



Transforming Diabetes Management Through Evidence-Based Nutrition & Lifestyle Strategies

February 2026

AGENDA

- **Welcome & Overview**
 - Trinette Small, HealthCareTN
- **Supporting Healthy Behaviors in Diabetes: Practical Strategies for Employers**
 - Jennifer Guy, Pharm.D., BCPS - Clinical Pharmacist - TrestleTree
- **Intermittent Fasting: Understanding the Evidence & Practical Strategies for Employers: Reducing Diabetes Risk and Progress**
 - Shannon Willoughby - MS, Dietetics & Nutrition, Wellbeing Specialist
 - Melissa Bateman – RN,BSN-Nurse Manager of Care Coordination
 - Baptist Memorial Hospital

WORKFORCE HEALTH INITIATIVES

Employer Primary Care Survey

- **Purpose:** To understand how employers **define, measure, invest in, and support primary care** within their benefits strategies.
- Results will guide our shared work to **strengthen primary care**, improve chronic disease outcomes, and enhance the employee experience.

What You Need to Know

- **Survey Close:** February 10, 2026
- **Who Will Receive It:** Sent directly to each employer member's **primary organizational contact**
- **Time to Complete:** 8–10 minutes
- **Confidentiality:** All responses reported in aggregate only

Your Participation Matters! Thank You Gift - Participants completing the survey will receive a 🎁 **\$25 Gift Card**

-
- **Effective Primary Care Initiative**
 - No-cost, high-level evaluation of the effectiveness of current primary care benefits using data you already have
 - **HCTN No-Cost Pilots**
 - Omada Hypertension & Diabetes Prevention/Management Pilots
 - Form Health Obesity Pilot

Supporting Healthy Behaviors in Diabetes: Practical Strategies for Employers

**Jennifer Guy, Pharm.D., BCPS
TrestleTree**



Supporting Healthy Behaviors in Diabetes

Practical Strategies for Employers

Jennifer Guy, PharmD, BCPS, CSOWM
TrestleTree, Clinical Pharmacist



HealthCareTN
February 5, 2026

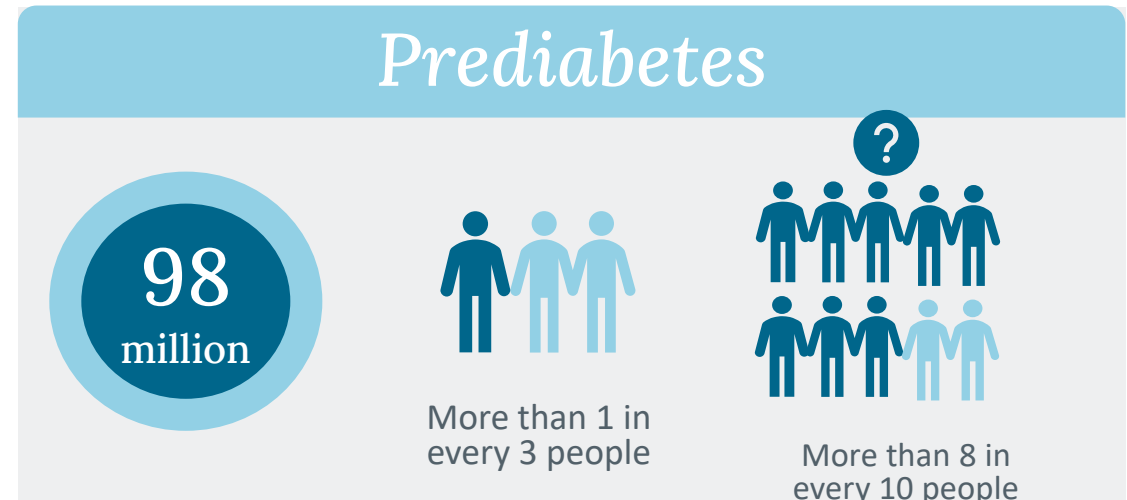
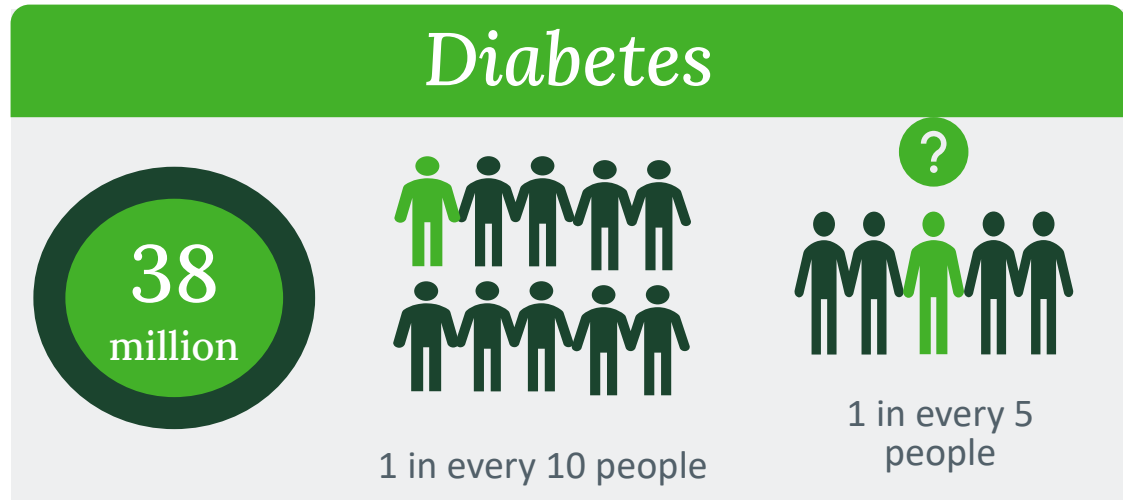


