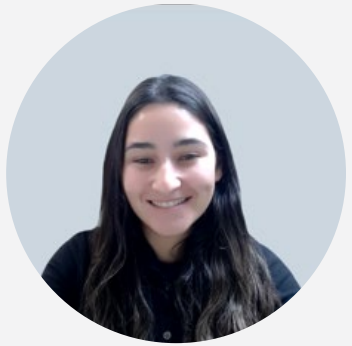
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# Building a shared infrastructure for sustainable diabetes prevention and other public health programs

*Washington State Public Health Association | October 14, 2026*

# Speakers



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Sr. Improvement Advisor

*Comagine Health*



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Program Executive

*YMCA of Greater Seattle*

# Agenda

*Today we will:*

- Hear the story of the Washington State Diabetes Prevention Program task force and what we learned about what is still needed to build shared infrastructure
- Share lessons of progress and pivots
- **Activity** to apply these lessons to building infrastructure for other public health programs

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# Learning objectives

1

Describe the **evolution and role** of the Washington DPP Task Force in advancing statewide diabetes prevention efforts

2

Identify **common barriers and opportunities** related to scaling and sustaining self-management programs

3

Discuss **strategies** for strengthening infrastructure that support equitable access to diabetes prevention services and other public health programs

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# What’s your story?

*Write down a public health initiative, program, or project that you want to see scaled.*

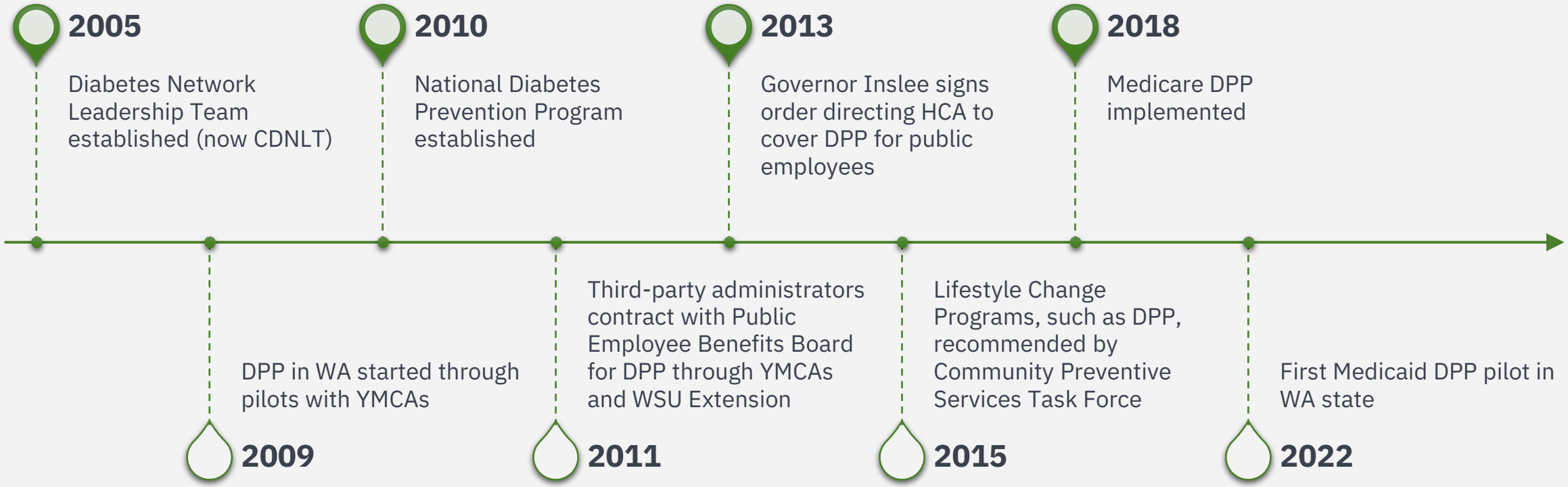
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# National Diabetes Prevention Lifestyle Change Program (DPP LCP)

