

## Supplementary Material 2—Glossary of Terms

**ADCES7 Framework.** A person-centered approach to diabetes, prediabetes and cardiometabolic care means acknowledging the whole person in the context of their life and relationships. The ADCES7- healthy coping, healthy eating, being active, taking medication, monitoring, reducing risk, problem solving- form the framework for diabetes care and education specialists to partner with people with diabetes, prediabetes and cardiometabolic conditions to support informed decision making.

**Assessment.** A process to gather information about the individual's current concerns, needs, and priorities to create a DSMES plan of care guided by the PWD's preferred delivery method and timing. The DSMES assessment must be completed by a healthcare professional. See Supplementary Material 3 for examples of validated assessment tools that may or may not require a fee for use.

**Behavioral goal setting.** The practice of identifying health behaviors to modify, setting a target to reach, and planning a course to achieve the target.

**Culture.** "Culture is often described as the combination of a body of knowledge, a body of belief, and a body of behavior. It involves several elements that are often specific to ethnic, racial, religious, geographic, or social groups. This includes personal identification, language, thoughts, communications, actions, customs, beliefs, values, and institutions."<sup>139</sup>

**Diabetes community care coordinator.** Diabetes care team member that provides person-centered care and education with a keen understanding of local culture, environment, and SDOH within their community and a focus on linking PWD to relevant resources.

**DSMES intervention.** A DSMES intervention refers to all encounters, engagement, and interactions with the PWD. A DSMES intervention includes individual and/or group sessions and is initiated with an assessment of the individual's current concerns, needs, and priorities to create a DSMES plan of care guided by the PWD's preferred delivery method and timing. The DSMES plan guides the delivery of sessions, utilizing a variety of methods, while supporting and reinforcing positive self-care behaviors.

**DSMES services.** Services replaced the terminology of 'program' in the 2017 National Standards, as program, indicates a set of structured activities. When focusing on the needs of an individual, this term is no longer relevant. The use of DSMES services more clearly delineates the need to individualize and identify the elements of DSMES appropriate for an individual.

**DSMES session.** A DSMES session includes one encounter/visit, whether in-person, over the phone or virtually occurring in a group or individually with the PWD and a member of the DSMES team in real time.

**DSMES stakeholder.** Anyone involved in or affected by the financing, implementation, or outcome of a service, practice, process, or decision made by another—e.g., healthcare, health policy. Examples of stakeholders with interest in healthcare are providers, patients (healthcare consumers), payers, etc.

**Electronic health records (EHR).** The digital version of a patient's chart, also referred to as electronic medical record (EMR). EHRs are available in real time and available to patients and their care team immediately.

**Interprofessional team.** "An interprofessional team is comprised of team members from two or more different professions (e.g., nurses and physicians, dietitians and community health workers, social workers and psychologists, pharmacists and respiratory therapists) who learn with, from, and about each other to enable effective collaboration and improve health outcomes."<sup>140</sup>

**Other qualified healthcare professional.** Includes NP, APRN, PA who can treat and refer PWD to DSMES services.

**Patient-generated health data (PGHD).** "Patient-generated health data (PGHD) are health-related data created, recorded, or gathered by or from patients (or family members or other caregivers) to help address a health concern."<sup>141</sup>

**Patient-reported outcomes (PRO).** "Any information providing the status of a patient's health outcome which comes directly from the patient without interpretation of that patient's response by a clinician or anyone else."<sup>142</sup>

**Person- and family- centered care.** "Care that involves persons living with multiple chronic conditions and their families in every decision, and that empowers them to be partners in their own care."<sup>143</sup>

**Preference.** "Qualitative or quantitative statement of the relative desirability or acceptability of attributes that differ among alternative health interventions. Preference refers to the tradeoffs that individuals consider or exhibit in making decisions or choices for themselves."<sup>144</sup>

**Promotores.** "Promotores and Community Health Workers are liaisons (links) between their communities and health and social service providers. Because they share the same language, culture, ethnicity, status and experiences of their communities, Promotores are able to reduce the barriers to health education and services that are common for native-born and immigrant communities."<sup>145</sup>

**Sexual orientation.** "An inherent or immutable enduring emotional, romantic or sexual attraction to other people."<sup>146</sup>

**Shared decision making.** "Shared Decision Making (SDM) is a key component of person-centered healthcare. It is the process in which clinicians and patients work together to make decisions."<sup>147</sup>

**Social determinants of health (SDOH).** "The social determinants of health are the conditions in which people are born, grow, live, work, and age. These circumstances are shaped by the distribution of money, power, and resources at global, national, and local levels."<sup>46</sup>

**Sponsor organization.** Person or entity (organization) that sponsors Medicare billing and reimbursement for DSMES services. For DSMES services billing Medicare, a Part B supplier

with an NPI# must be listed as a sponsor. The sponsor also supports long term sustainability of the DSMES services for those who do not bill Medicare for DSMT.

**Therapeutic inertia.** “Failure to advance therapy or to de-intensify therapy when appropriate to do so.”<sup>148</sup>

**Tool.** An instrument, measure, questionnaire, or survey used in practice to collect information from a person.

## References

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