Outline

- ✔ **Current state of diabetes** and downstream impacts
- ✔ **Benefit levers** to improve workforce metabolic health
- ✔ **Lifestyle interventions** in diabetes prevention and management
- ✔ **TrestleTree's case studies** and successful metabolic outcomes



U.S. Diabetes Prevalence



Increased medical/pharmacy spend, absenteeism, long-term disability risk

Diabetes management and heart disease are top drivers of medical and pharmacy costs

- Diabetes has changed in the US:
 - Earlier onset and longer duration
 - Rising metabolic syndrome and obesity
 - Increased CV and kidney complications
 - Increasing therapy costs (e.g, GLP-1s, SGLT2i)



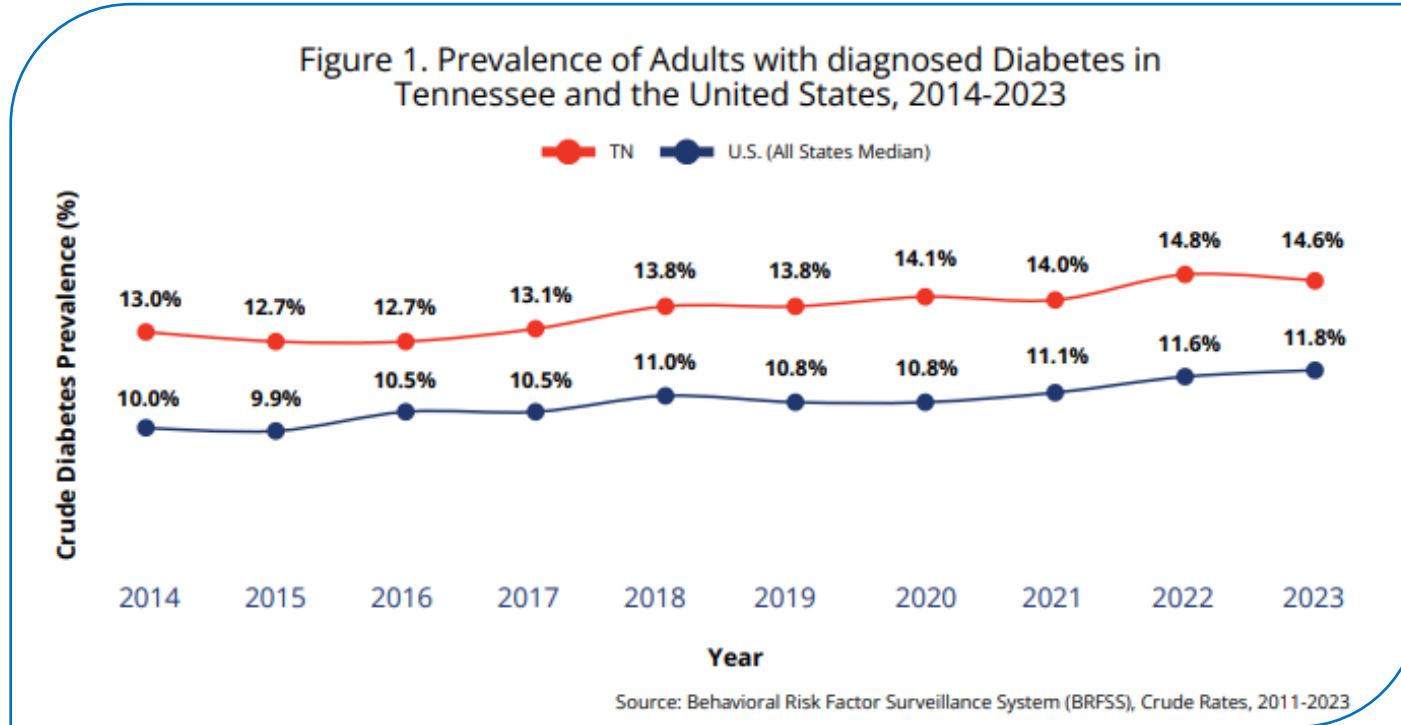
Tennessee Diabetes Prevalence

1 in 7

adults living with DM in TN (over 800,000)

45th

In America's Health Rankings in Diabetes Prevalence vs other states



TN Dept of Health. 2025 Diabetes Action Report.



