

DEAP Dashboard System

AADE is one of two National Accrediting Organizations for CMS. As the only organization dedicated solely to diabetes education, AADE has the expertise and resources to support DSMES programs.

AADE's DEAP includes program flexibility, multi-site accreditation, a simple fee structure and an online application with the ability to upload your supporting documents.

What's New in this Release?

1. Menus – New menu system that tracks where you are in the process and allows the user to quickly go from one section of the application to another.
2. Save and Exit – Now the user can save the application at any step in the process and then return to complete later.
3. Updated application forms – easier interface with help text
4. Updated renewal forms – easier interface with help text
5. Annual Status Report – redesigned form and ability to print
6. Improved document upload capabilities

Best Practices



As you prepare to apply or re-apply for accreditation here are some things to consider:

Complete the online application and upload all of the supporting documents for the standards **individually** into the DEAP Dashboard. If you are not a member of AADE, you will need to create an account in the DEAP Dashboard. Under the "Sign In" tab, click on the link for the DEAP Dashboard. If you are already a member, or have an existing account, sign in with your email address and password. If you are a new user, enter your email address under "Create an Account" and follow the prompts. Have the following information ready:

- Name, address and phone number of your sponsoring organization (this would be the entity that owns your program)
- Name of your program (this will be the name on your accreditation certificate, so make sure it matches the name you plan to bill under)
- DSMES program Quality Coordinator name and email address
- Name, address, and phone number for any branch or community sites
- Names and credentials for all team members (professional instructors and community health workers)

Additionally, here are some things to consider:

1. Create a folder on your computer and upload all supporting documentation into that folder. Not only does this help you organize before you begin and allows you to easily upload your documents when you start the application, it is also a great place to keep that information if you need to provide it again at a later date.
2. New applications can be started at any time. Data is saved so you can return to the application to complete it when it works for you.
3. Payment can be made at any time. You do not have to complete the application before you make your payment.
4. You may wish to print the screens (right click from your mouse and choose print) and or take a screen print copy before you submit. You cannot change the application once it has been submitted.
5. You will receive an email receipt once the application has been submitted and received.

Here are quick links to the sections of this Instructional Guide:

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New Application



Filling out your DEAP Application is easy by using the Online DEAP Dashboard.

The online system walks you step by step through the process.

Getting Started

Submitting your Application through the online DEAP Dashboard.

1. Go to [https://www.diabeteseducator.org/practice/diabetes-education-accreditation-program-\(deap\)/ready-to-apply-to-deap](https://www.diabeteseducator.org/practice/diabetes-education-accreditation-program-(deap)/ready-to-apply-to-deap) and click on the Start DEAP Application button.

In This Section

Practice

- Project Vision
- Practice Documents
- Educator Tools
- Becoming a Diabetes Educator
- Career Center
- Diabetes Education Accreditation Program (DEAP)
- AADE 7 System®
- AADE CaseShare
- Ask the Reimbursement Expert
- Favorably Reviewed
- Provider Resources
- Providing CE for Your Diabetes Education

Ready to Apply to DEAP

Submitting your application for your program to become accredited is a major step and it's natural to have lots of questions. Did I include everything that is required? Did I interpret the requirements the right way and put together something that will actually get approved? How long will the approval take? When will I be able to start billing?



FAQs

[Expand all](#)

[What is the timeline for submitting my application and achieving accreditation?](#)

[What happens after accreditation?](#)

[What are the steps I need to take to prepare and submit my application?](#)

[Start DEAP Application](#)



You will be asked for your username and password. If you have an AADE member username, enter it in the left side.

If you have never created an account – enter your email address on the right-hand side of the screen.

If you are creating an account, fill out the information and press the continue button.

AADE American Association of Diabetes Educators

Find an Education Program MY AADE NETWORK Online Store Annual Meeting About A

DANA Practice Prevention Education Living with Diabetes Advocacy Research News

New Visitor Registration | [Create an Account](#)

Personal Information

Prefix:

First Name: Required

Middle Name:

Last Name: Required

Organization: Educational Hospital

Title: Diabetes Specialist Required

Organization Address Information

Mailing Address: 11 N. Emerson St. Required

City: IN, Prospect Required

State: Illinois Required

Postal Code: 46050 Required

Country: UNITED STATES Required

Province:

Contact Information

Phone: 312-555-1215 Required UNITED STATES

Ext.:

Fax: 312-555-1111 Required UNITED STATES

Ext.:

Email: DDiv@myeducation.edu

You then need to create a password and press the continue button.

AADE American Association of Diabetes Educators

Find an Education Program MY AADE NETWORK Online Store Annual Meeting About

DANA Practice Prevention Education Living with Diabetes Advocacy Research News

New Visitor Registration | [Create Web Login](#)

Web Login Information

Enter a unique password. Your email address will be your username.

Email address: DDiv@myeducation.edu

In the fields below, create a password and confirm. The password must be: 6-14 characters long; can contain lower and upper case characters; can contain special characters; must contain a number.

