

# ANNUAL CONFERENCE REGISTRATION GUIDE



**SAVE \$100 BEFORE APRIL 27**

# AADE18 ELEVATE INNOVATE MOTIVATE

BALTIMORE, MARYLAND • FRIDAY, AUGUST 17 – MONDAY, AUGUST 20

WHAT SHOULD  
YOU EXPECT FROM  
THE NATION'S  
PREMIER DIABETES  
EDUCATION EVENT?

**MORE**



## MORE TO EXPERIENCE

**You have the passion. AADE18 will help you put it into action.** Come together to connect and experience the collective energy of the nurses, dietitians, pharmacists and other healthcare providers who share your dedication to seeking out the latest in care for those affected by or at risk for diabetes. Take it all in and let the transformation begin for you, your practice, and your organization.

## MORE TO LEARN

Diabetes care is changing at an accelerated pace. Stay a step ahead with education tracks focused on the latest advancements in technology, self-care behaviors, program management skills, clinical therapeutic approaches, and more. From next-level thought leadership to hands on technology demos, AADE18 is helping to shape the future of diabetes care.

## MORE TO DISCOVER

Get ready to fall in love with the vibe of a truly authentic American city as you explore the world-famous Inner Harbor, renowned museums, award-winning restaurants, local music, and historic neighborhoods. Affordable and accessible to DC, NYC and Philly, Baltimore will keep you coming back for more.

**REGISTER BEFORE FRIDAY, APRIL 27  
TO SAVE \$100.**

## REGISTER NOW TO:

- **Save** — Register by April 27 for the best value and enjoy the lowest hotel rates since 2014.
- **Expand** — NEW this year, your full conference registration fee includes access to the recorded education sessions to continue the momentum after you return home. *No CE available for these complimentary recordings.*
- **Earn** — Get up to 32.5 CE credits\* based on the sessions you attend.
- **Explore** — Check out more than 200 organizations, products and innovations in diabetes care in the exhibit hall and take in the best of Baltimore.
- **Engage** — Learn something new, share with others, and gather at fun social events planned during your stay.

*\*29.5 CE credits provided with a maximum of 3 additional CE credits from poster viewing for registered nurses, nurse practitioners and registered dietitians.*

## SAVE MORE AS A MEMBER

Members save \$200 off registration, plus gain access to education and networking opportunities all year long.

	EARLY BIRD	ADVANCE	ONSITE
Member Rate	\$355	\$405	\$455
Nonmember Rate	\$555	\$605	\$655
	through 4/27	from 4/28 - 6/22	starting 6/23

## KEYNOTE SPEAKERS

FRIDAY, AUGUST

17



**Robert A. Gabbay, MD, PhD**, Chief Medical Officer and Senior VP Associate Professor Medicine, Harvard Medical School Joslin Diabetes Center

Healthcare is changing. Diabetes care will undoubtedly undergo a dramatic transformation. New models of care will emerge as an opportunity to truly value the important work that diabetes educators do every day. What are the new roles for diabetes educators? How do we get there?

FRIDAY, AUGUST

17



**Donna Ryan, MPH, RN, RD, CDE, FADE**

*AADE18 Presidential Address*

Join your fellow members to hear AADE President Donna Ryan share her thoughts on the state of AADE and members' contribution to diabetes education.

SATURDAY, AUGUST

18



**Soma Stout, MD, MS**, Vice President of Institute for Healthcare Improvement

Soma Stout, MD, MS will talk about a global initiative to improve 100 million lives for people living with diabetes by 2020.

SUNDAY, AUGUST

19



**Clydette Powell, MD, MPH, FAAP**, Director, Division of Health Care Quality, Office of Disease Prevention and Health Promotion, Office of the Assistant Secretary for Health, US Department of Health and Human Services

The role and work of the diabetes educator is central to improving outcomes for people with diabetes (PWD). Whether focusing on the high risk PWD, working to eliminate undiagnosed hypoglycemia and medical errors, or advocating for safety for all in the healthcare setting, diabetes educators have a story of quality improvement to share.

MONDAY, AUGUST

20



**Mary de Groot, PhD**

*Peer Support Communities: Improving Mental Health for People with Diabetes-Let's Talk About It!*

The time is now to talk about diabetes and mental health. Come hear about the work AADE has been doing to draw attention to this important topic. Facilitator, Mary de Groot, PhD, will discuss how diabetes educators can assess, refer and support people with mental illness. Our panelists from the peer support community will highlight the effectiveness of online peer support and will discuss how peer support communities can serve as a support to PWD and the diabetes educator!

# AADE EXHIBIT HALL

DIABETES TECHNOLOGY IS EVOLVING AT A RAPID PACE. STAY A STEP AHEAD WITH THE LARGEST EXPOSITION OF DIABETES-RELATED PRODUCTS AND SERVICES FROM 200+ COMPANIES. WITH APPLIED DEMOS AND FIRST-HAND EXPERTISE, YOU WILL LEAVE INFORMED AND INSPIRED BY THE INNOVATIONS SHAPING THE FUTURE OF DIABETES CARE.

# 200+

COMPANIES + ORGANIZATIONS



# SCHEDULE AT-A-GLANCE

Earn up to 32.5\* CE at AADE18.

## THURSDAY, AUGUST 16

Time	
8:00am – 7:00pm	Registration
1:00pm – 5:00pm	Preconference Course** Reimbursement Boot Camp
1:00pm – 5:00pm	Preconference Course** Pharmacology Boot Camp
3:30pm – 4:15pm	Product Theater
5:00pm – 6:30pm	State Coordinating Body (CB) and Community of Interest (COI) Networking Reception - Open to All Attendees

## FRIDAY, AUGUST 17

Time		CE Credits
6:30am – 3:00pm	Registration	
7:30am – 9:00am	Presidential Address/ General Session	1.0
9:00am – 3:00pm	Exhibit Hall Open	
9:45am – 10:45am	Education Sessions	1.0
11:00am – 12:00pm	Education Sessions	1.0
12:00pm – 1:00pm	Meet the Poster Authors	1.0
2:00pm – 3:30pm	Education Sessions	1.5
3:45pm – 4:45pm	Education Sessions	1.0
5:00pm – 6:00pm	Education Sessions	1.0
6:00pm – 7:30pm	Customer Appreciation/Special Symposium Boston Scientific	1.0

## SATURDAY, AUGUST 18

Time		CE Credits
6:00am – 7:00am	Zumba	
7:00am – 2:00pm	Registration	
7:30am – 8:30am	General Session	1.0
8:30am – 4:00pm	Exhibit Hall Open	
9:15am – 10:15am	Education Sessions	1.0
10:30am – 11:30am	Education Sessions	1.0
12:00pm – 1:00pm	Meet the Poster Authors	1.0
1:00pm – 2:30pm	Education Sessions	1.5
3:45pm – 4:45pm	Education Sessions	1.0
5:00pm – 6:00pm	Education Sessions	1.0
6:00pm – 7:30pm	Corporate Symposia	1.5

## SUNDAY, AUGUST 19

Time		CE Credits
7:00am – 2:00pm	Registration	
7:30am – 8:30am	General Session	1.0
8:30am – 2:00pm	Exhibit Hall Open	
9:15am – 10:45am	Education Sessions	1.5
11:00am – 12:00pm	Education Sessions	1.0
12:00pm – 1:00pm	Meet the Poster Authors	1.0
1:00pm – 2:00pm	AADE Annual Business Meeting	1.0
2:00pm – 3:00pm	Education Sessions	1.0
3:15pm – 4:15pm	Education Sessions	1.0
4:30pm – 5:30pm	Education Sessions	1.0
5:45pm – 7:15pm	Corporate Symposia	1.5
8:00pm – 10:00pm	AADE Celebration**	

# PARTICIPATE COLLABORATE ELEVATE

## MONDAY, AUGUST 20

Time		CE Credits
6:00am – 7:00am	Zumba	
7:00am – 10:00am	Registration	
7:30am – 9:00am	General Session	1.0
9:15am – 10:15am	Education Sessions	1.0
10:30am – 11:30am	Education Sessions	1.0
12:00pm – 2:00pm	Education Sessions	2.0

### **Hours and schedule are subject to change.**

Registration and education sessions will take place at the Baltimore Convention Center, One West Pratt Street, Baltimore, MD

*\*29.5 CE credits provided with a maximum of 3 additional CE credits from poster viewing for registered nurses, nurse practitioners and registered dietitians.*

*\*\* Additional fee required to attend these events.*

## WHAT'S NEW AT AADE18

- Get access to recorded education sessions as part of your full conference registration fee. *No CE available for these complimentary recordings.*
- Break out of the typical learning tracks and dive deep into the world of diabetes complications with the Mastering Diabetes Complications Series.
- Technology is making an impact at AADE18. This track is filled with hot topics to bring you up to speed.

## DEDICATED TOPIC DAYS

Want to focus on specific areas of practice? You can find sessions covering these specialties in each time slot on the following days:

FRIDAY, AUGUST 17  
**Delay of Type 2 Diabetes**

SATURDAY, AUGUST 18  
**Type 1 Diabetes**

MONDAY, AUGUST 20  
**Diabetes and Mental Health**

## MARK YOUR CALENDAR FOR THE AADE CELEBRATION

SUNDAY, AUGUST 19  
8:00pm – 10:00pm

Tickets are \$20 for the 5th Annual Celebration event and can be purchased through the registration process in advance and onsite. Price increases to \$25 onsite.

## EDUCATION SESSION INFORMATION

THIS YEAR, AADE18 IS FOCUSED ON ELEVATING THE EDUCATION EXPERIENCE. PREPARE TO BE MOTIVATED BY SESSIONS THAT ENGAGE, SPEAKERS WHO INSPIRE, AND NEW OPPORTUNITIES THAT DRIVE YOU TO EXPLORE THE LATEST ADVANCEMENTS IN DIABETES PREVENTION AND MANAGEMENT.

All education sessions are open to participants on a first-come first-served basis. No registration is required.

### EDUCATIONAL FORMATS

#### General Sessions (60 minutes)

An exceptional lineup of keynote speakers will share their research, leadership, and innovation in diabetes care.

#### Education Sessions (60, 90, 120 minutes)

Featuring application of principles, education, best practices, and more from respected leaders in the field of diabetes care.

#### Research Sessions (60, 90 minutes)

Three 30-minute presentations highlighting research where the findings can be applied to clinical practice.

#### Corporate Symposia (90 minutes)

Each session provides additional educational/informational opportunities.

#### Product Theater (45 minutes)

CE not available. An in-depth look at new diabetes products, services, and practices.

#### DANA Tech Labs (30 minutes)

CE not available. Hands-on device demonstrations from leading industry partners.

### LEARNING TRACKS

Explore sessions grouped into different learning categories to focus on the topics that interest you most.

- AADE7™ in Practice
- Business Models
- Clinical Therapeutics of Glycemic Management
- Mastering Diabetes Complications Series
- Pathophysiology: Origin and Management Strategies
- Population Health
- Prevention/Delay of Type 2 Diabetes
- Psychosocial/Behavioral
- Technology: Devices, Data and Patient-Generated Health Data

### MASTERING DIABETES COMPLICATIONS SERIES

NEW for AADE18! Look for eight sessions in the Mastering Diabetes Complications Learning Track specially designed to focus on a prevalent or serious diabetes complication. Each session will include an overview of the condition, research supporting the connection to diabetes, disease progression, assessment, educator's role in the management of the condition, and teaching tools for both educators and PWD.

### TYPE OF ACTIVITY

This activity includes both knowledge-based and application-based education sessions.

### TARGET AUDIENCE

This continuing education activity should be of substantial interest to nurses, pharmacists, dietitians/dietitian nutritionists, PAs, nurse practitioners, and other healthcare professionals who care for individuals with diabetes and other related conditions.





# ENGAGE EXCHANGE CONNECT

## CE CREDIT INFORMATION

AADE18 attendees can earn up to 29.5 credits of continuing education hours based on sessions you attend. A maximum of three additional hours of credit is available to registered nurses, nurse practitioners and registered dietitians for poster viewing. Registered dietitians also may gain additional hours of credit for exhibit-viewing through their accrediting body.



### Registered Nurses

The American Association of Diabetes Educators is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. This program provides 29.5 contact hours of continuing education credit.

AADE is accredited as a provider of continuing nursing education by the California Board of Registered Nursing (CEP#10977).



### Pharmacists

The American Association of Diabetes Educators is accredited by the Accreditation Council for Pharmacy Education (ACPE) as a provider of continuing pharmacy education. This program is eligible for ACPE credit; see final CPE activity announcement for specific details.



### Registered Dietitians

The American Association of Diabetes Educators (AM001) is a Continuing Professional Education (CPE) Accredited Provider with the Commission on Dietetic Registration (CDR). CDR Credentialed Practitioners will receive 29.5 Continuing

Professional Education units (CPEUs) for completion of this activities/materials. Continuing Professional Education Provider Accreditation does not constitute endorsement by CDR of a provider, program, or materials.

### Nurse Practitioners

The AADE18 education activity will be submitted for continuing education credit to the American Association of Nurse Practitioners for approval of up to 29.5 contact hours of accredited education.

### CDR Performance Indicators

- 5.1.2 — Applies understanding of informatics terminology and input and output devices (e.g. laptop, smart phone, flash drive).
- 8.1.5 — Applies medical nutrition therapy in disease prevention and management.
- 8.2.1 — Assess the physical, social and cultural needs of the individual, group, community or population.
- 8.3.1 — Maintains the knowledge and skill to manage a variety of disease states and clinical conditions.