Diabetic Complications

- ER visits and hospitalizations
 - Hyperglycemia crisis (e.g., DKA)
- Kidney disease
- Heart disease (heart attack, stroke)
- Diabetic retinopathy
- Nerve damage
- Foot ulcers, amputations, poor wound healing
- Infections

50%

of adults with DM
achieve a HbA1c <7%

47%

of adults with DM achieve
recommended blood
pressure goals

22%

achieve HbA1c, BP and
cholesterol goals
simultaneously



Diabetes Benefit Design Levers

that promote healthy lifestyle changes

- Lifestyle medicine coverage
- Nutrition counseling and/or medical nutrition therapy
- Additional RMDs: CGM coverage (diagnosis appropriate)
- Diabetes Prevention Programs (DPP)
- Biometric screening coverage





Lifestyle Changes are Recommended



“Lifestyle management is a fundamental aspect of diabetes care.”

- American Diabetes Association (2018)

“Managing this chronic disease requires making lifestyle changes throughout life, which can be burdensome for people living with diabetes and their caregivers.”

- Endocrine Society (2024)

Foundational Lifestyle Changes and Metabolic Impact

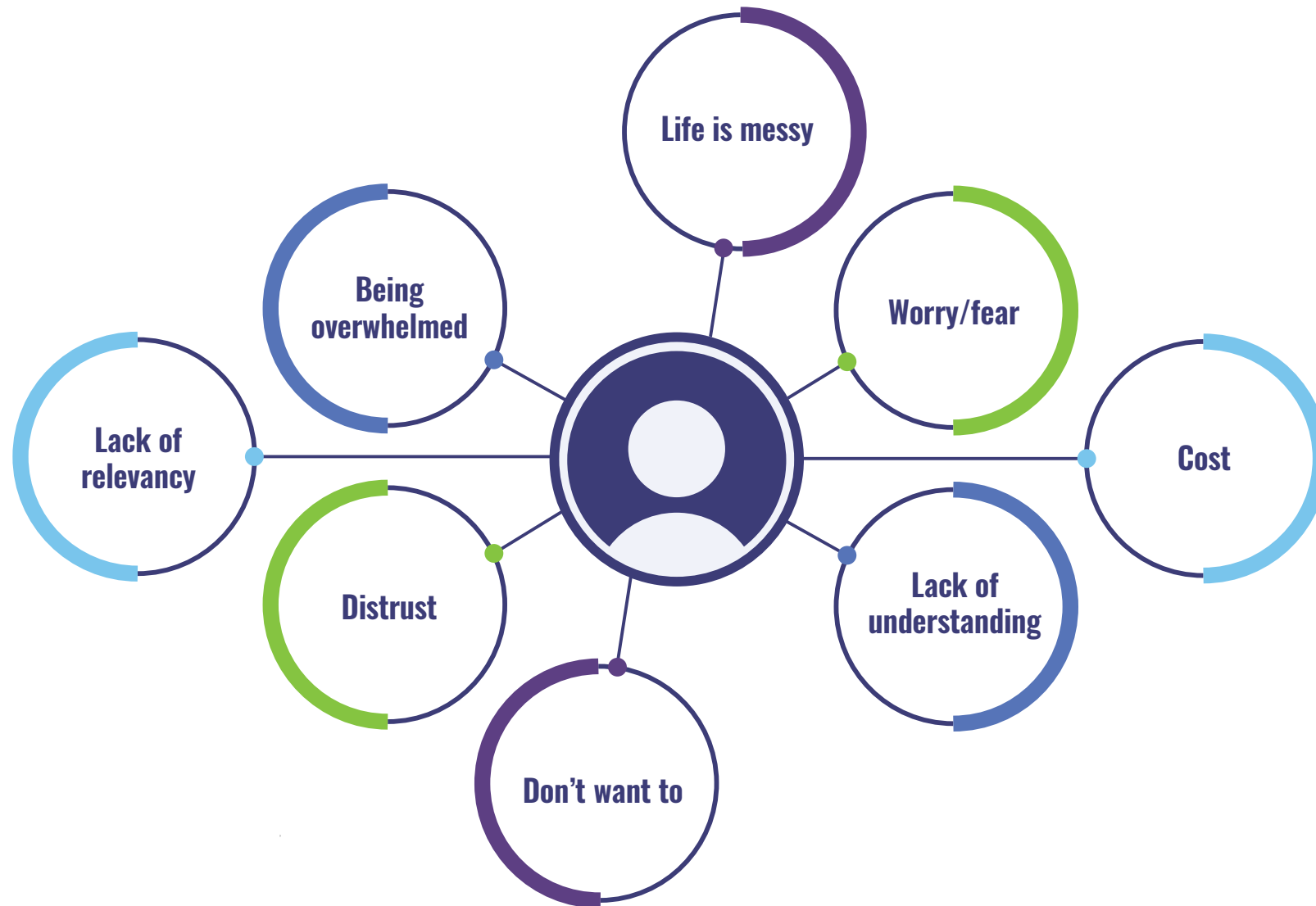


- Nutrition
- Physical Activity
- Weight reduction
- Stress management
- Sleep quality
- Smoking/vaping cessation
- Medication adherence
- Focus on well-being
- Self monitoring

