About 88 million Americans adults (more than one in three) have prediabetes and—despite their proven effectiveness—fewer than 500,000 have participated in a Centers for Disease Control and Prevention (CDC)-recognized program that promotes the needed lifestyle changes that can reverse the condition and prevent type 2 diabetes.

“So, despite all the best efforts, diabetes is winning,” said Karl Ronn, founder and CEO of First Mile Care, a spinoff company from Health2047, the AMA-led Silicon Valley venture.

CDC-recognized lifestyle-change programs are modeled after the diabetes prevention program (DPP) study, which showed that an intensive lifestyle-change program could reduce the incidence of type 2 diabetes by up to 58% and as much as 71% for people 60 and older.

“Diabetes is preventable and we’re not preventing it enough,” Ronn said.

The AMA’s Diabetes Prevention Guide supports physicians and health care organizations in defining and implementing evidence-based diabetes-prevention strategies. This comprehensive and customized approach helps clinical practices and health care organizations identify patients with prediabetes and manage their risk of developing type 2 diabetes, including referring patients at risk to a National DPP lifestyle-change program based on their individual needs.

Effective prevention, supermarket convenience

First Mile seeks to link physicians’ patients to local programs and resources within a 10-minute drive of their homes.
“Like going to Costco, seeing a physician is something you do a few times a year, not weekly,” Ronn said. “From a habit-change perspective, the problem is we need a higher frequency than the frequency at which you visit your doctor—that drove us to the ‘first mile’ idea of offering neighborhood-centered sessions near your home.”

First Mile works with physicians to identify patients at risk for diabetes, find them DPP coaches and a location “that’s as convenient as the grocery store,” and then develop a patient cohort that will stick together for a full year.

“We’re really an extension of that doctor’s practice,” Ronn said.

The 22-session DPPs are run by certified coaches and focus on small and sustainable lifestyle changes aimed at reversing prediabetes. Patients attend sessions once a week for four months, followed by biweekly meetings, and then monthly sessions.

“The activity isn’t just the 22 classes that they take through the year—it’s the support network that goes with the classes,” Ronn explained.

Learn more about the First Mile platform as “Uber but for prediabetes.”

**Expanding to Houston**

First Mile recently enrolled its 500th participant, expanded beyond its San Francisco base into Houston, and is working to affiliate with a large health system in Michigan and another large system whose footprint extends into 20 states.

The network began with Mark Savant, MD, an internist and private practice owner in San Francisco, who identified which of his patients had prediabetes and enrolled them in a First Mile DPP.

Demographically, however, San Francisco doesn’t provide the diversity that is needed to scale a national model, Ronn said. So, First Mile officials chose the Houston metro area, with a population of almost 7 million, as their next market. An estimated 10% of the residents already have diabetes and an additional 2 million have been diagnosed with prediabetes. Along with Privia-affiliated physicians, First Mile works in the Houston area with a federally qualified health center.

Other developments include classes with Spanish-speaking coaches. In the works are Houston classes in Vietnamese and San Francisco classes in Cantonese.

“It’s meeting people where they are,” Ronn said, adding that participants are more likely to say “yes” to taking a class if they feel it’s designed “for people like me and taught by people like me.”
First Mile coaches come from many different backgrounds including personal trainers, nutritionists and even pharmacists, Ronn said. What they have in common is they are from the same neighborhood as the participants.

“They speak the language and know what grocery stores to go to,” he explained.

**Huge shift to virtual offerings**

And, of course, the biggest change has been going to almost all virtual programing since the COVID-19 public health emergency was declared. The exceptions are for participants who don’t have access to a computer who get materials in the mail and talk with coaches on the phone.

The Centers for Medicare & Medicaid’s recently released 2021 Medicare physician payment schedule continues payment for virtual classes through the entirety of the public health emergency and calls for doing the same for future events when in-person services are disrupted.

This is important for First Mile, as the median age of its participants is 64. While the switch to online learning has been a challenge, Ronn noted that it’s also created a “we’re-all-in-this-together spirit” that has strengthened the participants’ bonds.

“Some people want to make it like calculus,” he said. “But habit change is a trial-and-error process and there are no answers at the back of the book.”


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