### Learning Need Code

5190

### Physician Assistants

This program is not yet approved for CME credit. The American Association of Diabetes Educators plans to request 29.5 hours of AAPA Category 1 CME credit from the Physician Assistant Review Panel. Total number of approved credits yet to be determined.

### Board Certified Advanced Diabetes Management (BC-ADM)

AADE is the administering body for the Advanced Diabetes Management credentials. Continuing education programs offered by AADE can be used toward fulfilling BC-ADM certification and recertification requirements.

### Certified Diabetes Educators

To satisfy the requirements for renewal of certification for the National Certification Board for Diabetes Educators (NCBDE), continuing education activities must be diabetes-related and approved by a provider on the NCBDE list of Approved Providers ([www.ncbde.org](http://www.ncbde.org)). NCBDE does not approve continuing education. The American Association of Diabetes Educators (AADE) is on the NCBDE list of Approved Providers.

# PRECONFERENCE COURSES

THURSDAY, AUGUST 16

1:00pm – 5:00pm

These sessions require a separate registration fee from AADE18 and space is limited.

## Pharmacology Boot Camp

4 CE Available

*Speaker: Susan Cornell, BS, PharmD, CDE, FAPhA, FAADE, Associate Professor of Pharmacy Practice, Midwestern University*

Get a crash course in the pharmacology and pathophysiology of diabetes. Whether you are new to diabetes education and need to learn more about insulin versus non-insulin medications, or if you need a refresher on the latest drug classes, the Pharmacology Boot Camp is just what you need to strengthen your diabetes medication knowledge.

## Reimbursement Boot Camp

4 CE Available

*Speaker: Patty Telgener, RN, MBA, AADE Reimbursement Expert, Vice President of Reimbursement at Emerson Consultants, Inc.*

Successful reimbursement is the surest way to a financially sustainable diabetes education program. Review how to maximize your program's reimbursement, avoid the most common billing mistakes and discuss billing codes for services implemented in your program. Learn how to act on claims falsely denied by Medicare or by a private payer. The Reimbursement Boot Camp is a must for anyone concerned with leaving reimbursement dollars on the table.

## COLLABORATING ORGANIZATIONS

- American Diabetes Association
- Academy of General Dentistry
- American Academy of Family Physicians
- College Diabetes Network
- Diabetes Care & Education – Practice Group of the Academy of Nutrition and Dietetics
- Diabetes Patient Advocacy Coalition
- Endocrine Society
- JDRF
- National Certification Board of Diabetes Educators
- Pediatric Endocrine Society
- T1DExchange

# LEARNING TRACKS

Sessions are grouped into different learning categories to help you find the topics of greatest interest to you.

- AADE7™ IN PRACTICE
- BUSINESS MODELS
- CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT
- MASTERING DIABETES COMPLICATIONS SERIES
- PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES
- POPULATION HEALTH
- PREVENTION/DELAY OF TYPE 2 DIABETES
- PSYCHOSOCIAL/BEHAVIORAL
- TECHNOLOGY: DEVICES, DATA AND PATIENT-GENERATED HEALTH DATA

## 9:45am – 10:45am



### ■ AADE7™ IN PRACTICE

#### **Personalized Medicine Approaches for Treatment of Diabetes Based on Gut Microbiota**

*Eran Segal, PhD*

Accumulating evidence supports a causal role for the human gut microbiome in obesity, diabetes, metabolic disorders, cardiovascular disease, and numerous other conditions, including cancer. Here, the presenter will review research on the role of the human microbiome in health and disease, aimed at developing personalized medicine approaches that combine human genetics, microbiome, and nutrition. There is no “one size fits all” diet.

### ■ CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT

#### **Inpatient Diabetes Management: Navigating Rough Seas and Reaching the Harbor Safely**

*Donna Stevens, DNP, FNP-C, BC-ADM, CDE*

Management of hospitalized PWD is challenging. The focus of this session will be on pumps and populations. This includes the basics of pumps settings, when to pump and when to convert to injections or infusions, and how to convert settings to orders. Strategies for management of special populations including those with steroid-induced hyperglycemia, cystic fibrosis, renal dysfunction, and converting from intravenous to subcutaneous insulin will be covered.

### ■ MASTERING DIABETES COMPLICATIONS

#### **What Goes Wrong in the Foot of a PWD?**

*Rosalyn Marcus, DPM, RN, CDE*

Join us in learning about common foot abnormalities, early detection, and rapid treatment vs. delayed treatment. You’ll hear details about appropriate footwear and conservative management of abnormalities. Attendees will leave with teaching tools for PWD to prevent and delay amputations, as well as knowing when to refer PWD to a podiatrist or healthcare providers in an effort to reduce risk.

### ■ PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES

#### **Multi-Faceted and Multi-Disciplinary Strategies in Practice to Manage Overweight and Obesity**

*Katherine O’Neal, PharmD, MBA, BCACP, CDE, BC-ADM, AE-C; Patricia Davidson, DCN, RDN, CDE, LDN, FAND*

In this session, presenters will review the newly released practice paper Multi-faceted and Multi-Disciplinary Strategies in Practice to Manage Overweight and Obesity. Attendees will learn strategies to address overweight and obesity including lifestyle/behavioral changes, pharmacotherapy and surgical options.

### ■ PSYCHOSOCIAL/BEHAVIORAL

#### **Glucose Lowering Injectables: Helping People Overcome Their Barriers**

*Sara Britton, FNP-BC, BC-ADM*

This session will review glucose lowering injectable therapies, barriers to person and healthcare provider use, and tools to assist PWD to overcome their identified barriers.

### ■ TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA

#### **Use of Activity Trackers to Promote Behavior Change and Diabetes Delay**

*Stephanie Merck, PhD, APRN, CDE, BC-ADM; Francine Nelson, PhD, RN*

This presentation will discuss the use of activity trackers or applications to prevent diabetes and implement diet and exercise. Successes, challenges and strategies will offer insight into the application of self-management skills to prevent diabetes. The presentation concludes with recommendations for practice and further research.

## 11:00am – 12:00pm



### ■ AADE7™ IN PRACTICE

#### **Maximize Accurate Use of the Two Nutrition Facts Labels**

*Lisa Laird, RN, BSN, CDE; Kathy Stroh, MS, RD, CDE*

The implementation of the new Nutrition Fact and Supplement Facts Label has been delayed to 2020. However, because many manufacturers have begun to use the new label format, consumers see two versions of the Nutrition Facts label in the market place. The two labels will be analyzed as they relate to diabetes self-care. Examples of critical errors related to label misinterpretation will be presented.

**Why So Many People Fail to Keep Off The Weight They Lose***Kevin Hall, PhD*

Why is it that after losing significant amounts of weight, people gain it back? Expert on metabolism at the National Institute of Diabetes and Digestive and Kidney Diseases, Kevin Hall, PhD, will shed some light on this frustrating phenomenon that affects so many people. Dr. Hall will share the findings from following contestants from the NBC reality show *The Biggest Loser* for six years after the contestants had dropped significant amounts of weight.

**POPULATION HEALTH****Turning Passion into Action: Population Health, Diabetes and the Diabetes Educator - Why Me?***Kellie Rodriguez, MSN, MBA, CDE; Joan Olveda, RN, CDE; Shelley Christian Taylor, BSN, CDE, RN*

The time for diabetes educators to lead change in diabetes care and education is now! The role of the diabetes educator has changed over recent years and is not purely immersed in the provision of DSMES. The move toward a value-based population health approach provides enormous opportunities for diabetes educators to define the roles they play in the care and education of PWD and to cement their value in their respective organizations. This session will outline the immediate opportunities and inherent roles diabetes educators have within a population health framework, including: population identification, care prioritization, engagement strategies, communication and intervention modalities, interventions, and program outcomes. It is time to turn your passion into action!

**PREVENTION/DELAY OF TYPE 2 DIABETES****Let's Get Started: Implementing a Successful National Diabetes Prevention Program***Erica Moore, MHS, RD, LD, CDE, BC-ADM; Susan De Abate, RN, MSN/ED, CDE*

Organizational readiness to implement the NDPP within a health system is imperative. Attendees will understand how to obtain leadership buy-in and identify key stakeholders and champions within the organization. Assessment of current infrastructure to handle the expansion without adding additional staff time or burden before the program is established, anticipated growth potential, and return on investment as perceived by the organization will be explored. Practice pearls will be shared on how, when and why to implement a "Session Zero" information session for potential participants before starting a cohort to maximize participant recruitment efforts and to increase overall retention.

**PSYCHOSOCIAL/BEHAVIORAL****Motivational Interviewing: Facilitate Constructive Self-Management Conversations between Parents and Adolescents***Jan Kavookjian, MBA, PhD*

This program will present the use of Motivational Interviewing to facilitate caring, empowering encounters for parents and adolescents as they strive for positive diabetes outcomes.

**TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA****New to Devices? Insulin Pump and CGM Basics***Mindy Saenz, RDN, LDN, CDE*

This presentation will provide an overview of similarities and differences between insulin pump therapy and CGM devices currently available. Designed for attendees new to diabetes management devices.

**2:00pm – 3:30pm****AADE7™ IN PRACTICE****2017 National Standards for DSMES with a Focus on the AADE Interpretive Guidance***Jodi Lavin-Tompkins, MSN, RN, CDE, BC-ADM; Leslie Kolb, BSN, RN, MBA*

Every five years the National Standards for Diabetes Self-Management Education and Support are updated and revised to reflect current evidence and practice. The new standards were released in 2017, with implementation requirements extending into 2018 for new and renewing applicants. This session will give an overview of the key changes from the 2012 version of the standards, dig deep into the Interpretive Guidance document revealing tips for meeting and maintaining each standard, and review AADE resources for Diabetes Education Accreditation Program.

**BUSINESS MODELS****A New Model of Care to Deliver DSMES in a Large Worksite Employer-Funded Patient Centered Medical Home***Lisa Martin, PharmD, BC-ADM, CDE, CHWC*

This presentation will explore the development and delivery of a successful DSMES DEAP Program in a large worksite, employer-funded Patient Centered Medical Home. Presenters will showcase how convenience and accessibility to a quality-focused team can lead to increased utilization and improved outcomes.

**CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT****How to Find The Right Insulin at the Right Time for Each Individual***Patricia Garnica, MS, ANP-BC, CDE, CDTC*

This session will present the pharmacokinetics, side effects, contraindications, and price of old and new insulins in an effort to help attendees understand who can benefit from the currently available insulin options. Additionally, the session will discuss how to consider unique clinical conditions, insulin needs, socioeconomic characteristics, and personal goals of individuals.

**POPULATION HEALTH****Statewide Diabetes Prevention and Management Interventions: Engaging Public Health to Improve Population Health***Tiffany Pertillar, MPH, MSW, CHES*

This session will demonstrate how State Health Departments (SHD) have successfully worked in partnership with diabetes educators and other sectors to increase access to evidence-based programs such as the NDPP and DSMES Program. Four SHD diabetes managers will discuss population health through collaborations with key stakeholders to address the diabetes burden and impact health outcomes in their states.

### **Seminal NIDDK Diabetes Trials: Building a Foundation for Diabetes Prevention and Treatment**

*Judith Fradkin, MD; Gayle Lorenzi, RN, CDE; Mary Larkin, RN, CDE*  
Diabetes Educators/Trial Coordinators are key to the successful design, execution and translation of completed studies, including DCCT/EDIC, DPP/DPPOS and GRADE (recognizing that results/translation is yet to come). This session's panelists and their colleagues' skills and perspectives were critical, not only to implementation of studies but to ensuring that the study questions reflected the key clinical issues incorporating individual perspectives. Discover how DCCT set the paradigm for empowering trial coordinators and has influenced and extended to subsequent diabetes trials and trials outside diabetes.

### **TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA**

#### **Pour Some Sugar on Me**

This technology track module features four presentations offering unique insights for attendees related to optimizing glycemic management using technology to improve data analysis.

- **Harnessing the Power of the Download** - Eileen Faulds, MS, RN, FNP-BC, CDE, Inpatient Management Nurse Practitioner, The Ohio State University Medical Center/ College of Nursing
- **Sugar Surfing on Continuous Glucose Data** - Stephen Ponder, MD, CDE, Pediatric Endocrinologist, Baylor Scott and White Healthcare
- **Improving Inpatient Glycemic Control Utilizing Data and Technology** - Felicia Amick, RN, BSN, CDE, Diabetes Educator, Carolinas Healthcare System Union
- **Sending Individuals Home on Insulin and Keeping Them Home** - Heidimarie Macmaster, CDE, PharmD, Diabetes Management Specialist, UCSF Medical Center

**3:45pm – 4:45pm**



### **AADE7™ IN PRACTICE**

#### **Equip Yourself to Address Individuals' Social Determinants of Health**

*Felicia Hill-Briggs, PhD, ABPP; Tiffany Gary-Webb, PhD, MHS; Patti Ephraim, MPH*

Social determinants of health (SDOH) account for 40% of population health outcomes and collectively SDOH are the leading contributor to health inequities in the United States and internationally. Differences in the lived experience, care and access, and health outcomes of diabetes documented between racial/ethnic, cultural, and socioeconomic status groups are largely attributable to the influence of SDOH. This session equips attendees with current recommendations, tools, and approaches for addressing SDOH.

#### **Practical Strategies for Facilitating Compelling Group Sessions**

*Jordyn Forsyth, MS, RD, LD, CDE, CSOWM*

This session is designed to help attendees effectively teach, facilitate, engage, and obtain outcomes in a group setting. New and seasoned practitioners will learn how to use best practice techniques and tools to more confidently and successfully facilitate group classes. Time will be devoted to preparation of interesting and engaging diabetes management group sessions and explore ways to retain group members.