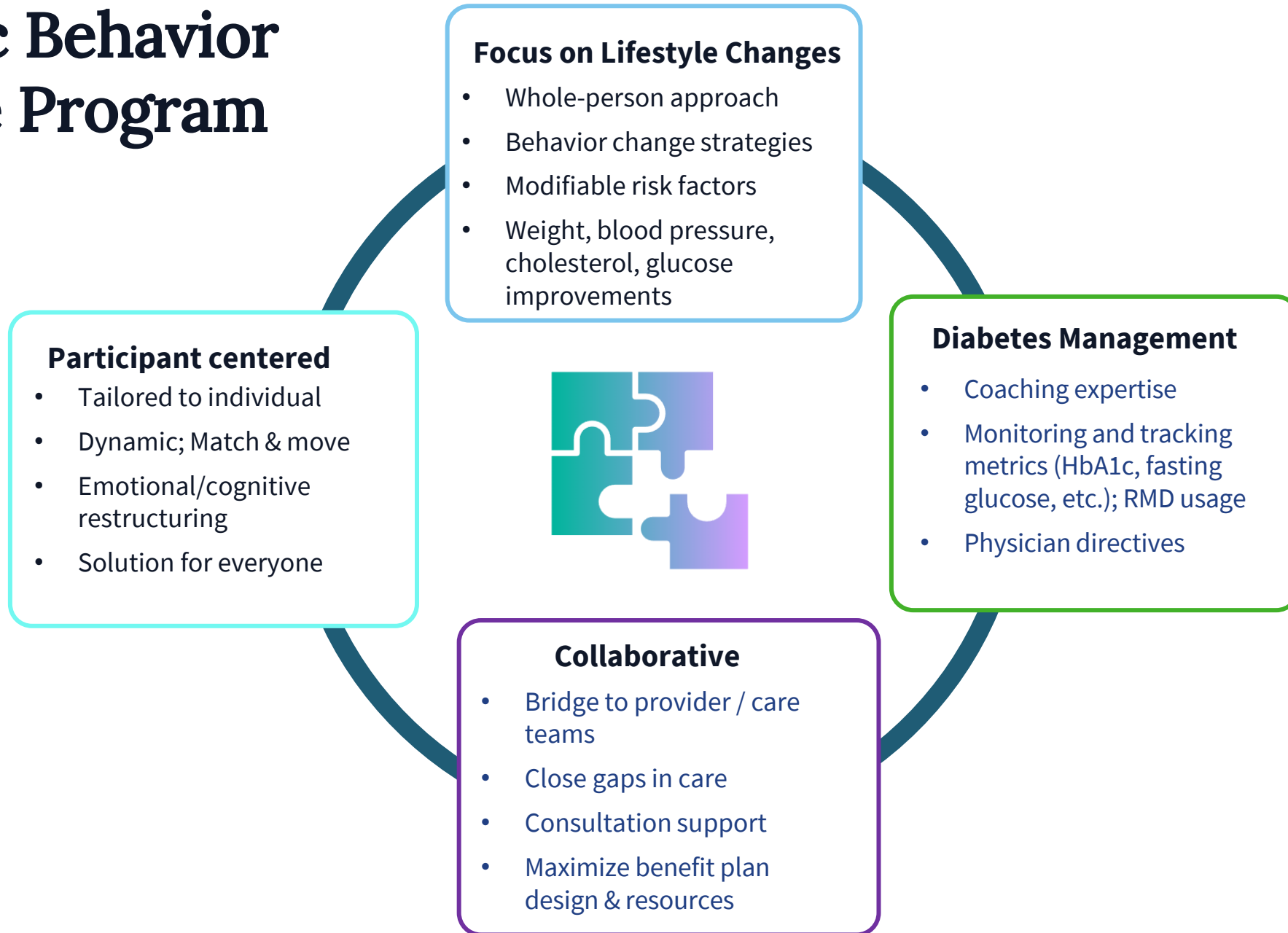


- Improves glycemia**
- Lowers insulin resistance**
- Improves cholesterol and blood pressure**
- Weight reduction**
- Improves self efficacy**
- Reduces cardiovascular risk**
- Lowers morbidity and mortality**

Change is Hard. Maintaining Change, Harder.



Holistic Behavior Change Program





Metabolic Syndrome Case Study



Employer Pain Point

- Leading manufacturing population presented with high prevalence rates and rising costs of diabetes, hypertension, dyslipidemia, etc.
- Chief Medical Officer tasked with seeking solutions to reverse trends and improve employee population health outcomes

Program Design

- TrestleTree partnered to develop intentional Metabolic Syndrome program
- Individuals diagnosed with 3+ risk factors based on blood sugar, HDL, triglycerides, waist circumference, and blood pressure

Outcomes (11 Years Aggregate)