*This program aims to prevent or delay the onset of Type 2 Diabetes in adults with prediabetes or at high-risk.*

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# History of the National DPP LCP in WA state




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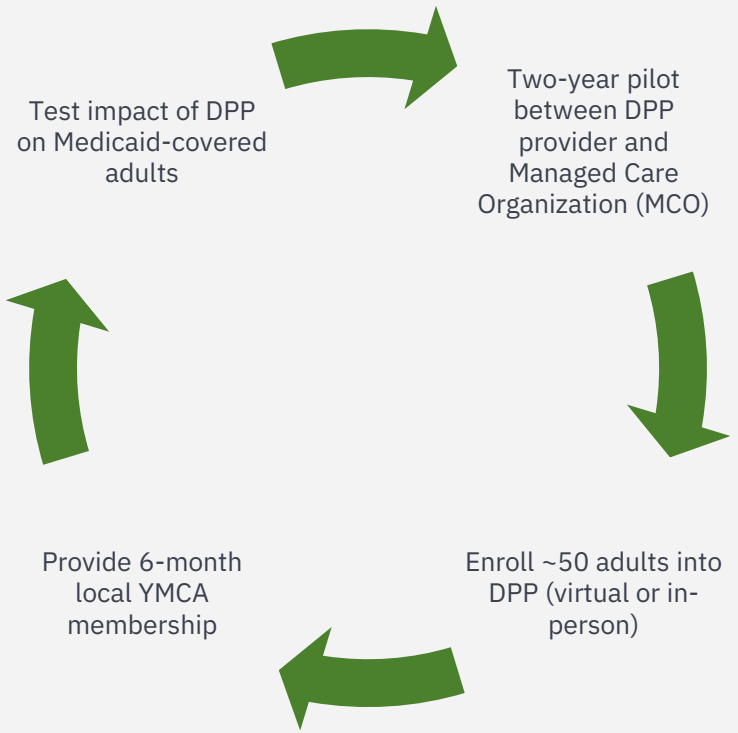
# 2022 Medicaid DPP LCP Pilot

*Core message: If we can build an effective infrastructure for the National DPP LCP, we can create it for other programs.*

## Who

- National Association of Chronic Disease Directors
- Health Care Authority
- Molina Healthcare
- YMCA