### **PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES**

#### **Type 2 Diabetes Physiology to Care Plan: A Case Study Approach**

*Chris Memering, BSN, RN, CDE; Nathan Painter, PharmD, CDE*

Using a case study approach, the presenters will explore the pathophysiological changes that lead to the diagnosis of diabetes and the development of a care plan.

### **PREVENTION/DELAY OF TYPE 2 DIABETES**

#### **The National Diabetes Prevention Program (NDPP) Online Coverage Toolkit: The Nuts and Bolts of Gaining, Implementing and Sustaining Coverage for NDPP**

*Joanna DiBenedetto, BS, MNM*

In this session, the presenter will walk participants through the NDPP Coverage Toolkit released in 2017 as part of an ongoing demonstration project to establish Medicaid coverage for the NDPP lifestyle change program. The presenter will demonstrate how to use the toolkit to obtain coverage for the NDPP through public and private payers.

### **PSYCHOSOCIAL/BEHAVIORAL**

#### **Listen and Learn: The Perspectives of a Panel of People with Type 1 Diabetes**

*Nicole Bereolos, PhD, MPH, CDE; Anna Norton, MS; Shelby Kinnaird, MS; Christel Marchand Aprigliano, MS; Stephen Shaul*

This panel discussion among people with type 1 diabetes will explore, through their personal and community experiences, how diabetes educators can maximize their collaboration with PWD to increase empowerment and self-efficacy. They will also promote the value of peer support and peer support communities.

### **TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA**

#### **Fireside Chat with Educators Who Deliver Diabetes Care with Digital Health Tools**

*Toby Smithson, MS, RDN, LD, CDE; Janice MacLeod, MA, RDN, CDE, FADE; Rachel Head, RD, CDE*

Payment and care models are evolving toward value-based. In a fireside chat format, a panel of diabetes educators working with an e-educator platform will share evidence and expertise to support the use of digital health in diabetes management today. They'll also share how diabetes educators can find new employment opportunities in digital health.

**5:00pm – 6:00pm**



### **AADE7™ IN PRACTICE**

#### **Everyone with Diabetes Counts: Increasing Your Reach**

*Karen Ten Cate, MA, RDN, CDE; Ardis Reed, MPH, RD, LD, CDE, CHWI; Sarah Smith, MAT, RD, LD, CDE; Merle Shapera, MS, RD, CDE, LDN*

Come hear how you can be involved in growing the reach of your program or by supervising new programs to sustain quality DSMES for all. Everyone with Diabetes Counts (EDC) is a five-year national program administered by Centers for Medicare and Medicaid Services (CMS) Quality Improvement Organizations. EDC helps physician practices improve care quality and DSMES referrals, and helps those with DSMES programs become accredited or recognized, leading to sustainability.

**MASTERING DIABETES COMPLICATIONS**

**Back to the Future of Hypertension**

*Evan Sisson, PharmD, MHA, RPh, CDE, FAADE; John Bucheit, PharmD, BCACP, CDE*

Guideline recommendations for BP goals of therapy have changed in response to publication of new data. For many years, BP<130/80 was recognized as optimal for PWD. This was relaxed based on data from the ACCORD trial and recommendations from JNC8 to BP <140/90. Since that time, additional data from the SPRINT trial and others have shifted the recommendation back to a more intensive goal. The 2017 Hypertension Clinical Practice Guidelines not only support this more aggressive approach, but also present comprehensive recommendations on BP measurement, diagnosis, and drug therapy management of individuals with hypertension. This presentation provides attendees with an interactive case-based approach to apply these new guideline recommendations.

**POPULATION HEALTH**

**Communicating DSMES in a Culture of Poverty**

*Karen Shidler, RN, MS, CDE, BC-ADM*

Take the time to understand the mental model of poverty and the importance of establishing a relationship to provide culturally sensitive care. Appreciating the problem-solving skills of a person who has been living in poverty with limited resources will enable the attendee to partner more effectively with the individual to improve outcomes and quality of life.

**POPULATION HEALTH RESEARCH SESSIONS**

**Leveraging the EMR to Identify Predictors of Non-Attendance to a DSMES Program**

*Andrew Bzowycyji, PharmD, BCPS, CDE*

The ADA Standards of Medical Care in Diabetes recommend that all people with diabetes participate in DSMES at diagnosis and as needed thereafter. In adults with type 2 diabetes, DSMES results in an average absolute reduction in A1C of 0.57%. Participation in DSMES is low and research is needed to identify barriers. As clinics and health systems look at ways to fully integrate the electronic medical record into their daily practice, they should be able to leverage specific data to identify predictors for non-attendance to DSMES programs to inform methods for better engaging these at-risk populations.

**PREVENTION/DELAY OF TYPE 2 DIABETES**

**Highlighting the Pearls and Avoiding the Pitfalls of Establishing Your Diabetes Prevention Program**

*Teresa Brown, MPH, RD/LD, CDE; Christie Bruehl, RD/LD, CDE*

In this workshop, presenters will discuss innovative approaches of an established and fully accredited DPP. Tools and resources for recruitment, marketing, retention, common program challenges and potential pitfalls to be avoided will be covered.

**PSYCHOSOCIAL/BEHAVIORAL**

**Meeting the Needs of Culturally Diversified Individuals and Growing Your Cultural Competences in Providing Diabetes Education**

*Barbara Eichorst, MS, RD, CDE; Adeola Akindana, DNP, CRNP, CDE*

Providing culturally accurate interventions that are learner-centered can be a challenge in one-on-one settings, and even more complicated with a group DSMES. The goal is to allow each individual, no matter what country or cultural background they are from, to feel understood and validated, and to come back for additional sessions. In this session, presenters will address the effective, culturally sensitive language that has positive impact on behavior, empowerment, and perceptions. You will also gain knowledge of different cultures and belief systems, which will change your views of how you perceive and provide care.

5:30pm – 6:00pm



**POPULATION HEALTH RESEARCH SESSION**

**Delivering an Effective Physician Supported Diabetes Education Program**

*Harsimran Singh, BA, MA, PhD; Ana Pimentel, MSW*

Presenters will review findings highlighting the differences between healthcare providers and PWD on satisfaction and expectations from diabetes education programs. Presenters will discuss techniques to develop an engaging, person-centered, physician-supported diabetes education program that delivers improved clinical and psychosocial outcomes.

Saturday, August 18

9:15am – 10:15am



**AADE7™ IN PRACTICE**

**Navigating Nutrition Information Individuals Access Online**

*Jeanee Diaz, RD, CSOWM, CDE*

This workshop will explore how individuals rely on the use of the internet for nutrition information. Special attention will be spent on buzzwords such as “clean,” “raw,” and “whole” and how to guide individuals away from dubious nutrition information they may have discovered online.

9:15am – 10:15am



**Business Models**

**Real World Dynamics to Deliver Value in Value Based Care Models**

*David Weingard, MBA; Teresa McArthur, MS, RD, CDE, LDN*

Value defines the framework for performance improvement in health care. With the advent of incentive programs designed to drive value-based care, improving quality measures is a priority for health plans and providers. If value improves, all stakeholders stand to benefit. What are the most effective ways to increase outcomes relative to costs and how do all stakeholders work together to achieve value? This presentation will examine how value can be delivered for individuals and stakeholders based on real world dynamics and quality measures.



10:30am – 11:30am

**CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT**

**Navigating the Prescription Maze in a Rural Healthcare Setting: Coverage, Rebates, Copay Cards and More!**

*Justine Fierman, FNP-BC, BC-ADM, CDE*

Do you need help navigating the prescribing maze? This session will include the most cost-effective options, how to navigate coverage, mail order companies, rebates, copay cards and more. You'll explore solutions to many challenges and have the opportunity to share ideas at the end of the presentation so attendees can walk away with a variety of options and ideas.

**PREVENTION/DELAY OF TYPE 2 DIABETES**

**Delaying Type 2 Diabetes: Perspectives from NIH, CDC and CMS on Progress and Goals**

*Judith Fradkin, MD; Ann Albright, PhD, RD; Nina Brown-Ashford, MPH, CHES*

Ever wonder how things evolve from research to dissemination and finally become reimbursable? This progression happens as research leads to the creation of interventions. One example is the NDPP and MDPP, but it doesn't end there. Throughout this session, presenters from NIH, CDC, and CMS will discuss building on successes and further improvement for future interventions.

**PSYCHOSOCIAL/BEHAVIORAL**

**Transition to Independence: Understanding and Addressing the Emotional and Lifestyle Barriers for Teens and Young Adults with Type 1 Diabetes**

*Persis Commissariat, PhD; Christina Roth; Emily Ike, MS; Katherine Wentzell, PNP; Malissa McQuillan; Jennifer Saylor, PhD, APRN, ACNS-BC*

This session will help attendees recognize unique challenges, identify common signs of emotional and lifestyle barriers to self-care, and provide practical approaches to working with teens and adolescents with type 1 diabetes and their families. Interactive discussion with panelists, the College Diabetes Network, and diabetes educators will explore new approaches to care.

**TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA**

**Hybrid Closed Loop: Love to Love You Baby!**

This technology track module features a look at the art, science, and evidence for using hybrid closed-loop (HCL) systems in practice, including a framework for diabetes educators to use when working with HCL systems; selection, education and initiation strategies; and methods to optimize insulin doses for ongoing HCL therapy. Real-world case studies will demonstrate best practices for both PWD and practitioners. Outcomes data on the HCL systems showing clinical evidence of decreased hypoglycemia, increased time in range and improved glycemic control will be shared. Case studies will provide real-world examples and a platform for interactive Q&A.

- Hybrid Closed Loop: The Art - Laurel Messer, RN, MPH, CDE, CCRP, Manager of Pediatric Artificial Pancreas Research, Barbara Davis Center/University of Colorado
- Hybrid Closed-Loop Insulin Delivery System: Case Studies and Clinical Evidence - Keys to Improving Glycemic Stability - Marie Schongar, MS, FNP-BC, BC-ADM, CDE, Family Nurse Practitioner/Clinical Instructor, Albany Medical Center

**AADE7™ IN PRACTICE**

**Modeling Physical Activity: From Talk to Action!**

*Susan Pierce, MPT, CDE; Elissa Hallen, RN, CDE*

It's time for conversations about activity to become as detailed as those about food. Attendees will use this opportunity to learn how to model those active behaviors. Find ways to move with your clients by including movement in education to introduce the possibility that exercise can be a positive experience and a component of a healthy lifestyle.

**BUSINESS MODELS**

**Evolving Roles Mean Business Opportunities: How to Package Your Plan**

*Sara Lasker, MEd, MCHES, RMA, CDE*

The role of the diabetes educator is evolving and opening doors for a variety of business opportunities. This presentation will include the basics of writing a business plan, discovering the true needs of your market/population, and how to package your business model to sell.

**MASTERING DIABETES COMPLICATIONS**

**DKD...Doesn't Stand for Don't Know Diddly...Or Does It?**

*Donna Stevens, DNP, FNP-C, BC-ADM, CDE*

Diabetes related Kidney Disease (DKD) is the leading cause of kidney failure. Early recognition and intervention can reduce the burden of DKD. In this session, attendees will learn how to identify and monitor for DKD, educate on strategies utilized to slow progression of DKD, discuss the role of the diabetes educator in the interdisciplinary team, and provide teaching strategies that promote self-care in those with DKD.

**The Relationship Between Diabetes, Oral Health and the Role of Reciprocal Referrals Between Provider, Diabetes Educator and Dentist**

*Donna Jornsay, MS, BSN, PNP; Julie Wood, MD, MPH, FAAFP; Jerry Brown, DMD, CDE*

AADE, AGD, and AAFP have teamed up to discuss the important role that each professional plays in improvement of oral health to effect outcomes for PWD. Learn how diabetes educators, dentists, and healthcare providers can build relationships in an effort to increase continuity of care. Become part of your local team!

**POPULATION HEALTH**

**Best of 2018 ADA Scientific Sessions**

*William Cefalu, MD*

This session will feature highlights and pearls from the American Diabetes Association's 78th Scientific Sessions. Come and learn about the most significant advances in diabetes research, treatment, and care presented during this year's ADA Scientific Sessions.

**TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA****“You Built a What?!”: How to Prepare for Conversations about Do-It-Yourself Automated Insulin Delivery Systems***Brenda Weedman, MS, BSN, RN, CDE; Jessica Kirk, MSN, RN, CPN, CDE*

In this interactive session, attendees will learn about the world of “Do-It-Yourself” (DIY) closed-loop insulin delivery systems from two CDEs who are using these systems. People and caregivers are not waiting (#wearenotwaiting). They are using readily available diabetes devices and software. The “We Are Not Waiting” movement is rapidly gaining momentum among people living with diabetes. These CDEs will share their experiences and will guide attendees on how to navigate this unfamiliar terrain without compromising user safety or professional liability.

**1:00pm – 2:30pm****BUSINESS MODELS****Certifications for Diabetes Educators: An Overview of the BC-ADM and CDE Options***Sheryl Traficano, MBA, CAE; Joan Bardsley, MBA, RN, FADE, CDE; Jodi Lavin-Tompkins, MSN, RN, CDE, BC-ADM*

As a health professional, you know that certification is an important avenue for professional development. Attaining the BC-ADM and/or becoming a CDE® are great ways to highlight your knowledge about diabetes care and education to your employer and peers, as well as to the people with diabetes that you work with in your program or practice. Presented by AADE (BC-ADM) and NCBDE (CDE®) representatives, you will receive an overview on the eligibility requirements, application process, and examination for each program. The last 30 minutes will provide general information on how to renew the CDE® credential.