- **Blood Glucose:** 67% of the at-risk population reduced fasting blood glucose an average of **26 mg/dl** from an average of **130 mg/dl** down to **104 mg/dl**
- **Blood Pressure:** 79% of the at-risk population reduced blood pressure from an average of **139/88 mmHg** down to an average of **125/78 mmHg**
- **Cholesterol:**
 - 72% of the at-risk population reduced triglycerides by an average of **103 mg/dl** from an average of **271 mg/dl** down to **168 mg/dl**
 - 73% of the at-risk population reduced total cholesterol by an average of **73 mg/dl** from an average of **275 mg/dl** down to **202 mg/dl**
- **Weight:** 74% of the at-risk population reduced weight by an average of **14 lbs.**



Diabetes and Obesity Case Study



Employer Pain Point

- Rising costs of Diabetes and Obesity across dispersed populations throughout the U.S.
- Need for a high-touch, holistic solution that engaged high risk populations to reverse chronic condition costs and improve health outcomes

Program Design

- Partnered with TrestleTree to deploy Dedicated Health Coaches onsite at plants/clinics as well as remote telephonically
- Lifestyle and Disease Management programs evolved to include Obesity Rx wrap-around program to support GLP-1 medication use

Outcomes (Last 5 Years)

- **Blood Glucose:** 77% of the at-risk population reduced HbA1c by an average of **1.8% pts (from 8.7% to 6.9%)**
- **Blood Pressure:** 85% of the at-risk population reduced systolic blood pressure by an average of **21.8 mmHg** and **81%** reduced diastolic by an average of 11.9 mmHg
- **Cholesterol:**
 - 72% of the at-risk population reduced total cholesterol by an average of 65.5 mg/dl
- **Weight:** 84% of participants lost an average of 30.2 lbs and reduced BMI by 4.8 pts

In summary



Diabetes is common and costly

Lifestyle change works but it needs structure, support and appropriate behavior models to be successful

Cookie cutter approach doesn't work for every participant – should be individualized and holistic

Supporting healthier behaviors as an employer is an investment and is strategic

Demand strong clinical outcomes, analytics to show your investment (ROI, VOI)



References

- American Diabetes Association. diabetes.org. Accessed 14 January 2026.
- American Diabetes Association Professional Practice Committee. (2026). *Facilitating positive health behaviors and well-being to improve health outcomes: Standards of care in diabetes—2026*. *Diabetes Care*, 49(Supplement 1), S89–S131. <https://doi.org/10.2337/dc26-S005>.
- Blonde, L., Umpierrez, G. E., Reddy, S. S., et al. (2022). American Association of Clinical Endocrinology Clinical Practice Guideline: Developing a Diabetes Mellitus Comprehensive Care Plan—2022 Update. *Endocrine Practice*, 28(10), 923-1049.
- Centers for Disease Control and Prevention. (2024). *National Diabetes Statistics Report*. <https://www.cdc.gov/diabetes/php/data-research/index.html>
- Rosenfeld RM, Grega ML, Karlsen MC, et al. Lifestyle Interventions for Treatment and Remission of Type 2 Diabetes and Prediabetes in Adults: A Clinical Practice Guideline From the American College of Lifestyle Medicine. *Am J Lifestyle Med*. 2025;19(2_suppl):155S-177S. doi:10.1177/15598276251325488
- Tennessee Department of Health. (2025, February 1). *Diabetes Action Report 2025*. [https://www.tn.gov/content/dam/tn/health/program-areas/Diabetes%20Action%20Report%202025%20%20V10%20\(Jan%2016%202025\).pdf](https://www.tn.gov/content/dam/tn/health/program-areas/Diabetes%20Action%20Report%202025%20%20V10%20(Jan%2016%202025).pdf)



Questions?

jennifer.guy@trestletree.com

**Intermittent Fasting: Understanding the Evidence
&
Practical Strategies for Employers:
Reducing Diabetes Risk and Progress**

**Shannon Willoughby
Melissa Bateman**

Baptist Memorial Hospital



Intermittent Fasting

Understanding the Evidence

Presented by:
Shannon Willoughby, MS, Dietetics & Nutrition
Wellbeing Specialist at Baptist Memorial Health Care



Intermittent Fasting: What It Is

BestHealth by Baptist

- ❏ Many diets focus on what to eat, but intermittent fasting is all about when you eat.
- ❏ With intermittent fasting, you only eat during a specific time. **Research shows fasting for a certain number of hours each day or eating just one meal a couple days a week may have health benefits.**
- ❏ After hours without food, the body exhausts its sugar stores and starts burning fat. This is referred to as metabolic switching.

Intermittent Fasting: Why Now?

BestHealth by Baptist

- 🌐 Experts note that even 50 years ago, it was easier to maintain a healthy weight in the United States. There were no computers, and TV shows turned off at 11 p.m.; people stopped eating because they went to bed. Portions were much smaller. More people worked and played outside and, in general, got more exercise.
- 🌐 With internet, TV and other entertainment available 24/7, many adults and children stay awake for longer hours to watch TV, scroll through social media, play games and chat online. That can mean sitting and snacking all day — and most of the night.
- 🌐 Extra calories and less activity can mean a higher risk of obesity, type 2 diabetes, heart disease and other illnesses. Scientific studies are showing that intermittent fasting may help reverse these trends.