## What



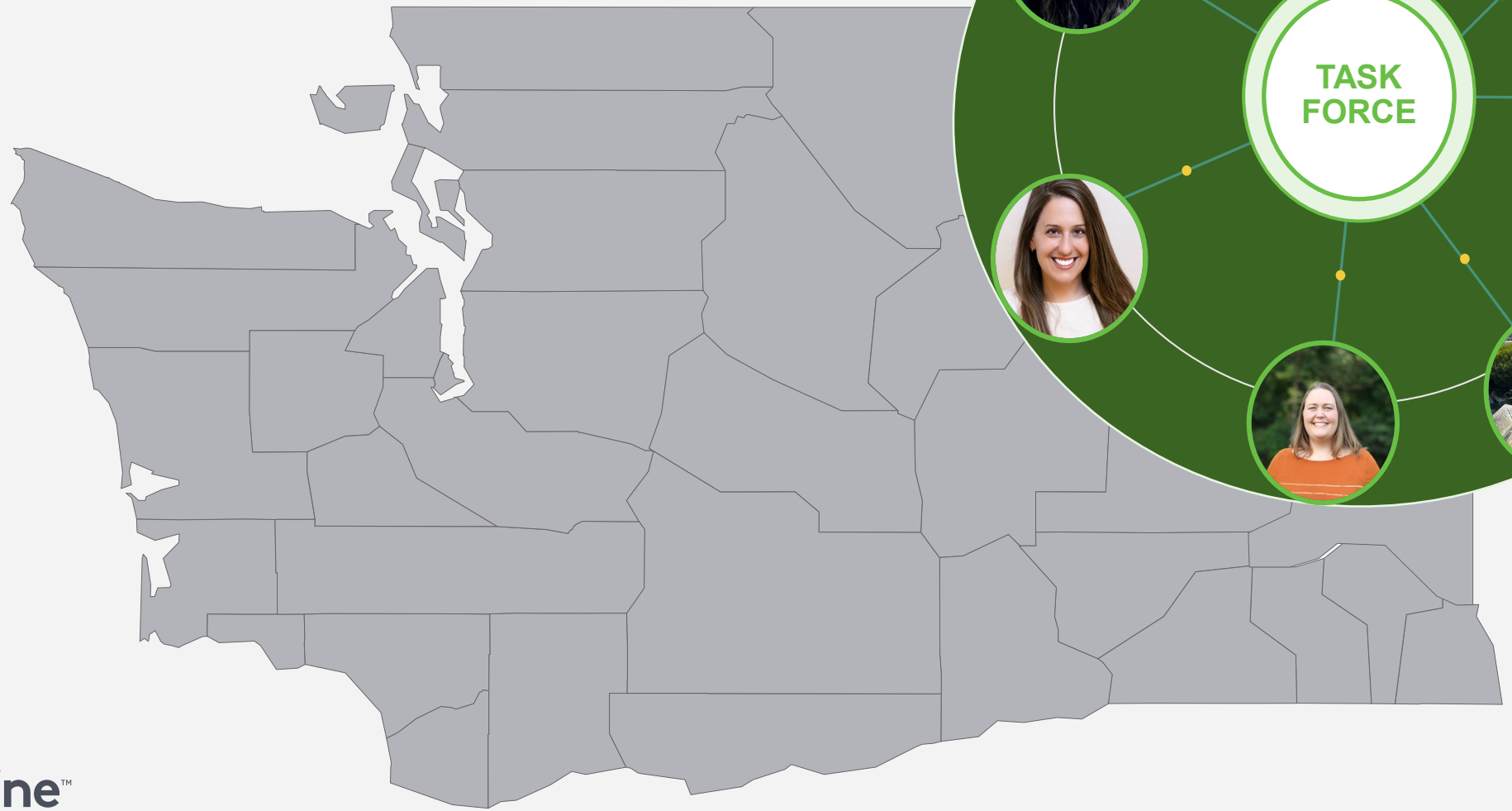

## Why

- Medicaid beneficiaries often have the least ability to pay for diabetes prevention programs out-of-pocket
- If we could increase coverage, we could improve access and reduce the burden of disease
- What state infrastructure do we need to scale this?

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# Good start but...

*How can we level up & who do we need?*






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# Vision and focus

*Together we can…*

| | |
|---|---|
| Vision | Increase access to the National DPP for Washingtonians living with greater risk of diabetes by leveraging Medicare and Medicaid to improve network adequacy |
| Focus | Work together to organize and build sustainable billing and reimbursement infrastructure |

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# Plan

*Between November 2025 and June 2026, the task force created a forum series to build relationships and a shared understanding of the issue and opportunity.*



### Forum 1

Goal: Create shared understanding on National DPP LCP infrastructure



### Forum 2

Goal: Assess billing knowledge and expertise for National DPP LCP



### Forum 3

Goal: Provide baseline billing knowledge and expertise for National DPP LCP



### Forum 4

Goal: Assess commitment and readiness to participate in a workgroup

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# Results

*Between November 2025 and June 2026, the task force created a forum series to build relationships and a shared understanding of the issue and opportunity.*



## Forum 1

Total engaged: **15**

Outcome: Narrowed task force focus to understand who in the room could contribute to the vision and focus

Pivot: Difficulty reaching the right people



## Forum 2

Total engaged: **16**

Outcome: Underlying assumptions were elevated and the need for value propositions were raised

Pivot: Changed focus



## Forum 3

Total engaged: **39**

Outcome: Engagement plateaued and the fourth forum was canceled to address assumptions thru key informant interviews