**How to Incorporate the Triple Aim into Your DSMES Program***Dawn McCarter, RN, BSN, CDE; Jana Beckering, RN*

The prongs of the Triple Aim are engagement, outcomes, and cost containment. Successful DSMES programs must incorporate all three prongs. This presentation will share learnings including use of a dashboard to collect metrics and a method to allocate resources, from the development of a multi-site DSMES program implementing the Triple Aim.

**POPULATION HEALTH****Innovative Approaches to Population Health: What Diabetes Educators Need to Know About Working with Employers, Pharmacists and Payers***Priscilla Thomas, MS, RN, RD, LDN-LD, CDE, CCM; Gretchen Youssef, MS, RD, CDE; Amie Hardin, MS, RDN, LD, CDE; Allison Drake, MS, RDN, LD, CDE; Geoffrey Twigg, PharmD, BCACP, CDE; Cindy Warriner, RPh, CDE; Patryce Toye Allison MD, FACP, MBA*

Diabetes educators caring for PWD are involved in population health. This session will provide insights into innovative approaches involving employers, pharmacists, and payers, with a focus on the multidisciplinary team-based approach. Attendees will be given turnkey tools and resources applicable in a variety of settings to optimize collaborative and outcome driven practice. This session will provide attendees with knowledge critical for improving care and outcomes beyond the traditional system to ensure best practices, intervention success and sustainability. With a focus on value-based health care, this session will arm attendees with insights to help drive needed change in their respective health care environments.

**PREVENTION/DELAY OF TYPE 2 DIABETES****From Science to Supper: Integrating Current Nutritional Science and Culinary Practices into the NDPP***Jennifer Stack, MS, RDN, CDE; Joanna Mitri, MD, MS; Cara Schragger MPH, RD, CDE*

This presentation will discuss best food choices to delay the onset of type 2 diabetes, evidence to support nutrition recommendations and culinary principles to help integrate these recommendations to improve the quality of life for people living with pre-diabetes. Teaching tools including the healthy plate method, preparation and cooking basics will be reviewed throughout this session to assist attendees in translating science into supper for people with pre-diabetes.

**Promoting Health Equity in Diabetes Prevention: Taking the National DPP to Priority Populations and Underserved Communities***Natalie Blum, MPH*

As the NDPP expands to more communities, how can we ensure that those most at risk of type 2 diabetes have equal access to evidence-based, affordable and high-quality lifestyle change programs? Through funding from the CDC, AADE is working with a network of partners to take the NDPP to priority populations across the South, Southwest and West. In this session, learn directly from hospitals, clinics, health departments, and community agencies enrolling and engaging African Americans, Latinos, American Indians, men, and Medicare recipients in the NDPP. Get practical tips to promote your program in rural communities, work alongside community health workers and provide culturally competent programming that will help your DPP reach priority populations in your communities.

**PSYCHOSOCIAL/BEHAVIORAL****Engaging Friends, Families and More: Barriers and Opportunities***Karli Borcharding; Kristine Batty, PhD, APRN-CNP, BC-ADM, CDE, CDOE; Anastasia Albanese-O’Neil, PhD, ARNP, CDE*

Family members, friends and peers have the potential to facilitate or undermine day to day diabetes self-care. This presentation will provide an overview of evidence on peer and social support, review research linking strong peer and interpersonal support systems to better diabetes management outcomes and describe the phenomenon of “blame and shame.” Examples from the literature and hands-on case studies will be reviewed.

**3:45pm – 4:45pm****AADE7™ IN PRACTICE****Make Learning Fun: A Session Full of Ideas!***Barb Schreiner, PhD, APRN, CDE, BC-ADM; Susan LaRue RDN, CDE*

Help! My education sessions are boring! How can I keep my content fresh and reach my clients in new ways? How do we move PWD from learning to action? This session will keep you moving and thinking. Experience the creative power of fellow participants and experienced facilitators as you develop interactive approaches to teaching, reviewing and energizing your clients (and yourself). Leave this session with dozens of ideas for making your curriculum more engaging.



## BUSINESS MODELS

### Building Relationships Will Keep Them Coming Back: It's All About Retention!

Gary Scheiner, MS, CDE; Susan Weiner, MS, RDN, CDE, CDN

Once you've secured a PWD for your diabetes education program, you may find yourself wondering, "How do I keep 'em coming back?" Retention is vital for sustaining your business, private practice and diabetes education program. Retention also has implications for improving clinical outcomes as well as professional and personal satisfaction. Diabetes Educators of the Year Gary Scheiner and Susan Weiner share their experiences building long-term relationships, using emerging technologies, creating shared values, and developing innovative strategies for keeping individuals involved and engaged in the services you provide.

## CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT

### Treatment After Metformin: Considerations for Therapy Selection

James R. Gavin III, MD, PhD

Current guidelines recommend lifestyle changes and metformin as initial therapy for people with type 2 diabetes. When therapy must be advanced beyond metformin, clinicians are challenged to select from a variety of potential treatment options. This educational activity will address treatment options beyond metformin with a focus on therapies that offer complementary mechanisms of action for the treatment of type 2 diabetes. Supported by an unrestricted education grant provided by Merck. This activity is joint-provided by the American Association of Diabetes Educators and Horizon CME.

3:45pm – 4:45pm



## POPULATION HEALTH RESEARCH SESSIONS

### Care Management Improves Clinical, Financial and Behavioral Outcomes: A Case Study

Athena Philis-Tsimikas, MD; Robin Morrissey, ANP-BC, CDE; Kelly Barger, RD, CDE; Addie Fortmann, PhD

Chronic illnesses are a tremendous burden on individuals, the healthcare system, and society. The current healthcare model too often fails in assuring that individuals receive effective interventions. The purpose of this study was to design and implement a care management program for PWD and cardiovascular risk factors in a community-based primary care site and evaluate the clinical, financial, and behavioral changes over one-year compared to a similar primary care site within the same health system without care management.

### The Role of the Diabetes Educator in Addressing Social Determinants of Health: A Case Study

Faith Foreman, PhD, MPH, BA, LVN; Ardis Reed, MPH, RD, LD, CDE, CHWI; Joycelyn Cornthwaite MS, RD, LD, CDE; Karin Gillespie, MBA

This panel presentation will provide an overview of how the Cities Changing Diabetes program in Houston supported research on community level diabetes vulnerabilities and social determinants of health to catalyze the work of community stakeholders in designing key initiatives to better prevent and manage diabetes. A panel of Houston stakeholders will discuss the research, the initiatives, and the central role played by diabetes educators.

## PREVENTION/DELAY OF TYPE 2 DIABETES

### Building Statewide Partnerships to Support Infrastructure and Medicaid Reimbursement Opportunities in the NDPP

Joyce Pastors, MS, RD, CDE; Kelly McCracken, RD, CDE; Laura Summers, MPP; Susan De Abate RN, MSN/Ed, CDE; Kayla Craddock, MPH

The NDPP, led by CDC, is now being implemented by many community organizations, employer groups, health departments, and health care organizations across the country. Learn about the development of a statewide diabetes prevention strategic plan, how to form strategic partnerships, and the pearls/pitfalls of the NDPP implementation in a variety of settings in Virginia. Discover how the CDC funded the National Association of Chronic Disease Directors (NACDD) to implement a project with Maryland and Oregon to demonstrate how Medicaid managed care organizations can deliver a sustainable coverage model for the NDPP. Understand the importance of building partnerships with Medicaid to work toward pathways to coverage of the National DPP lifestyle change program in your state!

## TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA

### Let's Get It On: Pumps, Sensors and CGM (Part 1)

Part 1 of this "Pumps, Sensors and CGM" Technology Track module focuses on the opportunities and challenges presented by professional CGM for the diabetes educator, a review of pumps on the market, reimbursement issues, strategies for report analysis, and how the use of advanced pump features can enhance individual experience and self-care skills. De-identified reports and case studies will help translate session information into practice.

- Professional CGM: Let's Get It On - Lucille Hughes, MSN/Ed, CDE, BC-ADM, FAADE, Director, Diabetes Education, South Nassau Communities Hospital
- What Have You Done for Me Lately? Interpreting Pump/CGM Data - Margaret Pellizzari, MBA, MS, RN, CDE, CDT, Program Coordinator, Northwell Health

5:00pm – 6:00pm



## AADE7™ IN PRACTICE

### Gut Microbiome and Diabetes: What's the Connection?

Tali Raveh-Sadka, PhD; Angelique Crandell, MS, RD, CDE

Recent evidence suggests that a healthy gut may delay the development or progression of type 2 diabetes. Research includes identifying a person's individual microbiome and developing a personalized diet to help normalize elevated postprandial blood glucose levels. This presentation will discuss the scientific approach in the study of the microbiome and the effect of nutrition. Also included is a discussion of the integration of probiotic and prebiotic microbial support to optimize blood glucose control.

## CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT

### Type 1 Diabetes and Pregnancy: Individuals and Educators Team Up For Success

Michele Laine, MSN, ARNP, CDE; Nicole Johnson, DrPH, MPH, MA

Women with type 1 diabetes face many challenges, one of which is pregnancy. This presentation will reveal the educator's role in empowering the individual to pay careful attention to pre-conception planning, which is vital to a successful pregnancy. This includes understanding glucose goals throughout the pregnancy and how hormones affect those goals.

**PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES**

**Embracing Metabolic Surgery and Optimizing Outcomes in the Treatment of Type 2 Diabetes**

*Alyssa Luning, RDN, CSOWM; Garth Davis, MD, FACS, FASMBS; Laura Andromalos, MS, RD, CD, CDE*

Obesity affects nearly 90% of individuals with type 2 diabetes. Metabolic surgery is recommended by the ADA as an effective intervention which promotes dramatic and sustainable outcomes in both obesity and type 2 diabetes. In this session, attendees will learn the pathophysiology of diabetes improvement following metabolic surgery and when to refer for surgical assessment. Attendees will take home practical applications for managing the health of PWD before and after metabolic surgery and implementing lifestyle interventions that maximize long-term outcomes.

**PREVENTION/DELAY OF TYPE 2 DIABETES**

**Marketing Pearls and Pitfalls: Use Your Time Wisely**

*Tracy Bruen, MS, RD, LDN; Melanie Parnell, RD, LDN; Lisa Mathews, MS, RD, LDN, CDE*

Educators are experts at providing education and encouraging behavior change. This often leaves little time for marketing and recruiting. During this session, you'll learn successes and pitfalls from a CDC recognized DPP that you can use to successfully market your DPP and/or DSMES program.

**PSYCHOSOCIAL/BEHAVIORAL**

**Change the Language of Diabetes: An Interactive Session**

*Jane Dickinson, RN, PhD, CDE; Susan Guzman, PhD*

Language is part of every person's context, and we create meaning through the messages we hear. PWD have long experienced negative, judgmental, shaming language, and it is time to change that. AADE and ADA published a joint paper on language use. Now what? This interactive session will offer resources, suggestions and hands-on activities to practice ways we can improve communication between PWD and health care professionals. Participants will leave this session with tools and ideas for how to use empowering, strengths-based messages as well as how to spread the word about this vital language movement.

**TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA**

**Let's Get It On: Pumps, Sensors and CGM (Part 2)**

Part 2 of this "Pumps, Sensors and CGM" Technology Track module explores how interprofessional CGM Shared Medication Appointments work to improve clinical outcomes for PWD, including case studies from a CGM Shared Medical Appointment program and how CGM data is used to make clinical recommendations. This session will also provide a first-hand look at the evolution of CGM and DIY CGM technology from the unique perspective of a person living with diabetes who has helped to define the field. CGM user experience "pain points," from body image to alarm fatigue will be discussed, as well as the question of whether CGM technology is only for tech savvy people living with T1D. A discussion of why having continuous glucose data is critical for managing T1D will be included.

- The Continuous Glucose Monitoring Shared Medical Appointment Experience - Diana Isaacs, PharmD, BCPS, BC-ADM, CDE, Clinical Pharmacy Specialist, Cleveland Clinic
- Evolution of CGM Technology - Brandon Arbiter, Vice President, Product and Business Development, Tidepool Project

**Sunday, August 19  
9:15am – 10:45am**



**AADE7™ IN PRACTICE**

**The Educator's Role in Advocating Peer Support: Why, When and How?**

*David Edelman, MD; Edwin Fisher, PhD; Christina Roth; Cherise Shockley; Amy Tenderich; Hope Warshaw, MMSc, RD, CDE, BC-ADM*

Peer support can play an important role in the lives of people with diabetes and their caregivers. Diabetes educators can have a valuable role encouraging people to seek out and engage in peer support. Through a presentation by Ed Fisher, PhD, a global leader in peer support, and interactive dialogue among peer support community leaders and diabetes educators, this session will help attendees learn why, when and how to encourage people to utilize peer support. AADE resources to promote peer support will also be shared.

**CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT**

**Concentrated Insulins: All You Need to Know**

*Carol Biondi, RN, MSN, CDE; Renee Meehan, RN, BSN, MA, CDE*  
U-500 regular insulin is an example of a highly concentrated insulin, possessing both basal and bolus properties. It also alleviates volume related problems associated with high doses of U-100 insulins. In 2016, the U-500R pen was released and subsequently that same year, a dedicated U-500 syringe. This presentation includes case studies with U-500 and other concentrated insulin, depicting situations where errors have occurred and/or cost considerations critical for individual safety and adherence.

**PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES**

**Zebbras in the Herd: The Less Common Types of Diabetes**

*Karen Shidler, RN, MS, CDE, BC-ADM; Lucia Novak, MSN, ANP-BC, BC-ADM, CDTc; Lisa Letourneau, MPH, RD, LDN*

The goal of this presentation is to introduce the less common types of diabetes (monogenic, idiopathic and Latent Autoimmune Diabetes of Adults [LADA]). Distinguishing the characteristics of these less common types of diabetes will assist the clinician to better identify individuals and reduce risk for misdiagnosis. The role of genetic and/or specialized diagnostic testing will be discussed. The attendees will be better equipped to formulate a treatment/education plan that considers the underlying defect, the natural progression of disease as well as risk for development of complications associated with these less common types of diabetes.

## POPULATION HEALTH

### Population Health: Value-Based Care in a Technology-Driven World

Carrie Nagy-Marsh, BSN

The healthcare environment is shifting from volume to value-based, and the delivery of DSMES has had to adapt. This changing landscape provides challenges to the status quo. This session focuses on population health strategies to leverage people, process and technology to synthesize data in an actionable way to deliver cost effective care to the right people at the right time.

9:15am – 9:45am



## TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA RESEARCH SESSIONS

### Effects of CGM Use in People with Type 2 Diabetes

Celia Morelos, BSN, RN, CDE; Elizabeth Wickman, CDE, RD, LDN; Mary Vercellino, MSN, APN, ACNS-BC, BC-ADM

CGM technology, availability and insurance coverage are rapidly improving, but there is limited data available on the effect of CGM use in the type 2 population. This study investigated the effect of CGM on glucose control in people with type 2 diabetes who were not using insulin. The hypothesis was that the CGM sensor data would increase insight into lifestyle choices that would impact diabetes management.

### Using Apps for Carb Counting and More Accurate Insulin Dosing in People with Type 1 Diabetes

Qing Tong, RD (China)

Carbohydrate (CHO) counting is crucial for people with type 1 diabetes. It allows them to match their insulin dose with the amount of CHO in their meals and snacks, keeping their postprandial blood glucose under control. However, this evidence-based method is not widely accepted in China due to restricted access to the specific knowledge and the complexity of Chinese diet. In this session, learn about apps that allow carb counting on a mobile-phone-based system to help PWD implement routine carb counting and improve the accuracy of insulin dosing.

10:15am – 10:45am



## POPULATION HEALTH RESEARCH SESSIONS

### Utilization of Diabetes Related Medicaid Data to Drive Advocacy

Jasmine Gonzalvo, BCPS, BC-ADM, CDE, LDE; Darshan Shaw, MBA, BS; Matthew Kirby

The Indiana Management Performance Hub (MPH) is a state agency that combines a collaborative and innovative approach with industry-leading technical innovation to facilitate data-driven decision making and data-informed policy making. MPH has made diabetes-related Medicaid data available to the public. This project describes how data has been used to support advocacy-related initiatives and to help guide future legislation.

11:00am – 12:00pm



## AADE7™ IN PRACTICE

### Pediatric Diabetes Manual for Families

Kris Britt, RN, BSN, CDE

A manual titled STAY T12D was developed to put families at ease and connect them with data, resources and the DSMES team. The goal is to arm pediatric individuals with enough knowledge to successfully manage diabetes into adulthood. The right curriculum can empower families to manage diabetes with confidence. During this session, we will review a manual that addresses each of the AADE7™ Self-Care Behaviors and was designed to enable families to search for and find vital information with ease.

## CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT

### Medications: New and on the Horizon

Diana Isaacs, PharmD, BCPS, BC-ADM, CDE; Andrew Bzowycyji, PharmD, BCPS, CDE

This presentation will provide a practical, real-world approach to what the diabetes educator needs to know about medications recently FDA approved and those expected to be approved in the near future. This includes new insulin formulations (e.g. ultra-rapid, biosimilar insulins), implantable drug delivery systems, glucagon formulations, and novel SGLT-2 inhibitors and GLP-1 agonists. Promising agents for beta cell preservation in type 1 diabetes will also be discussed. The session will compare and contrast new medications and formulations to what is currently available and delve into which types of PWD will benefit most from these new options.

## POPULATION HEALTH

### The Diabetes Educator's Role in Disaster Readiness, Response, and Recovery

Maryanne Strobel, MSN, RN, CDE; Christine Fisher, MSN, RN, CDE; Aaina Strobel, RD, LD, CDE

During recent flooding and disasters, many people with diabetes found refuge and care in shelters or housing far removed from their usual diabetes network, making self-care a challenge. Unique challenges are faced before, during and after disasters, and diabetes educators play an innovative role in preparing for and responding to these disasters. Educators facilitate transition to recovery and relief. During this session, disaster readiness tools and resources will guide attendees toward identifying the key diabetes considerations for their own communities and how to help introduce them into their local disaster resources.

## PREVENTION/DELAY OF TYPE 2 DIABETES

### Utilizing ROI to Increase Insurance Coverage and Implement the DPP

Jennifer Troupe, MS, RD, CDE, BC-ADM

Calculating an ROI on services provided and making a business case can help the diabetes educator/quality coordinator advance this directive to payers, administrators and providers. This session will explore utilizing ROI to garner insurance coverage and implementation of the DPP through a health system.

**TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA**

**Conversational Interface and Nutrition Apps: Turn Me On!**

As digital health approaches and consumer apps become more ubiquitous and demonstrate the ability to transform behavioral medicine, this technology track module will examine two case studies to illuminate how the features of consumer app technology can impact diabetes care. Voice technologies to support diabetes self-management will be examined. A definition of these technologies, how voice technologies can facilitate decision support, considerations for different populations and an overview of technology presented as part of the 2017 Alexa Diabetes Challenge will be discussed. Nutritional management apps will also be presented. Using the lens of the common biases and critical inaccuracies that commonly affect most apps and the elements that would make up for an ideal one, this presentation will help attendees analyze how apps can be used in practice to help PWD improve self-care.

- Designing Conversational Interfaces for Diabetes Self-Management: A Case Study - Elliott Mitchell, PhD Student, Columbia University Department of Biomedical Informatics
- Use of Technology to Shape and Optimize Meal Plans for Health and Disease Applications - Suneil Koliwad, Assistant Professor UCSF School of Medicine

Committee will present findings of a systematic review that examined current evidence and gaps in the literature surrounding the role of diabetes education in hypoglycemia risk mitigation. Opportunities for diabetes educators to mitigate hypoglycemia risks and considerations in practice, policy, research, and advocacy will be explored.

**BUSINESS MODELS**

**Business as Unusual! A Six Year Evolution of Innovation, Collaboration, and a Successful Community Type 2 Diabetes Program**

*Hope Warshaw, MMSc, RD, CDE, BC-ADM; Kimberly Freeman, RN, CDE, CTTS, CIC; Michael Hanlon*

The business of service delivery must become unusual! Value-added roles and services for diabetes educators are increasing. This reality should empower diabetes educators to develop innovative and collaborative business models to achieve impactful programming resulting in clinical and cost-effective outcomes. Facing challenges of delivering DSMES programming, YMCA and a rural hospital joined forces six years ago to develop a year-long type 2 diabetes program. Various presentation styles and insights will engage and enable you to seek out innovative solutions and partnerships.

**PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES**

**Contemporary Approaches to Managing Diabetes in Individuals with Cardiovascular Disease**

*Lauren Grecheck, PharmD; Melissa Magwire, RN; Dave Dixon, PharmD, BCPS, BCACP, CDE, CLS, FCCP, FACC, FNLA*

CVD remains the leading cause of death in people with diabetes. While anti-hyperglycemic therapies primarily improve glycemic control, there has been significant interest in evaluating the potential of these therapies to also reduce cardiovascular risk. Until recently, only metformin had been associated with improved cardiovascular outcomes. Data from several cardiovascular outcome trials with SGLT-2 inhibitors and GLP-1 agonists have demonstrated a reduced risk of major adverse cardiovascular events in PWD and established CVD. Through the use of case studies and audience response, the presenters will develop a strategy for attendees to integrate the results of cardiovascular outcome trials into practice.

**1:00pm – 2:00pm**



**AADE Annual Business Meeting**

*Donna Ryan, RN, RD, MPH, CDE, FADE*

Through the Annual Business Meeting, members have a direct line of communication to the organization's leaders. AADE President Donna Ryan, RN, RD, MPH, CDE, FADE, and the full Board of Directors invite you to meet with them to discuss current and future drivers that will shape diabetes education over the next decade. All conference attendees are welcome.

**2:00pm – 3:00pm**



**AADE<sup>7M</sup> IN PRACTICE**

**Diabetes Education and Hypoglycemia Risk Mitigation: Inpatient and Outpatient Practice and Research**

*Robert Tanenberg, MD, MACP; Brian Ulmer, MD; Iryna Sasinovich, RN, MSN, AGACNP-BC, CDE; Ederle Garnett, RN, MSN, FNP-BC, CDE; Jackie Lamana, PhD, ARNP, ANP-BC, BC-ADM, CDE; Jan Kavookjian, MBA, PhD; Mary Julius RDN, LD, CDE*

Optimal glycemic control in PWD is beneficial for improving outcomes, as well as quality of care, safety and satisfaction. Fears of hypoglycemia remain a key limiting factor in terms of hyperglycemia management. Clinical inertia persists despite best practice demonstrations. This presentation will highlight commonly encountered cases offering strategies in care delivery and quality improvement to safely achieve optimal glycemia during hospitalization. A case study in improving timely insulin delivery in acute care setting will be discussed. This specific example will demonstrate the risk of hypoglycemia in the hospital, gaps in practice, data use collection tools, and the interventions and dramatic improvements they made. Finally, members of the AADE Research

**MASTERING DIABETES COMPLICATIONS**

**Let's Talk About Sex: Everything a Diabetes Educator Needs to Know**

*Janis Roszler, LMFT, RD, LD/N, CDE, FAND; Donna Rice, MBA, BSN, RN, CDE, FADE*

As a compassionate diabetes educator, you want PWD to have the best life possible. Unfortunately, their ability to follow your diabetes self-care recommendations may be negatively impacted by the presence of sexual complications. Learn about the most common diabetes-related sexual complications and how they may affect PWD. Current treatment options will be presented and an innovative approach to counseling that can help you better manage your educational time.

**"I Know What to Do, I Just Can't Get Myself to Do It." The Relationship between Mental Health Issues and Diabetes: Implications for Diabetes Educators**

*Mary de Groot, PhD*

## PREVENTION/DELAY OF TYPE 2 DIABETES

### DPP Data Deep Dive: A Review of Data Collection Tools for Prevention

Patrick McMahon, MPH

Are you drowning in NDPP data? When the deadline comes to submit your data to the CDC for continued recognition, are you tempted to drop out of your own DPP? If you're up to your eyeballs in DPP data and not sure what's out there to help, this session is for you! Find out what data platforms can support the collection, analysis, and submission of DPP data to the CDC, your organization, or your funders. Learn what data needs to be collected for the 2018 DPRP. And, finally, explore how these innovative tools and apps can help you take your data analysis to the next level to evaluate your DPP and stay on track for DPRP Recognition.

## PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES

### Day-to-Day Measures That Matter: Review of the Standardizing Clinically Meaningful Outcome Measures Beyond HbA1C for T1D Consensus Statement

Molly McElwee-Malloy, RN, CDE; Karen Harriman, FNP-BC, MSN, CDE

While HbA1C is used as a primary outcome to assess glycemic control and as a surrogate for risk of developing complications, it has limitations acknowledged by both clinicians and PWD. In 2017, a Steering Committee comprising representatives from AACE, AADE, ADA, the Endocrine Society, JDRF International, The Leona M. and Harry B. Helmsley Charitable Trust, the Pediatric Endocrine Society (PES), and the T1D Exchange came together to provide consensus on key outcomes measures beyond HbA1C. Those include: standardized definitions for hypoglycemia, hyperglycemia, time in range, diabetic ketoacidosis (DKA), and patient-reported outcomes (PROs). This session will review the key findings and definitions developed by the T1D Outcomes Program Steering Committee and discuss important implications for diabetes self-management, including the assessment of these outcomes through diabetes technologies.

3:15pm – 4:15pm



## BUSINESS MODELS

### Nurse Practitioners as Diabetes Educators: Proving Value and ROI in an Urban Academic Medical Center

Ederle Dessa Garnett, RN, MSN, FNP-BC, CDE; Iryna Sasinovich, RN, MSN, AGACNP-BC, CDE

Nurse practitioners play a unique and integral role in today's evolving healthcare system. In recent years, more hospitals have assembled inpatient diabetes specialty care teams, but some institutions still lag behind without a formal diabetes team in place. In a large academic medical center in New York City, needs assessments were completed by hospital administration and positions were created for two full-time inpatient diabetes nurse practitioners. This presentation outlines the process, challenges and lessons learned on the journey of creating an inpatient glycaemic team, which has now expanded from a team of two to a team of six nurse practitioners in a short time span.

## PREVENTION/DELAY OF TYPE 2 DIABETES

### Innovative Strategies to Take the NDPP to a Hard-to-Reach, Busy, or Mobile Workforce

Angela Forfia, MA; Viola Holmes, MS, RD, CDE; Joyce Pastors, MS, RD, CDE

Everyone is busy! This means less time to exercise, prepare healthy foods and attend DPP programs that could reduce the risk of developing type 2 diabetes. In this session, you'll explore innovative strategies to take your DPP where it's needed, when it's needed and to who needs it! Learn how a distance learning DPP in Southwest Virginia uses teleconference technology to offer employees an evidence-based DPP in an underserved area. Hear how AADE, through a Cooperative Agreement from the CDC, worked with the Healthy Trucking Association of America and Omada Health, Inc. to pilot a web-based DPP to engage a mobile population of long haul truckers.

## CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT

### Performance Improvement Methodology to Decrease Rates and Recurrence of Hypoglycemia

Lucille Hughes, MSN/Ed, CDE, BC-ADM, FADE; Jane Jeffrie Seley, DNP, MSN, MPH, GNP, BC-ADM, CDE, FADE, FAAN

This presentation will discuss major causes of hypoglycemia in the inpatient setting and risk reduction strategies. Topics include: techniques for early identification of hypoglycemia, effective treatments, ways to avoid recurrence of hypoglycemia and optimal timing of point of care blood glucose monitoring, insulin administration, and meal delivery. Two performance improvement projects targeting the challenges described above, offering some evidence-based solutions, will be presented.

## PSYCHOSOCIAL/BEHAVIORAL

### Using Weight-Neutral Nutrition Education to Avoid Triggering Disordered Eating

Megrette Fletcher, MEd, RDN, CDE; Sumner Brooks, MPH, RDN, LD

Many people who develop diabetes have a history of disordered eating and/or eating disorders, including anorexia. This presentation will highlight eating disorder treatment and research as it applies to prediabetes and type 2 diabetes. Diabetes educators will have an opportunity to explore and evaluate a weight-neutral teaching model as part of their DSMES/MNT program to deliver diabetes care, improve A1C and stabilize blood glucose without re-triggering disorders and restrictive eating patterns.

## TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA

### How Secure are Diabetes Devices?

David Klonoff, MD

Increasingly, diabetes devices are connected wirelessly to each other and to data-displaying reader devices. PWD have an extremely high need for secure information flow to display glucose information and deliver insulin dosing commands when sensor and actuator information is transmitted wirelessly through these connected medical devices. Sound cybersecurity is needed for connected diabetes devices to maintain confidentiality, integrity and availability of the data and commands. This session will discuss existing threats to the accurate flow of information, including unauthorized disclosure, modification, or loss of availability. Additionally, the need for cybersecurity standards designed specifically for connected diabetes devices to improve their safety will be discussed.

4:30pm – 5:30pm



**AADE7™ IN PRACTICE**

**Inclusive Design: Access to DSMES for People With Diverse Hearing and Visual Abilities**

*Ann Williams, PhD, RN, CDE; Michelle Litchman, PhD, FNP-BC, FAANP; Bonnie Bartos, PA, CDE; Eileen Rivera Ley, MBA*

All populations with normal variations of abilities include people with a range of hearing and seeing abilities. About 21% of PWD have hearing loss and 20% have visual impairment, yet the design of most DSMES visits and materials assumes participants have typical sensory abilities, making full participation difficult for people with atypical abilities. Inclusive design is the design of mainstream products and services that are accessible to as many people as reasonably possible without the need for special adaptation or specialized design. This session includes presentation of inclusive design concepts, participatory exercises, and small group discussions to promote creation of designs for DSMES visits and educational materials that ensure accessibility for people with diverse visual and hearing abilities.

**CLINICAL THERAPEUTICS OF GLYCEMIC MANAGEMENT**

**Quality Improvement to Decrease DKA Admissions**

*Traci Carter, RN, CDE; Courtney Bleach, MD*

This session will take a step-by-step approach to quality improvement projects to decrease admissions for DKA. DKA due to insulin pump failure is a preventable occurrence. Due to the known risks of DKA to the PWD as well as the increasing cost of inpatient ICU medical care, this quality improvement project was created. This presentation will describe the FOCUS-PDCA methods and will use this successful project as an example.

4:30pm – 5:30pm



**Let's Look at the Bigger Picture: Manage the Cause**

*Joy Pape, MSN, RN, FNP-C, CDE, WOCN, CFCN, FADE, CILC*

The causes, complications and treatments for diabetes and excess weight and obesity are multifactorial. Individuals visit health care providers for prevention, treatment or the complications (co-morbidities) of diseases. Both healthcare providers and individuals may not realize that unhealthy excess weight, more specifically obesity, is considered a disease. There are over 200 complications of unhealthy excess weight and obesity-including diabetes. This session will demonstrate how weight based diabetes management is individualized and can treat the many complications of diabetes including unhealthy excess weight and obesity.

**PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES**

**It is What It Is - Except When It Isn't! Deceptive Diabetes Diagnoses**

*Elaine Cochran, MSN, CPNP, BC-ADM; Lucia Novak, MSN, ANP-BC, BC-ADM, CDTC*

This presentation describes several other forms of diabetes, which may seem to be type 2 diabetes, but for which the management and treatment is significantly different. Other forms of diabetes that will be described are lipotrophic diabetes, type A insulin resistance and type B insulin resistance. Each other form of diabetes will be described to help the attendees differentiate diagnosis when seeing new cases of diabetes.

**POPULATION HEALTH**

**Referrals, Advocacy and Reimbursement for DSMES**

*Debra Parrish, JD; Joan Bardsley, MBA, RN, CDE, FADE; Maggie Powers, PhD, RD, CDE; Kurt Anderson*

Many individuals with diabetes will need to advocate for coverage of devices and supplies. This session will describe Medicare administrative appeals (what has led to success), the Medicare policy challenge regarding Medicare's non-coverage of CGM, and District Court action, and how each of the foregoing has and can positively influence Medicare coverage determinations. It will describe what beneficiaries and providers should do to be the most successful in each of those venues.

Monday, August 20

9:15am – 10:15am



**AADE7™ IN PRACTICE**

**Evaluating the Impact of Year-Long, Augmented Diabetes Self-Management Support**

*Leslie Kolb, MBA, BSN, RN*

The AADE received a grant from the Bristol-Myers Squibb Foundation in 2013 to conduct the randomized controlled study titled "Evaluating the Impact of Year-long, Augmented Diabetes Self-Management Support" in individuals with type 2 diabetes from underserved populations. Working with four FQHCs, AADE compared A1C and other clinical and behavioral outcomes in PWD randomized to receive DSME with one year of telephonic DSMS (intervention group) versus those randomized to receive DSME alone (control group). Come learn the results of this study and the implications for practice.

**BUSINESS MODELS**

**Money Matters in MNT and DSMES: Increase Your Reimbursement Now!**

*Mary Ann Hodorowicz, RDN, MBA, CDE, CEC*

This detailed presentation is what diabetes educators have been looking for to pocket those elusive Medicare and private payer MNT and DSMES dollars! Medicare's most current coverage guidelines are outlined, including those related to MNT and DSMES referrals, lab criteria, utilization limits in first and follow-up years, structure of initial and follow-up benefits, beneficiary entitlement, provider eligibility, MNT/DSMES telehealth, procedure, diagnosis and revenue codes for accurate claims, quality standards, allowed practice settings, benefits tiered payment rates, a referral form that is designed to be Medicare-compliant, created to increase reimbursement success and quality assurance. A 10-step plan to increase private payer reimbursement success is also provided.

**Auctioning Off Health: Medicare's Competitive Bidding Program**

*Katherine O'Neal, PharmD, MBA, BCACP, CDE, BC-ADM, AE-C; Christel Marchand Aprigliano, MS*

Since 2003, the CMS used the Competitive Bidding Program in an attempt to lower costs and prevent fraud. For several years, the mail order suppliers for the Medicare diabetes community were the only ones who won due to restriction of access and use of less preferred meters. Find out how this happened, how advocacy efforts closed dangerous loopholes, and what's next. (Because it's not over.)



10:30am – 11:30am

**PATHOPHYSIOLOGY: ORIGIN AND MANAGEMENT STRATEGIES**

**Facilitating Successful Self-Care for Older Adults With Diabetes**

*Susan Walker, PhD, RN, CDE*

The number of older adults is increasing rapidly. Lifestyle factors, age-related physiological factors, such as loss of lean body mass, increase in visceral and intramuscular fat, and loss of beta cell mass further increase the risk of diabetes in older adults. Diabetes in older adults is often complicated by cognitive impairment, functional impairment, polypharmacy, malnutrition, and falls. This presentation will discuss the difficulty and challenges in delivering diabetes education to the older adult population and provide education and treatment tips that will facilitate more effective management and self-management in this vulnerable population.

**PSYCHOSOCIAL/BEHAVIORAL**

**A1C of 12%: Have You Thought Eating Disorder?**

*Ann Goebel-Fabbri, PhD; Erin Akers, BA; Allison Marek, LCSW, CDWF*

Nearly 35% of women and 11% of men with type 1 diabetes report omitting insulin in order to lose weight. In fact, half of all women with type 1 diabetes will experience some form of an eating disorder in their lifetime. Nevertheless, disordered eating often goes unrecognized. In this session, participants will learn practical skills for detecting and assessing disturbed eating and eating disorders in people with diabetes, including how to ask the right questions and use evidence based instruments to screen PWD.

**TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA**

**Harnessing the Power of Telehealth**

Expansion of telehealth services in diabetes care and diabetes prevention continues to promise new opportunities to serve the community of PWD and provide cost-effective care. However operationalized, effectively, utilizing telehealth requires an understanding of what services can be provided, how payer and employers view this delivery model, and how to ensure proper reimbursement and effective use. This Technology Track module will provide an overview of this important “old-but-new” technology. This presentation will include how one virtual DSMES program received accreditation and overcame the challenges of remote monitoring and virtual education. Practice tips to adapt and expand your program into telehealth services will be presented, along with important reimbursement considerations.

- Telehealth: Adapting Diabetes Education to a Mobile World - Kristine Erdman, RN, CDE, CPT, CCM, Vice President, Clinical Services, CCS Medical
- Telehealth Reimbursement Update - Angela Forfia, MA, AADE
- Using Telehealth in DPP - Deb Bjorsness, RD, CDE, Diabetes Program Coordinator
- Benefits Health System

**BUSINESS MODELS**

**Community Health Workers (CHW) Supporting Diabetes Educators in DSMES Programs: Lessons Learned**

*Betsy Rodriguez, BSN, MSN; Magon Saunders, DHSc, MS, RDN, LD*

In 2017, the Community Preventive Services Task Force (CPSTF) showed that interventions engaging CHW for delaying type 2 diabetes, and diabetes management are cost effective. In 2013, the CDC Division of Diabetes Translation (DDT) began funding states and cities to engage CHW in delaying diabetes and control activities. This presentation will provide an update of the CHW Core Consensus (C3) Project, provide an overview of CDC funded grantees activities and lessons learned, and address the importance of including diabetes educators in the discussion on how CHW can be a support to educators working in DSMES programs.

**MASTERING DIABETES COMPLICATIONS**

**Diabetes Related Eye Disease: Bridging the Gap in Care**

*John Kitchens, MD; Blake Cooper, MD*

The rising numbers of PWD is outpacing the ability of traditional health care providers. The eye care professional community is an untapped area of opportunity to help educate a larger percentage of the population. DRCRnet Protocol T results suggest that individuals with macular edema require frequent intravitreal injections to help maintain or improve vision. With the frequency of visits and extra time in the office during the visit it is an excellent opportunity to provide diabetes education. In order to standardize the education that was provided, we used the AADE7™ as a template to provide additional information for PWD that were receiving intravitreal injections for retinopathy.

**PREVENTION/DELAY OF TYPE 2 DIABETES**

**Physical Activity Behavior Change as Treatment for Type 2 Diabetes**

*Anthony Wall, MS*

Diabetes educators are the go-to experts in helping optimize health behaviors to prevent and treat type 2 diabetes. Physical activity is fundamental to an effective treatment program. In this session, diabetes educators will learn the fundamentals of developing a safe and effective exercise program for clients affected by prediabetes and type 2 diabetes.



PSYCHOSOCIAL/BEHAVIORAL

**“I Don’t Need Any of Those Damned Pills:” New Perspectives on Understanding and Addressing Problematic Medication Adherence**

*William Polonsky, PhD, CDE*

This session will address the issue of problematic medication adherence, with a special focus on people with type 2 diabetes. The presenter will review data illustrating the scope and magnitude of the problem, the impact of problematic adherence on long-term outcomes and health care costs, and the broad contributors to poor medication adherence. Through the use of illustrative case studies, we will take a close look at the real barriers and challenges that PWD and their healthcare providers face regarding medication adherence, and we will then put forward practical strategies for assessing and addressing these issues. As an overarching goal, we hope to highlight the need for a more collaborative relationship between PWD and healthcare providers that is respectful of the role that individuals play in their own treatment decisions.

TECHNOLOGY: DEVICES, DATA, AND PATIENT-GENERATED HEALTH DATA

**Adoption of New Devices and Technologies Among People and Providers: Overcoming Barriers**

*Joe Solowiejczyk, RN, MSW, CDE; Donna Jornsay, MS, BSN, PNP*

New diabetes technologies and devices offer PWD and health care providers new ways to achieve optimal metabolic control and improved management. However, some PWD and providers exhibit hurdles and barriers making it difficult for them to adopt new technologies. This presentation will identify common barriers to technology adoption, such as fear, lack of knowledge and resistance to change. Presenters with years of experience both as PWD and providers will describe fresh, clinically relevant and unique approaches to overcome these hurdles and barriers.

12:00pm – 1:00pm



PSYCHOSOCIAL/BEHAVIORAL

**College Transition Planning For Teens and Young Adults with Type 1 Diabetes**

*Emily Ike, MS; Christina Roth; Malissa McQuillan*

This presentation will introduce attendees to all elements of CDN’s “Off to College” program and other resources for young adults with diabetes as they transition into independence. Attendees will learn the common challenges with the transition from a young adult, parent, and provider perspectives. We will discuss how providers can access this program, including our “Off to College Event Host Guide” and audience specific booklets. Examples will be provided of how to integrate these resources into attendees’ clinical interactions with PWD as well as other CDN programs that interconnect these program offerings. Generous time will be left for Q&A.