Fasting & Weight Management

BestHealth by Baptist



Calorie Reduction: By limiting eating to specific hours or days (e.g., 16:8), individuals generally consume fewer calories overall.



Insulin Reduction: Fasting lowers insulin levels, which allows the body to access and burn stored body fat.








Metabolic Shift (Ketosis): After 10–12 hours without food, the body exhausts glucose stores and begins burning fat for energy.



Autophagy & Inflammation: Fasting triggers autophagy (cell repair), which may reduce inflammation, potentially aiding metabolic health and making it easier to manage weight.







Fasting & Glucose Regulation

BestHealth by Baptist

Benefit	Description
 Increased Insulin Sensitivity	Fasting forces cells to become more efficient at using glucose, reducing the need for high circulating insulin levels.
 Reduced Insulin Levels	During fasting, lower blood sugar decreases insulin secretion, allowing cells to rest and helping restore insulin sensitivity.
 Metabolic Switch to Ketones	When glucose stores (glycogen) are depleted, the body shifts to burning fat, producing ketones for energy and lowering overall blood sugar levels.
 Reduction of HbA1c	Evidence suggests that consistent intermittent fasting (IF) can reduce long-term blood sugar markers, including HbA1c.
 Improved Circadian Rhythm	Early time-restricted feeding (e.g., eating within a 6–8 hour window earlier in the day) aligns with metabolic peaks, improving glucose processing and regulation.

Fasting & Metabolic Health

BestHealth by Baptist

Benefit	Description
 Metabolic Switching (Fat Burning)	After hours without food, the body exhausts glycogen stores and shifts to burning fat, producing ketones. This process improves fat metabolism and is particularly beneficial for reducing visceral fat.
 Enhanced Insulin Sensitivity	Intermittent fasting (IF) lowers blood sugar and insulin levels, improving glucose management and increasing insulin sensitivity—key for reversing pre-diabetes and type 2 diabetes.
 Weight & Body Composition Management	IF reduces overall calorie intake, leading to significant weight loss and decreased body fat, which often drives improvements in metabolic markers such as blood pressure and triglycerides.
 Reduction of Inflammation & Oxidative Stress	Fasting reduces—and in some cases reverses—chronic, low-grade inflammation that contributes to metabolic disease.
 Gut Microbiota Rejuvenation	Extended fasting periods (“gut rest”) can improve gut microbiome diversity and overall digestive health.
 Circadian Alignment	Time-restricted eating (TRE) aligns food intake with the body’s natural circadian rhythm, preventing late-night eating and improving metabolic regulation.

Is Intermittent Fasting Safe?

BestHealth by Baptist

Who Should Consider Fasting

- 🌀 **Individuals looking for weight loss:** It can help reduce calorie intake and change body composition.
- 🌀 **Those aiming to improve metabolic health:** It may reduce risks of diabetes and improve insulin sensitivity.
- 🌀 **People looking to manage inflammation:** It is associated with reduced inflammation, improved blood pressure, and better heart health.
- 🌀 **People with busy schedules:** It can simplify meal planning and reduce the need for constant, small meals.

Who Should Not Consider Fasting

- 🌀 **History of eating disorders:** The restriction can trigger disordered eating behaviors.
- 🌀 **Pregnancy and breastfeeding:** High nutritional and energy needs are not met by fasting.
- 🌀 **Children and teenagers:** Those under 18 still need adequate nutrition for growth.
- 🌀 **Diabetics or those with blood sugar issues:** Particularly if taking insulin, as it can cause dangerous hypoglycemia.
- 🌀 **Underweight individuals:** It may cause further unhealthy weight loss.
- 🌀 **Athletes with high-intensity training:** Performance may suffer, and it may be hard to fuel correctly.

Contributing Lifestyle Behaviors: Movement

BestHealth by Baptist



Movement and exercise accelerate the benefits of intermittent fasting (IF) by enhancing fat burning, preserving muscle mass, and improving metabolic health.

Exercising in a fasted state depletes glycogen faster, pushing the body into a fat-burning state (ketosis) sooner.

It boosts insulin sensitivity, reduces blood pressure, and helps maintain lean muscle while losing weight.



Contributing Lifestyle Behaviors: Sleep

BestHealth by Baptist

Sleep directly contributes to intermittent fasting (IF) by acting as a passive, built-in fasting period, as the hours spent sleeping are part of the total fasting window.

Quality sleep enhances IF by regulating hormones that manage hunger, reducing late-night eating, and aligning metabolism with circadian rhythms to improve insulin sensitivity and fat burning.



Contributing Lifestyle Behaviors: Stress

BestHealth by Baptist

Intermittent fasting (IF) acts as a form of **"hormetic" stress**—a beneficial, mild stressor—that can improve long-term resilience against chronic stress, anxiety, and inflammation by promoting brain-derived neurotrophic factor (BDNF) and reducing cellular stress.

While it may initially increase cortisol (acute stress), consistent practice often leads to enhanced mental clarity, reduced anxiety, and improved mood, particularly with structured routines.