New password: Required

Confirm password: Required

The system will then take you to begin your application.

The New Application Menu

	<p>One of the highlights of the new system is a menu system.</p> <p>The menu system will always be on the left-hand side of the application and provides a visual queue as to where you are in the application, by showing checkmarks on any steps that are completed.</p> <p>Each of the steps are clickable links, which means you can easily move between steps as you need to as you work on your application.</p> <p>Also, you do not have to do the steps in the order listed, you can jump around and complete any section, and if you press “Save and Continue” or “Save and Exit”, when you return you’ll see that section completed and can go to another section.</p>
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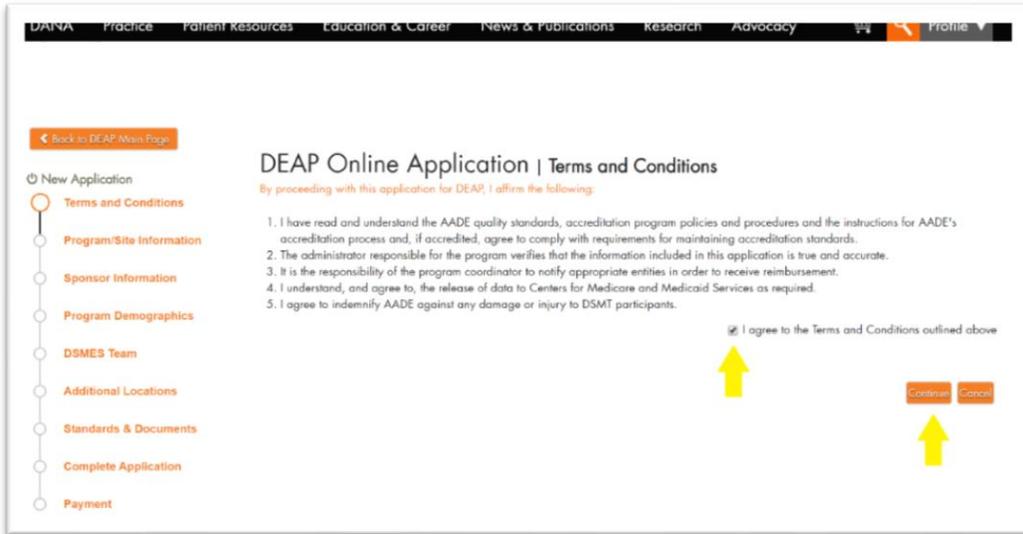
Creating a New Application



Click on “Start New Application”.

Terms and Conditions

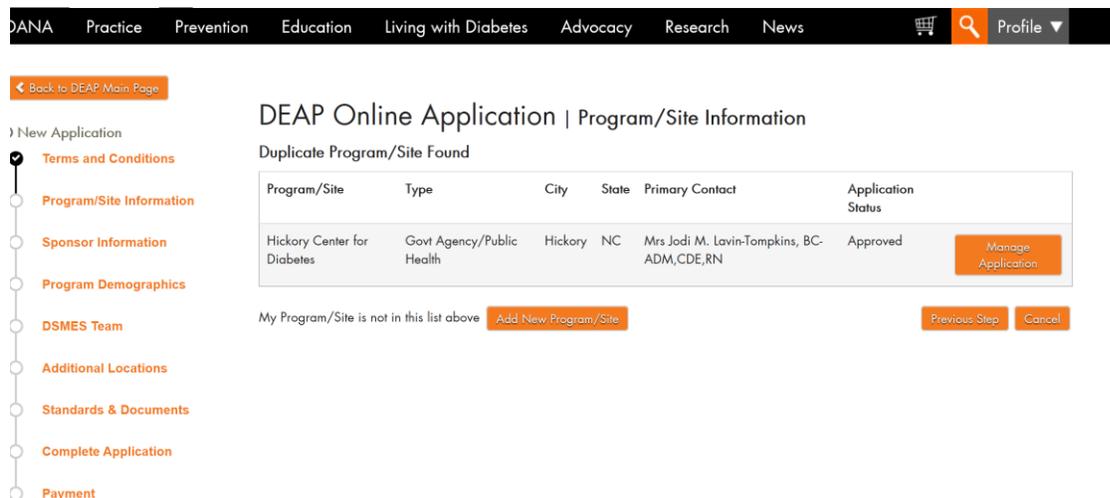
The first step in the application is the Terms and Conditions. Read through the terms and then click on the check box and “Continue”.



Program/Site Information

Enter in your program name and city and state and press search.

The system will then check to see if the program is already registered at AADE and bring back information about the program.



If a program is found, it will be displayed. If it is your application, you can continue the application.

If it is not your program, then click on the Add New Organization Button.

[Back to DEAP Main Page](#)

- New Application
- Terms and Conditions
- Program/Site Information**
- Sponsor Information
- Program Demographics
- DSMES Team
- Additional Locations
- Standards & Documents
- Complete Application
- Payment

DEAP Online Application | Program/Site Information

This is the name that will be on your Medicare Accreditation Certificate and should match your NPI billing entity name (ask your billing specialist). Please select your name carefully, as it effects your billing process.