12:00pm – 2:00pm

AADE7™ IN PRACTICE

**Plant-Based Culinary Skills for a Healthy Gut**

*Karen Smith, RD, CDE; Meghan Jardine, MS, MBA, RDN, LD, CDE; Rachel Franks, PharmD, BCACP, CDE*

In this session, attendees will identify key studies on vegetarian and vegan diets for PWD. An unhealthy gut microbiota has been implicated in the risk of diabetes. Meal planning tips to improve the composition of the microbiota and improve diabetes outcomes will be provided. Individual case studies in individuals with both type 1 and type 2 diabetes adopting plant-based eating pattern will be presented along with specific strategies for success. A key component of the session will be to provide best practices on how to deliver effective food demonstrations to motivate and improve culinary skills of PWD.

MASTERING DIABETES COMPLICATIONS

**Diabetes Neuropathy: Autonomic, Peripheral, and Neuropathic Joint Disorders and the Importance of Physical Activity**

*Patricia Skala, MSN, MA, RD, DNS, BC-ADM, CDE; Connie Hanham-Cain, RN, MSN, CDE; Joe Largay, PA-C, CDE*

Many of the subtle autonomic and neuropathic joint/bone/muscle changes are overlooked and misdiagnosed as something other than what they are and how they are related to diabetes. In this session, we will address the various types of autonomic and peripheral neuropathies that develop in PWD throughout a lifetime of the disease process. We will discuss and present on the role of diabetes educators to assess for and recognize these conditions and advocate for PWD to get proper and timely follow up treatment. This presentation will discuss innovative ways to empower PWD with peripheral neuropathy, autonomic neuropathy and neuropathic joint diseases to engage in safe and effective physical activities.

PREVENTION/DELAY OF TYPE 2 DIABETES

**Delaying Diabetes Through the Lifespan: A Discussion of Three High-Risk Populations and the Challenges They Face**

*Louise Laskaratos, FNPC, CDE, BC-ADM; E. Marcelle Penn Mathis, MPH, MS, MBA; Carolyn Sakelaris MPA, RN, CDE*

Risk factors for developing type 2 diabetes are well known; however, the ability to prevent the onset in high risk populations has remained a challenge. According to the ADA’s 2018 Standards of Care, the goals of diabetes prevention include delaying the onset of diabetes, preserving beta cell functions, and preventing or delaying microvascular and cardiovascular complications. This session will examine three high-risk populations - children, homeless veterans, and older adult women - and discuss the challenges they face. This examination will propose potential opportunities to decrease their vulnerability.



12:00pm – 12:30pm



PSYCHOSOCIAL/BEHAVIORAL RESEARCH SESSIONS

**Sweet Sadness...Using Depression Screenings to Decrease Inpatient Readmissions**

*Marie Byrd, MSN, RN, CDE*

It is estimated that depression goes undiagnosed in 45% of PWD. Although the ADA Standards of Care and literature review confirm the importance of integrating the psychological assessment and the plan of care in PWD, the literature reflects there is a lack of depression screening in PWD admitted to the hospital. This presentation will assist the attendee in identifying how routine depression screening could reduce hospital readmissions and decrease health care costs.

1:00pm – 1:30pm



PSYCHOSOCIAL/BEHAVIORAL RESEARCH SESSIONS

**Success in Parenting Four Out of Five T1D Children and Still Living Life**

*Elissa Renouf*

Attendees will get an idea of what it is like to be a parent of multiple children with type 1 diabetes. This presenter helped four out of five children live positively with T1D. The emotional rollercoaster of each child's diagnosis, instilling positivity and confidence into all of them while managing their diabetes and the various health challenges thrown at them along the way. If you work with pediatrics, this session is for you!

12:30pm – 1:00pm



AADE7™ IN PRACTICE RESEARCH SESSION

**Smoking: An Independent Predictor of Elevated A1C in Persons with Type 2 Diabetes**

*Monica DiNardo, PhD, ANP-BC, CDE; Eileen Chasens, PhD; Susan Sereika, PhD*

Risk reduction, including smoking cessation, is an essential AADE7™ self-care behavior. While vascular risks of smoking have been well documented in persons with existing type 2 diabetes, less is known about the impact of smoking on glycemic control in this population. Our findings that smoking is an independent predictor of uncontrolled glycemia (A1C 8%) reinforces the importance of smoking cessation as part of DSMES. Findings will be presented along with a review of the literature and current approaches to smoking cessation, and discuss implications for smoking cessation among persons with type 2 diabetes.

PROGRAM ABBREVIATIONS\*

**AAFP** - AMERICAN ACADEMY OF FAMILY PHYSICIANS

**AGD** - AMERICAN GENERAL DENTISTRY

**CDC** - CENTERS FOR DISEASE CONTROL AND PREVENTION

**CDN** - COLLEGE DIABETES NETWORK

**CHW** - COMMUNITY HEALTH WORKERS

**CMS** - CENTERS FOR MEDICARE AND MEDICAID SERVICES

**DKD** - DIABETES RELATED KIDNEY DISEASE

**DPRP** - DIABETES PREVENTION RECOGNITION PROGRAM

**HCL** - HYBRID CLOSED LOOP

**NACDD** - NATIONAL ASSOCIATION OF CHRONIC DISEASE DIRECTORS

**NDPP** - NATIONAL DIABETES PREVENTION PROGRAM

**NIDDK** - NATIONAL INSTITUTE FOR DIABETES AND DIGESTIVE AND KIDNEY DISEASE

**NIH** - NATIONAL INSTITUTES FOR HEALTH

**PSC** - PEER SUPPORT COMMUNITIES

**PWD** - PEOPLE WITH DIABETES

**SHD** - STATE HEALTH DEPARTMENT

*\*Less frequently recognized abbreviations included*



## GETTING THERE

### GETTING TO BALTIMORE

Baltimore is easily accessible by plane, train, or highway. There are three major airports that serve Baltimore: Baltimore/Washington International Thurgood Marshall Airport (BWI), Washington Dulles International Airport (IAD) and Reagan National Airport (DCA). Thurgood Marshall (BWI) provides more than 650 flights daily to dozens of domestic and international destinations. BWI is located approximately 15 minutes from the AADE18 Annual Conference Hotels and the Baltimore Convention Center.

### SPECIAL TRAVEL DISCOUNTS

AADE is proud to announce its partnerships with the following airline companies:

**United Airlines** is pleased to offer attendees 2% to 10% discounts off of published fares to Baltimore between Monday, August 13 and Thursday, August 23, 2018. To take advantage of this discount, you must complete the following steps:

- Visit [united.com](http://united.com)
- Under the Flight tab, click on "All Search Options"
- Under "Promotions and Certificates", enter **ZE5C932017**. The fares shown will include the discount.
- A \$30 service fee will be added to your ticket if you call United to book your ticket.

**Delta Airlines** is pleased to offer attendees 2% to 10% discounts off of published fares to Baltimore between Sunday, August 12 and Saturday, August 25, 2018. To take advantage of this discount, you must complete the following steps:

- Visit [delta.com/meeting](http://delta.com/meeting)
- From the four boxes, select "Book Your Flight" (bottom right).
- Enter Meeting Event Code: **NMQYB**

### Southwest Airlines

Check [AADE18.org](http://AADE18.org) for information.

### AMTRAK DISCOUNT

Amtrak is pleased to offer attendees a 10% discount off the lowest available rail fare to Baltimore, MD between August 13 – August 23. To take advantage of this discount, you must complete the following steps:

- Call Amtrak at (800) 872-7245 or contact AADE's travel agency, Omega at (800) 969-4152. Note: Convention Fares cannot be booked via internet.
- Mention the Convention Fare Code

This offer is not valid on the Auto Train and Acela Service. Fare is valid on Amtrak Regional for all departures seven days a week, except for holiday blackouts. Offer valid with Sleepers, Business Class or First Class seats with payment of the full applicable accommodations charges.

### AIRPORT SHUTTLE

Receive a discount through SuperShuttle when traveling between the airport and your hotel. Book via phone (800) 258-2826 or online at [supershuttle.com](http://supershuttle.com). Use group code **3D7y6**.

**DISCOUNT VALID DATES:** August 13-23, 2018

**WHERE TO ENTER YOUR CODE:** To use your code simply enter it in the "DISCOUNT CODE" box on the first page of the website when making your reservations.

**DISCOUNT:** Your discount gives you 10% off your reservation made online. Discount does not apply to exclusive vans (which are already discounted).

**RESERVATIONS:** For special reservation questions, call 1-800 BLUE VAN (800-258-3826) or customer service, available 24/7. Please note that if you call in your reservation instead of booking and paying online with your discount code, then your discount is not valid and a \$3 call center fee applies.

### QUESTIONS?

Contact the AADE Registration and Hotel Reservation Service Center Monday through Friday, 8:00 am – 6:30 pm (Central Standard Time) toll free at (800) 486-9644 (U.S. and Canada) or (972) 349-5460. You can also email [aade@wynndhamjade.com](mailto:aade@wynndhamjade.com).



## GETTING AROUND

### LIVE JUST OUTSIDE THE BALTIMORE AREA?

MARC Train service is a commuter rail system that services the Baltimore area. For more information on MARC go to [mta.maryland.gov](http://mta.maryland.gov). MARC Service fares vary by distance travelled; Daily weekly or monthly tickets are available.

The Penn Line service operates from Perryville, Martin Airport in the north and from Bowie, Odenton, BWI Airport, Halethorpe and West Baltimore to Baltimore, Penn Station. Penn Line service operates 7 days/week.

The Camden Line service operates from Washington with stops including Greenbelt, Laurel and Savage, Jessup to Baltimore's Camden Station. Camden Line service operates Monday through Friday only.

### TAKE THE LIGHT RAIL DIRECTLY TO THE CONVENTION CENTER AREA

The easiest way to get to the Baltimore Convention Center area from BWI airport is on the light rail. Board the light rail at Terminal E of the airport and ride for eleven stops until you reach the Convention Center stop or your preferred stop. A one-way ticket on the light rail costs \$1.80. Make sure to check the schedule for when you arrive, as the light rail does not run at all hours.

### BOOK YOUR HOTEL TODAY

Only through MCI USA (formerly Wyndham Jade), the official housing partner of AADE18, can you shop hand-picked hotels and get exclusive reservation perks.

#### Special Benefits for AADE18 – Lowest hotel rates since 2014!

- Guaranteed lowest rate and reservation protection
- No upfront costs at time of booking
- Peace of mind – safeguard yourself from potential fraud through unauthorized booking companies and access to onsite support

#### Annual Conference Room Share Request on MY AADE NETWORK

Are you looking for a way to reduce your Annual Meeting hotel expenses and at the same time meet a new diabetes educator colleague? You can do both by taking advantage of the new "Annual Conference Room Share Request" page on MY AADE NETWORK. All you need to do is post your request and await a reply from another attendee interested in sharing a room!

### GETTING AROUND BALTIMORE

#### Ride for FREE Within the City with the Charm City Circulator

The free shuttles run every 10 minutes from early morning to late night, 7 days/week.

- The orange line picks up and drops off right in front of the Baltimore Convention Center (stop 219) and services Hollins Market to Harbor East.

#### Driving into Baltimore and Need to Park a Car?

Don't forget to carpool and help save on both parking costs and pollution! Best Parking is a useful tool to find the cheapest parking spots around town. Go to [bestparking.com](http://bestparking.com) for more information. Select 'Baltimore' and a map will pop up with garages and parking options.

### IMPORTANT REGISTRATION AND HOUSING DATES

#### FRIDAY, APRIL 27

Last day to register at the Early Bird Rate

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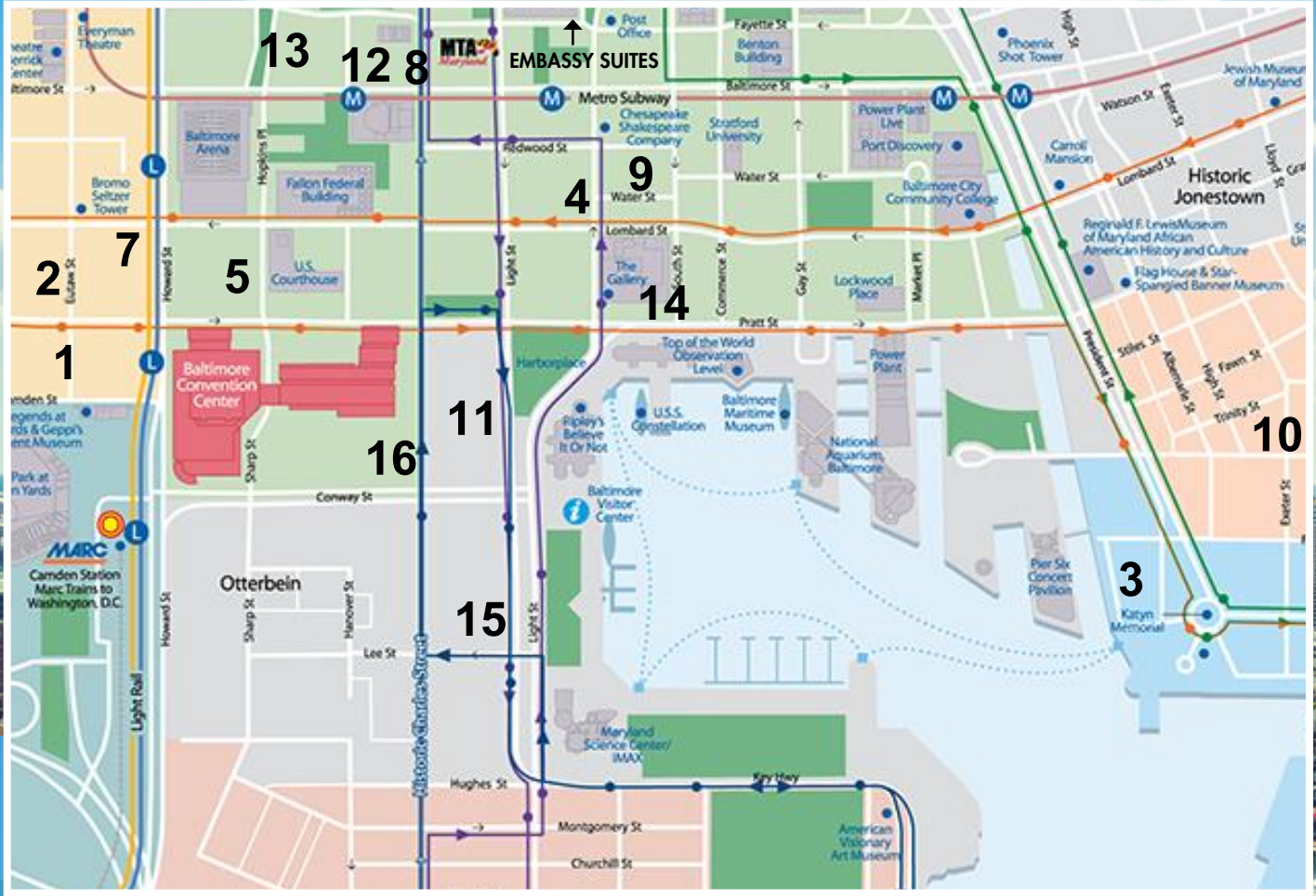
#### FRIDAY, JUNE 22