Promoting Intermittent Fasting in the Workplace

BestHealth by Baptist

The Intensive Dietary Management Study

BestHealth through Baptist Memorial Health Care piloted a study that provides evidence that a 24-week IF intervention through employee wellness programs produces clinically meaningful, sustained improvements in weight, body composition, glycemic control, and blood pressure among prediabetic employees. Results demonstrate sustained metabolic benefits beyond 12-week timeframes and establish workplace wellness feasibility.

For Baptist Memorial Health Care facing projected \$11.2 million diabetes-related costs over five years, this intervention represents promising strategy for preventing progression in 1,300+ system-wide prediabetic employees. IF, when delivered through well-designed programs with adequate behavioral support, offers prediabetic employees effective, sustainable continuous calorie restriction alternatives for improving metabolic health and preventing diabetes progression.

Promoting Intermittent Fasting in the Workplace

BestHealth by Baptist



Dietary Lifestyle Transformation

Our program designed to prevent Type 2 diabetes and achieve weight loss through time-restricted eating and real food nutrition. Participants receive expert guidance on fasting and nutrition, plus accountability support for lasting lifestyle changes.

Enhanced Energy & Focus:

Increased mental clarity and consistent energy levels, as IF avoids the mid-day fatigue associated with high-carbohydrate, frequent meals.

Sustainable Lifestyle Change:

Time-restricted eating is often viewed as easier to follow than constant calorie counting, reducing the mental burden of dieting and supporting better, long-term compliance.

Cost-Effectiveness & Productivity:

By improving health, managing weight, and reducing the risk of chronic disease, people are sick less and more productive

Sources

BestHealth by Baptist

- hopkinsmedicine.org
- Integrishhealth.org
- idf.org
- Jeffersonhealth.org
- Massgeneralbrigham.org
- Mayoclinichealthsystem.org
- Bastyr.edu
- Sleepfoundation.org
- Brownhealth.org
- Front Aging. 2023 Jun 2;4:1161814.
- Sports (Basel). 2024 Apr 25;12(5):116.
- Anderson C (2024) Evaluating the Effects of Intermittent Fasting on Metabolic Health and Longevity. J Food Nutr Disor 13:1.



Practical Strategies for Employers

Reducing Diabetes Risk and Progress

Presented by:

Melissa Bateman, RN, BSN

Nurse Manager of Care Coordination at Baptist Memorial Health Care



Why Diabetes Matters to Employers

BestHealth by Baptist



Rising

Rising diabetes and prediabetes rates



Increasing

Increasing impact on working-age employees



Growing

Growing healthcare and productivity costs



The Real Cost of Care

BestHealth by Baptist



Downstream Complications Drive High-Cost Spend

- ❏ Chronic Kidney Disease (Dialysis)
- ❏ Vision Loss & Diabetic Retinopathy
- ❏ Cardiovascular Disease & Stroke
- ❏ Neuropathy & Amputations



Why Early Action Matters

BestHealth by Baptist



Delays Disease
Progression



Reduces
Hospitalizations And
ER Visits



Improves Medication
Adherence



Preserves Workforce
Productivity



How Baptist is Changing the Cost Curve

BestHealth by Baptist



DIABETES MANAGEMENT

100% Coverage of Approved Diabetic Medications & Supplies

Take an active role in managing your diabetes by working with our wellbeing specialists and care coordinators on your personalized care plan.

Learn More →



BestHealth Diabetes Management Program

BestHealth by Baptist



What the Program Offers

- Personalized diabetes support with wellbeing specialists, nurse care coordinators, & registered dietitian
- Focus on improving overall health, wellbeing, and diabetes self-management
- 100% coverage of approved diabetes medication & supplies

Who is Eligible



BMHCC
Employees Health
Plan members
(employees,
spouses,
dependents)

Diagnoses with
Type 1, Type 2,
gestational
diabetes, insulin
resistance,
impaired fasting
glucose, or
prediabetes

Must complete a
current year
BestHealth Health
Risk Assessment
& Biometric
Screening

Diabetes Management Program

BestHealth by Baptist



Enrolled vs. Non-Enrolled

**1.5% vs
8.74%**

**Medical & Pharmacy
PMPM**

Only a 1.5% increase in Medical and Pharmacy PMPM for enrolled members, compared to 8.74% for non-enrolled.

**306.3 vs
324.6**

ER Visits per 1,000

ER visits per 1,000 are lower for enrolled members (306.3) compared to non-enrolled (324.6).

**3.6 vs
5.7**

Length of Stay (LOS)

Average length of stay is 3.6 days for enrolled members, significantly less than 5.7 days for non-enrolled.

**8.8 vs
15.6**

**30-Day Readmissions per
1,000**

30-day readmission rate per 1,000 is 8.8 for enrolled, compared to 15.6 for non-enrolled members.

