



Case Study

Montana Diabetes Program

Challenge

Cardiometabolic Management in Rural Areas

Rates of diabetes have tripled in Montana since the 1990s, particularly among American Indian/Alaskan adults. Populations in rural, frontier communities have limited access and utilization of Diabetes Self-Management Education and Support (DSMES) services. As a result, less than half of Montana adults with diagnosed diabetes report ever taking a course or class on diabetes self-management. The state of Montana, a pioneer in leveraging telehealth capabilities identified a need to scale DSMES for populations in rural, frontier communities in the state.

Solution

The state of Montana provided Welldoc’s digital health solution for diabetes, FDA-cleared BlueStar®, to eligible individuals with type 1 or type 2 diabetes* as part of its effort to scale DSMES services. The program sought to identify whether a digital tool could expand access to and participation in these services. It was an exploration of innovative ways to eliminate barriers for individuals with diabetes from participating in programs and improve retention as well as health outcomes.

Population

Eleven diabetes care and education specialists (DCES) signed up to enroll patients.

198
Patients Enrolled

30%
Ages 65+

39%
Male

91%
Type 2 Diabetes

61%
Female

9%
Type 1 Diabetes

Key Questions



- Did this population engage with the program?
- Did engagement lead to health outcomes?

*Welldoc Diabetes Rx/OTC is an FDA-cleared medical device (“BlueStar”), intended for use by healthcare providers and their adult patients with type 1 or type 2 diabetes. For full labeling information, visit www.welldoc.com.

Results

Glycemic Outcomes

Approximately 2/3 of users tracked their glucose and improved their control with an estimated average glucose (eAG) or Glycemic Management Indicator of -9 mg/dL. 38% of engaged users experienced an average eAG improvement of -47 mg/dL.

↓ **47 mg/dL**

Improvement in average eAG amongst engaged users.

Blood Pressure Outcomes

1/3 of users tracked their blood pressure and averaged a reduction in SBP of -2 mmHg. Of those who reduced SBP, the average SBP improvement was 10mmHg.

↓ **10 mmHg**

Average reduction in BP amongst those who reduced blood pressure.

Weight Outcomes

40% of users tracked their weight. The average weight loss was 3% across all users. Those who lost weight lost an average of 7% from their baseline.

↓ **7%**

Reduction in weight from baseline amongst those who lost weight.

Conclusion

An integrated digital health solution can support health systems and health plans in expanding access and extending existing care programs. The partnership between the state of Montana and Welldoc demonstrates the value of AI-powered digital coaching to meet program goals, guide individuals in their daily health, support positive outcomes, empower care teams with data-driven insights, and scale care to broader populations.

¹ Welldoc Data on File. Results may vary based on BlueStar App adherence.

The Welldoc® App includes Welldoc Diabetes and Welldoc Diabetes Rx, which is Software as a Medical Device (SaMD) intended to be used by healthcare providers (HCPs) and their patients – aged 18 years and older – who have type 1 or type 2 diabetes. Welldoc Diabetes and Welldoc Diabetes Rx is intended to assist patients in managing their diabetes with guidance from their providers. Welldoc Diabetes Rx requires a prescription. Welldoc Diabetes and Welldoc Diabetes Rx should not be used by patients with gestational diabetes or patients using an insulin pump. Improper use of Welldoc Diabetes and Welldoc Diabetes Rx may result in unsafe recommendations that could result in hyperglycemia or hypoglycemia. Visit www.welldoc.com for full labeling information.