Pivot: Correct assumptions before moving forward



## Forum 4

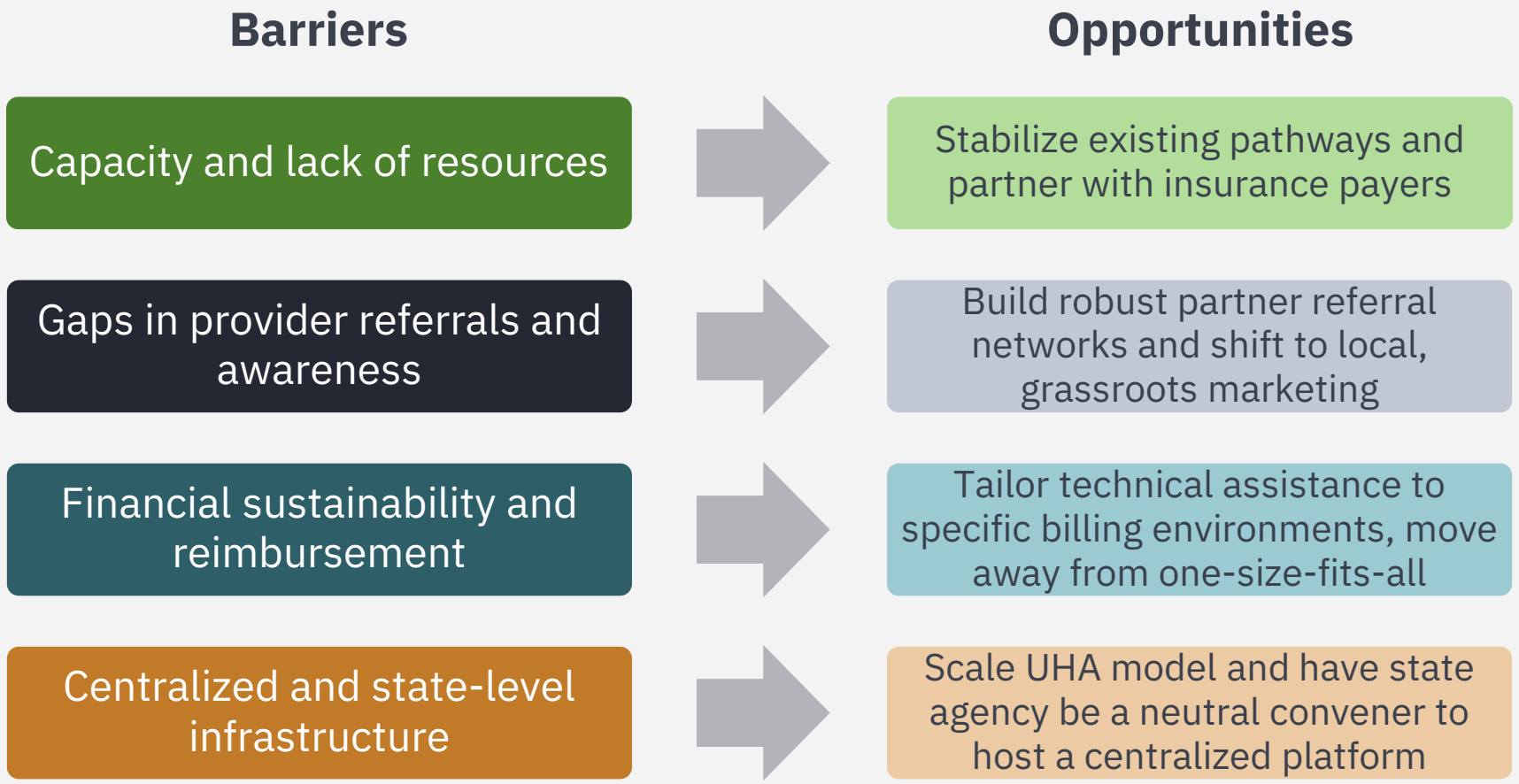
Replaced with key informant interviews

Pivot: Commit to a new, time-bound and focused path forward

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# Common barriers and opportunities for building shared infrastructure