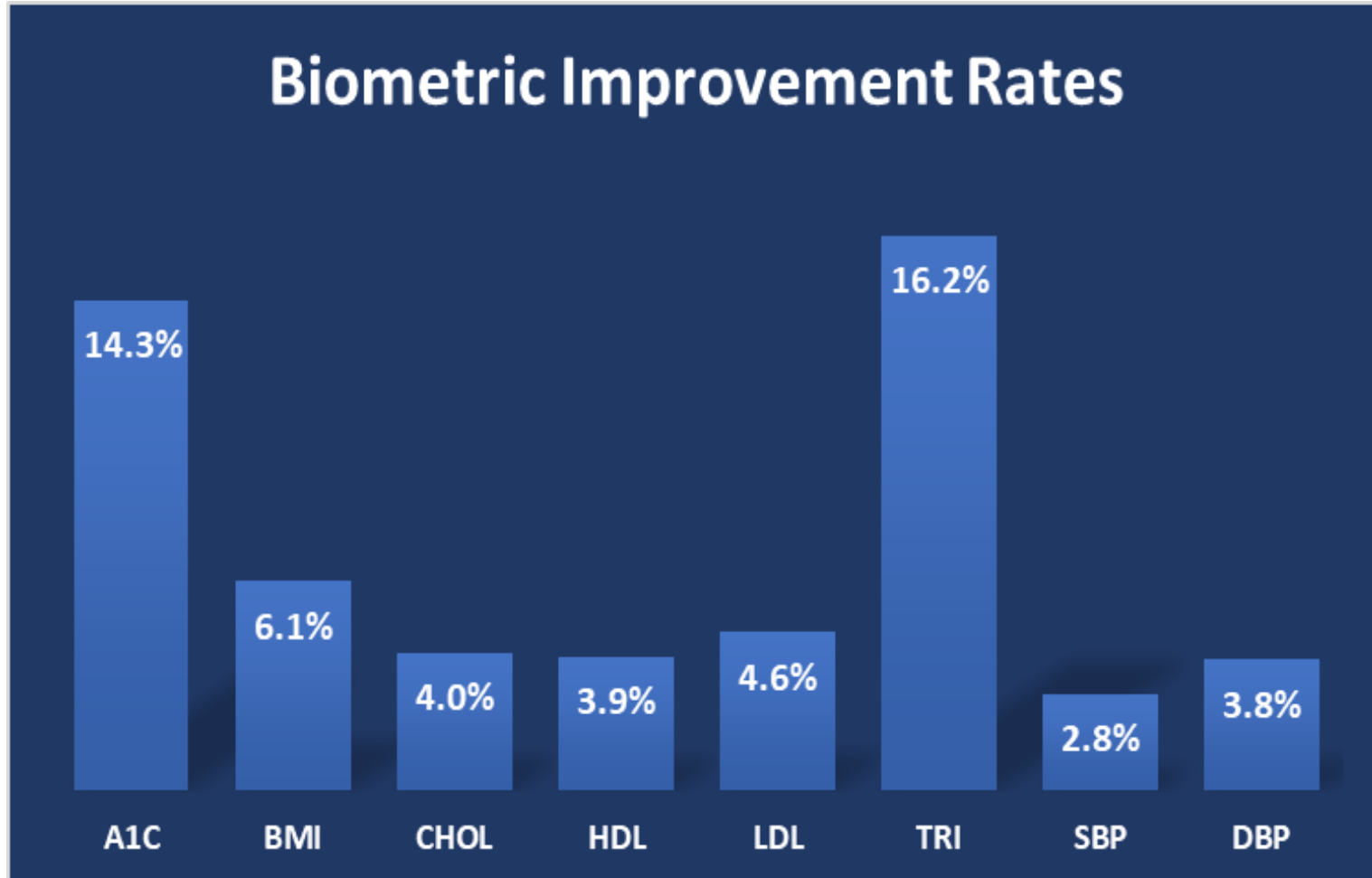
**18.4% vs
34.6%**

Inpatient PMPM

Inpatient PMPM is down 18.4% for enrolled members, and up 34.6% for non-enrolled members.

Diabetes Management Program

BestHealth by Baptist



Driving Real Health Impact That Lowers Risk and Reduces Cost

BestHealth Programs

BestHealth by Baptist



- 1:1 Health Coaching with Wellbeing Specialist:** Personalized coaching. Practical Support. Real Change
- 1:1 Nurse Care Coordination:** Guiding Patients. Managing Conditions. Improving Life
- 1:1 Registered Dietitian:** Better Nutrition Today, Better Performance Tomorrow
- And More:** Flourish, Tobacco Cessation, Healthy Mom, Healthy Baby, Hypertension Mastery, BestWealth, BestYou, BestFit, BestCares



Flourish



Tobacco Cessation



Healthy Mom,
Healthy Baby



Hypertension
Mastery Course



BestWealth



BestYou



BestFit



BestCares

Delivering Meaningful, Measurable Results

BestHealth by Baptist



Participants are achieving sustained, meaningful health gains



Personalized coaching and strong provider partnership are driving real behavior change



Reliable access to medications and supplies ensures consistent, effective care



Improved outcomes are reducing long-term risk and strengthening overall workforce well-being



BESTHealth
BY BAPTIST

Follow HealthCareTN on LinkedIn

<https://www.linkedin.com/company/healthcaretn/>



THANK YOU