Last day to register at the Advance Rate and receive a partial refund (less \$100 administrative fee)

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#### FRIDAY, JULY 27, 2018

Last day to make a hotel reservation



## FREE Downtown Area Shuttle

- Charm City Circulator - Green Route
- Charm City Circulator - Orange Route
- Charm City Circulator - Purple Route
- Charm City Circulator - Banner Route

# AADE18

FRIDAY, AUGUST 17 - MONDAY, AUGUST 20, 2018  
BALTIMORE CONVENTION CENTER

	HOTELS	WALKING DISTANCE TO THE CONVENTION CENTER	WALKING TIME	RATE
<b>1</b>	Hilton Baltimore* (Headquarter Hotel)	Adjacent	1 minute	\$165*
<b>2</b>	Marriott Inner Harbor at Camden Yards	2 Blocks	3 minutes	\$149
<b>3</b>	Marriott Waterfront**	1 mile	22 minutes	\$149
<b>4</b>	Brookshire Suites	4 blocks	7 minutes	\$139
<b>5</b>	Days Inn Inner Harbor Hotel	2 blocks	3 minutes	\$129
<b>6</b>	Embassy Suites Baltimore (Not Shown)	8 blocks	13 minutes	\$149
<b>7</b>	Holiday Inn Inner Harbor	3 blocks	5 minutes	\$140
<b>8</b>	Hotel Monaco	4 blocks	7 minutes	\$139
<b>9</b>	Hotel Red Lion- Baltimore Inner Harbor	5 blocks	9 minutes	\$129
<b>10</b>	Hyatt Place Inner Harbor**	1.1 miles	25 minutes	\$149
<b>11</b>	Hyatt Regency Baltimore	1 block	2 minutes	\$165
<b>12</b>	Lord Baltimore	4 blocks	7 minutes	\$145
<b>13</b>	Radison Hotel Baltimore Downtown – Inner Harbor	4 blocks	8 minutes	\$125
<b>14</b>	Renaissance Baltimore Harborplace Hotel	3 blocks	5 minutes	\$159
<b>15</b>	Royal Sonesta Harbor Court	5 blocks	9 minutes	\$159
<b>16</b>	Sheraton Inner Harbor	1 block	2 minutes	\$159

\*Limited rooms available at early bird rate.

\*\* Recommend using the Charm City Circulator.

Occupancy tax: 15.5%

# AADE18

Baltimore, Maryland • August 17 – 20, 2018

AADE ID# \_\_\_\_\_ Military/Government ID# \_\_\_\_\_

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Credentials (to be seen on badge) \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number  Mobile  Home  Business

**Full Conference Registration** (Circle your selection) - includes all education sessions, general sessions, corporate symposia and product theaters, exhibit hall, posters and networking events. Does **NOT** include Preconference sessions. **NEW!** Full Conference Registrants will receive complimentary access to recorded educational sessions.\*

\*No CE available for accessing these recorded sessions.

Membership Status	3/1 – 4/27	4/28 – 6/22	Starting 6/23
Member	\$355	\$405	\$455
Nonmember	\$555	\$605	\$655
Military/Government*	\$255	\$305	\$355
Retired**	\$255	\$305	\$355
Student (No CE credits)	\$35	\$35	\$35

\*Must present Government ID onsite to guarantee rate. Without a current Government issued ID, your rate WILL CHANGE on site to the next applicable rate.

\*\*Must be AADE Retired Member to receive rate.

**Daily Registration** (Circle your selection) - includes access to all educational program sessions, exhibit hall and networking events on the specific day(s) registered.

Membership Status	3/1 - 6/22	Starting 6/23
Member	\$160	\$260
Nonmember	\$210	\$310

Circle the Day(s) you wish to attend: Friday, 8/17 | Saturday, 8/18 | Sunday, 8/19 | Monday, 8/20

**Total Daily Fee:** \_\_\_\_\_

\$110 - **Exhibit Hall & General Session** - includes access to exhibit hall and general sessions only. CE credits are **NOT** available for this registration.

\$35 - **Guest Registration** - includes access to the exhibit hall and general sessions only. CE credits are **NOT** available for this registration.

Guest Name(s): \_\_\_\_\_

Preconference	Member	Nonmember
<input type="checkbox"/> Reimbursement Boot Camp (8/16)	\$249	\$299
<input type="checkbox"/> Pharmacology Boot Camp (8/16)	\$249	\$299
<input type="checkbox"/> CORE Concepts® Course (8/17-20)	\$595 Advance \$795 Onsite	\$695 Advance \$895 Onsite

**AADE Celebration Event Tickets** – Sunday, 8/19 from 8-10 pm  
\$20.00 each x \_\_\_\_\_ (# of tickets)

**TOTAL REGISTRATION FEE:** \_\_\_\_\_

## Housing Information

### Hotel Reservation-Deadline July 20, 2018

Official Hotels	Single/Double Rates
Brookshire Suites.....	\$139
Days Inn Inner Harbor Hotel.....	\$129
Embassy Suites Baltimore.....	\$149
<b>Hilton Baltimore</b> (Headquarter).....	\$165*
Holiday Inn Inner Harbor.....	\$140
Hotel Monaco.....	\$139
Hotel Red Lion.....	\$129
Hyatt Place Inner Harbor.....	\$149
Hyatt Regency Baltimore.....	\$165
Lord Baltimore.....	\$145
Marriott Inner Harbor.....	\$149
Marriott Waterfront.....	\$149
Radison Hotel Baltimore Downtown.....	\$125
Renaissance Baltimore Harborplace.....	\$159
Royal Sonesta Harbor Court.....	\$159
Sheraton Inner Harbor .....	\$159

Occupancy Tax: 15.5% (subject to change)

\*Limited rooms available at early bird.

Reservations require a credit card and will be charged one night's room and tax. Room rates quoted are subject to city and state taxes. Group rates will be honored until Friday, July 20, 2018, or until the room block is sold out. After Friday, July 20, 2018, group rates will be offered on a space -available basis only. NOTE: If you would like to reserve an upgraded room or a suite, please contact aade@wyndhamjade.com for rates, availability and deposit amount.

### Hotel Choices

Reservations are by request and processed on a first come, first served basis. Enter your hotel choices in order of preference.

- 1) \_\_\_\_\_ Rewards # \_\_\_\_\_
- 2) \_\_\_\_\_ Rewards # \_\_\_\_\_

In cases where hotel choices cannot be accommodated, please assign based on:

Room Rate  Hotel Location

### Reservation Details

Name \_\_\_\_\_

Arrival \_\_\_\_\_ Departure \_\_\_\_\_

Share with (if applicable) \_\_\_\_\_

ADA Compliant

Room Type:  Single  Double (1Bed)

Double (2Beds)  Triple\* (2Beds)  Quad\* (2Beds)

# AADE18

Baltimore, Maryland • August 17 – 20, 2018

You **must** choose your applicable credentials in order to receive your appropriate certificates upon the evaluation completion.

<p><b><u>Nursing Credentials</u></b></p> <p><input type="checkbox"/> APN License # _____ State _____</p> <p><input type="checkbox"/> APRN License # _____ State _____</p> <p><input type="checkbox"/> CNS</p> <p><input type="checkbox"/> CPNP</p> <p><input type="checkbox"/> CRNP</p> <p><input type="checkbox"/> DNP</p> <p><input type="checkbox"/> FNP</p> <p><input type="checkbox"/> GNP</p> <p><input type="checkbox"/> LPN</p> <p><input type="checkbox"/> NP</p> <p><input type="checkbox"/> PNP</p> <p><input type="checkbox"/> RN</p>	<p><b><u>Dietitian Credentials</u></b></p> <p><input type="checkbox"/> RD/RDN RD Registration # _____ State _____</p> <p><input type="checkbox"/> LDN</p> <p><b><u>Doctor Credentials</u></b></p> <p><input type="checkbox"/> MD</p> <p><input type="checkbox"/> DO</p> <p><input type="checkbox"/> DPM</p> <p><input type="checkbox"/> OD</p> <p><input type="checkbox"/> LDO</p> <p><b><u>Pharmacy Credentials</u></b></p> <p>PharmD License # _____</p> <p>RPh License # _____</p> <p>NABP ePID# _____</p> <p>Birthday YYYY/MM/DD: _____</p>	<p><b><u>Public Health Credentials</u></b></p> <p><input type="checkbox"/> CHES</p> <p><input type="checkbox"/> MCHES</p> <p><input type="checkbox"/> CHW</p> <p><b><u>Other Credentials</u></b></p> <p><input type="checkbox"/> CDE</p> <p><input type="checkbox"/> BC-ADM</p> <p><input type="checkbox"/> PA</p> <p><input type="checkbox"/> MSW</p> <p><input type="checkbox"/> PT</p> <p><input type="checkbox"/> OT</p> <p><input type="checkbox"/> LCPC</p>
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What is your age group?  Under 30  31-40  41-50  51-60  60+

How many AADE Annual Conferences have you ever attended?  1-3  4-6  7-10  11+  This is my first

What is your position?

Staff/Clinical Care  Clinical Specialist  Consultant  Pharmacist  Patient/Diabetes Educator  Administrator/Program Manager  Coordinator/Supervisor

What is your practice setting?

- |   |   |
|---|---|
| <input type="checkbox"/> Self Employed                                  | <input type="checkbox"/> Physician, Primary Care, Endocrinologist Office          |
| <input type="checkbox"/> Outpatient Diabetes Center                     | <input type="checkbox"/> Hospital Inpatient/Hospital Outpatient Programs/Services |
| <input type="checkbox"/> University                                     | <input type="checkbox"/> Hospital Based Clinic                                    |
| <input type="checkbox"/> Hospital Pharmacy                              | <input type="checkbox"/> Retail Pharmacy  |
| <input type="checkbox"/> Long Term Care Facility/Skilled Nurse Facility | <input type="checkbox"/> Managed Care/Commercial Health Plan (e.g. HMO)           |
| <input type="checkbox"/> Indian Health Services                         | <input type="checkbox"/> Military Base/Government Facility/VA Hospital            |
| <input type="checkbox"/> Home Care Services/Organization                | <input type="checkbox"/> Industry (Pharmaceutical, Medical Equipment, etc.)       |
| <input type="checkbox"/> Public Health Community Center                 | <input type="checkbox"/> Other _____  |

Do you wish to receive promotional materials/emails from exhibitors?  Yes  No

Do you require special accommodations due to disability or physical challenges defined by the 1990 American Disabilities Act?

Wheelchair Accessible  Hearing Impaired  Visually Impaired  Other \_\_\_\_\_

In case of emergency while attending AADE18, whom should we contact? Name \_\_\_\_\_ Phone Number \_\_\_\_\_

A full refund of the registration fee less an administrative fee will be granted for all written requests received by **June 29, 2018**. Written requests must be submitted to meetings@aadenet.org. No refund will be given after **June 29, 2018**. Refunds will be granted to FULL CONFERENCE registrations only. **No refunds** will be granted for Students, Guests, Single Day or Exhibit Hall & General Session Only, Pre Conference Courses or Celebration Tickets. **No-shows will not receive a refund.**

Full payment for registration by check must arrive no later than **July 27, 2018**.

**No checks accepted for hotel deposit.**

Mail checks to:

AADE Registration

Department 4445, Carol Stream, IL 60122-4445

**Credit Cards will be charged immediately.**

Visa  MasterCard  Discover  American Express

\_\_\_\_\_  
Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
Name as it appears on card

\_\_\_\_\_  
Signature

By signing this form: I authorize AADE's registration company to charge my credit card for the total payment due, acknowledge that the AADE registration cancellation policies are in effect and grant AADE the right to use photos and videos taken, which include me, in promotional materials for future meetings.

Register by Phone: (800) 486-9644

Online: aade18.org

Email: aade@wyndhamjade.com

Fax: (972) 349-7715

AADE18  
ELEVATE  
INNOVATE  
MOTIVATE

REGISTER BY  
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