*Results from key informant interviews May 1 - May 31, 2026*




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# Lessons learned for building shared infrastructure

*What makes an effective task force for scaling public health programs and building shared infrastructure?*

**Define purpose and scope**

- Create a single time-bound, finite goal
- Continuously ground in purpose and scope

**Opt for depth not breadth**

- Be agile in implementation
- Rapid testing over constant ideating

**Be clear on decision-makers**

- Bring these people in early
- Start delegation of responsibilities early

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# Shared infrastructure

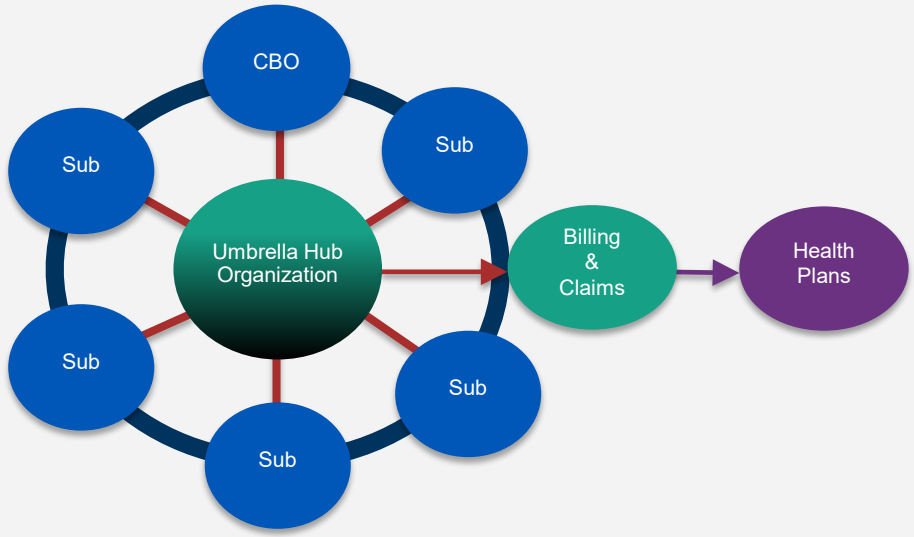
*What are key components? How do you make concrete change?*

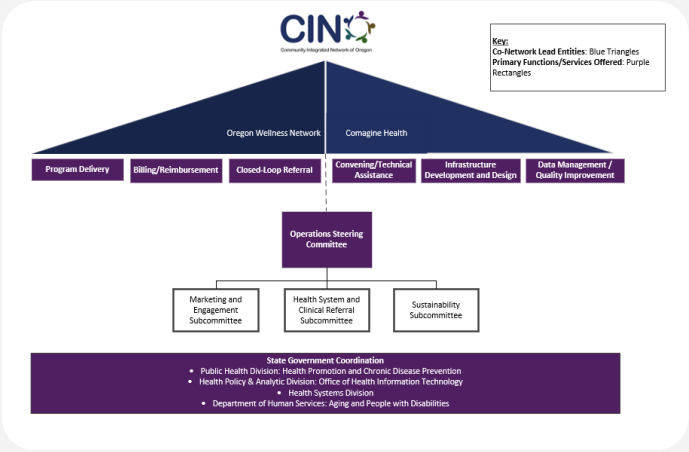
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# Components of building a strong, shared infrastructure

## And what it might look like




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# Activity: Building shared infrastructure

*What might your shared infrastructure look like for your public health program, initiative, or project that you want to scale?*

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# Instructions

- Find your group who has a similar shared project, initiative, or program they want to scale
- Map out a plan for building shared infrastructure for this project, initiative, or program
- Consider the following questions to help you brainstorm:
  - What is your purpose, scope, and timeframe?
  - What approach will you take to get there?
  - Who will be involved?
  - Who are the decision makers?
  - What are the key components of this shared infrastructure?

# Contact us



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# Thank you!