29 Northwest Boulevard Nashua, NH, 03061 (603) 577-5760

Speare Memorial Hospital

Diabetes Self-Management Education Program 16 Hospital Road Plymouth, NH, 03264 (603) 238-6472

Portsmouth Regional Hospital

Center for Diabetes and Endocrinology 155 Borthwick Avenue, Suite 301 Portsmouth, NH, 03802 (603) 433-5160

Frisbie Memorial Hospital 🌣

Joslin Diabetes Center Affiliate 245 Rochester Hill Rd. Suite B Rochester, NH, 03867 (603) 994-0120

Martin's Point Health Care

Diabetes Self-Management Education Program 161 Corporate Drive Portsmouth, NH, 03801 (800) 260-6681

The Diabetes Center @ MWV/The Memorial

Hospital 🌣

The Diabetes Center Education Program 3073 White Mtn. Highway North Conway, NH, 03860 (603) 356-0796

Camp Carefree

- 16 -

(603) 882-3000

Monadnock Community Hospital

Diabetes Education Program 452 Old Street Road Peterborough, NH, 03458 (603) 924-7191 x 4096

Online Informati

National Diabetes Information Clearinghouse: <u>www.diabetes.niddk.nih.gov</u>

American Association of Diabetes Educators: www.diabeteseducator.org

New Hampshire Diabetes Education Program (NHDEP): www.dhhs.state.nh.us/DHHS/CDPC/dep.htm

Joslin Diabetes Center: www.joslin.org

Juvenile Diabetes Foundation: www.jdf.org

National Diabetes Education Program (NDEP): www.ndep.nih.gov

Medline Plus: http://medlineplus.gov/

American Diabetes Association: www.diabetes.org

Centers for Disease Control and Prevention Diabetes Public Health Resource www.cdc.gov/diabetes

Health, Nutrition & Physical Activity

Academy of Nutrition and Dietetics: www.eatright.org

New Hampshire Dietetic Association: www.eatrightnh.org

Dietary Guidelines for Americans: www.health.gov/dietaryguidelines

Fruits and Vegetables: www.fruitsandveggiesmatter.gov

New Hampshire Healthy Eating Active Living: www.healnh.org

Physical Activity Guidelines for Americans: www.health.gov/paguidelines

Physical Activity Tips for Diabetics: www.cdc.gov/diabetes/consumer/beactive.htm

Diabetes Exercise & Sports Association (DESA): www.diabetes-exercise.org

President's Challenge: www.presidentschallenge.org

New Hampshire Tobacco Helpline: www.trytostopnh.org/quit/helpline.htm 1-800-QUIT-NOW



Glossary of Terms

Complete Diabetes Dictionary can be found at:

www.diabetes.niddk.nih.gov/dm/pubs/dictionary/pages/adaspx

A1C: A test that measures a person's average blood glucose level over the past 2 to 3 months.

Acute Visit: A visit to a health care provider for a non-life-threatening problem, but needs care quickly to keep it from getting worse. This can also be known as an "urgent care" visit. Example: You have a sore throat and high fever. You are treated that same day.

Blood Glucose: Main sugar found in the blood and the body's main source of energy. Also called blood sugar.

Brand Name Drug: A drug that is protected by patent or copyright. Example: Glucotrol is a brand name oral diabetes drug; Glipizide is a generic form of an oral diabetes drug.

Carbohydrate Counting: A method of meal planning for diabetics by counting the number of grams of carbohydrates in food.

Certified Diabetes Educator (CDE): A healthcare professional who helps people with and at risk for diabetes and related conditions. Helps to achieve goals and lead to improved health status.

Co-payment (Co-pay): A set amount of money that a patient pays for health services. Example: You pay \$10.00 for a visit to your doctor and your health insurance company pays the rest.

Deductible: The amount of money you must pay for services before your insurance company begins to pay. This amount is for each year, not for each service. Example: Your health plan includes a \$200.00

for health services before your plan begins to pay.

Diabetes Education: Many health care facilities offer education programs to help you manage your diabetes. These sessions are provided by certified diabetes educators and include nutrition assessment and counseling.

Diabetic Retinopathy: An eye disease common among people with diabetes. High blood sugar can cause damage to small blood vessels in the retina. The blood vessels become larger and leak fluid into the retina, causing blurry vision.

If not treated, this problem can grow more serious and lead to impaired sight and even blindness.

Diabetes Self-Management Education and Training: Education & training for people with diabetes to learn and understand the process necessary for diabetes self-care.

Diabetic Test Strips: A strip of sensitized material used to test your blood glucose level.

Fundus Photography: A camera picture of the back of the eye, used to diagnose eye problems.

Generic Drug: A drug not protected or marketed under the exclusive rights of the inventor (brand name). Example: Glyburide is a generic form of an oral diabetes drug and Micronase is a brand name version of the same drug.

Gestational Diabetes Mellitus: Type of diabetes that can occur during pregnancy. Blood sugar rises during pregnancy. When pregnancy ends, blood sugar returns to normal in about 95% of all cases. Gestational diabetes must be treated by a doctor because it puts both mother and baby at risk.

Glucometer: A medical device for determining the approximate concentration of glucose in the blood after a test strip is used.

Home Blood Glucose Monitoring: A test to check blood sugar, usually every day. This can be done at home by putting a drop of blood on a special strip of paper called a "test strip." The test strip changes color to show how much sugar is in the blood. Its color can be compared to a color chart of blood glucose levels.

Hyperglycemia: High blood glucose level

Hypoglycemia: Low blood glucose level

Laboratory Tests: Tests on blood, urine and other body fluids/tissues that are used to monitor a person's health. Blood glucose, cholesterol, and hemoglobin A1c are examples of laboratory tests for people with diabetes "Common Medical Tests for People with Diabetes," p. 14.

Laser Treatment: This is a treatment for diabetic retinopathy. A laser (strong beam of light) is used to heal the damaged area of the eye.

Medical Necessity: A service or item is covered by the insurance company when necessary for the patient's medical care. Example: An X-Ray for an ankle injury may be considered necessary and be paid for by the insurance company. But if you go to the hospital emergency room for a sore throat, the insurance company may not pay.

Non-Participating Provider: A health care provider (person or organization) who is not part of a health plan's network. Insurance companies may not pay these providers, or may pay only a portion of their charges.

Oral Hypoglycemic Medications: Pills or capsules that people with diabetes take to lower the level of glucose (sugar) in their blood. The medications are used if the pancreas is still producing some insulin. These pills help the cells in the pancreas to release insulin, or help cells in the body to use insulin and glucose.

Participating provider: A health care provider (person or organization) who has a contract with your insurance company to deliver health services.

Podiatrist: A physician who specializes in the care of feet.

Preventative Visit: A visit to a health care provider to check a person's overall health and identify problems early, or before they begin.

Provider: A provider is a person (physician, nurse, etc.) or organization (laboratory, X-ray department, etc.) that delivers health care services.

Provider Network: A provider network is all of the health care providers who have an agreement with a health insurance company to give health services to its subscribers. After providers have joined the network, they are called "participating providers."

Provider Profile: The amount paid to each provider for the services they give.

Reimbursement: The amount of money an insurance company pays to a health care provider for services and supplies.

Services: Care that a patient receives from a health care provider. Physician visits, nutrition counseling, laboratory tests, and home visits are examples of services a patient would receive from a health care provider.

Subscriber: The person with whom the health plan has an agreement. The health plan agrees to pay for covered health services to the subscriber and all other members of his/her family who are included under the agreement.

Supplies: Materials needed to take care of a person's health. A home glucose monitoring kit is an example of a diabetes supply item.

Therapeutic Shoes: Molded shoes that are custom casted to relieve pressure points in the foot, or shoe inserts that help redistribute forces under the foot to relieve pressure points.

Utilization Review: Health insurance company's review of the services ordered by a provider to decide if those services are medically necessary.