Program/Site Name: Required

Program/Site Type: Required

Address Line 1: Required

Address Line 2:

City: Required

State: Required

ZIP Code: Required

Country: Required

Phone Type:

Program Phone Number: Required

Phone Extension:

[Save & Continue](#) [Previous Step](#) [Cancel](#)

Enter the Program Name along with the required address and phone information, then press “Save & Continue”.

Sponsor Information

Enter in the Sponsor name and contact information and press “Save and Continue”.

You can use the x to delete what is prepopulated for the name and put in a different name if needed.

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- New Application
- Terms and Conditions
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- Sponsor Information**
- Program Demographics
- DSMES Team
- Additional Locations
- Standards & Documents
- Complete Application
- Payment

DEAP Online Application | Sponsor Information

This is the name of the organization that owns your diabetes education services.

Sponsor Name: Required

Sponsor Street Address: Required

Sponsor City: Required

Sponsor State: Required

Sponsor Zip Code: Required

[Save and Continue](#) [Previous Step](#) [Save and Exit](#)

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- New Application
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DEAP Online Application | Sponsor Information

This is the name of the organization that owns your diabetes education services.

Sponsor Name: Required

Sponsor Street Address: Required

Sponsor City: Required

Sponsor State: Required

Sponsor Zip Code: Required

Save and Continue Previous Step Save and Exit

Program Demographics

The program demographics screen collects information about your program. Enter the information on the screen and press "Save and Continue".

The  icon next to a field provides additional field help.

<p>For example, in a multiple-choice field,</p> <div data-bbox="212 1367 363 1451" style="background-color: #333; color: white; padding: 5px; border-radius: 5px;"> Hold Control key to select more than one value. </div> <p>The help text reminds you that if you hold the control key while you click on items in the multiple-choice field, you can select multiple choices in that field.</p>	<p>Type of Diabetes: Continuous glucose monitoring  Required</p> <p>(choose all that apply)</p> <ul style="list-style-type: none"> Gestational Other Pediatrics Prediabetes Pump training
--	---

Another enhancement is that you can identify your target achievement goals (previously known as benchmarks) at the time of application.

These will be saved and when you complete your annual status report a year later, you will then be able to compare achievement against these targets.

	Healthy Eating	Being Active	Monitoring	Taking Medication	Problem Solving	Reducing Risk	Healthy Coping
Target Percentage of Patient Goal Achievement for Next Year:	<input type="text" value="50"/>	<input type="text" value="50"/>	<input type="text" value="25"/>	<input type="text" value="25"/>	<input type="text" value="50"/>	<input type="text" value="25"/>	<input type="text" value="90"/>
	Required						

You can enter a the same or a different percentage for the Target Achievement Goal for each of the AADE7® self care behaviors.

The entries can be from 0-100, where 0 means that you are not reporting on that behavior and 100 means that you expect 100% of the participants

who select a goal for that behavior will be successful with their goal.

DSMES Team

This screen allows you to enter information about each of your team members.

Start by pressing the “+Add DSMES Team Member” button.

DEAP Online Application | DSMES Team

If you are entering Team members as part of a New Application this is a requirement of Standard 5, so please upload the documents in Standard 5. If it is outside a New Application, please add the documents as follows.

For Professional Instructors: please upload License, Certificate, Proof of Continuing Education.
For Other Healthcare Workers: please upload Resume, Proof of Training, Proof of Continuing Education.

DSMES Team			
Name	Type	Credentials	Certificates
+ Add DSMES Team Member			

Save and Continue Previous Next Exit

This will provide a pop up for you to enter in your team member. Enter the information and press “save”.

Add - Instructor

First Name: Required

Last Name: Required

Worker Type: Required

Credentials: (choose all that apply)

- DO
- DPM
- MD
- NP/CNS
- PA
- PharmD
- RD
- RPh

Certifications: (choose all that apply)

- BCADM
- CDE

Save Cancel

You will then see the team member listed on the screen. Follow the instructions for uploading instructor documents in Standard 5.

[← Back to Profile](#)

DEAP Online Application | DSMES Team

If you are entering Team members as part of a New Application this is a requirement of Standard 5, so please upload the documents in Standard 5. If it is outside a New Application, please add the documents as follows.

For Professional Instructors: please upload License, Certificate, Proof of Continuing Education.
For Other Healthcare Workers: please upload Resume, Proof of Training, Proof of Continuing Education.

DSMES Team [+ Add DSMES Team Member](#)

Name	Type	Credentials	Certificates
Payton Pupmaster	Professional Instructor	DPM, PharmD	BCADM

[+ Upload Document](#) [Edit](#) [Delete](#)

[Save and Continue](#) [Revisit Step](#) [Save and Exit](#)

More on the DSMES Team

On this screen you can now:

- Add DSMES Team Member
- Edit a team member
- Delete a team member
- When you are finished, Press “Save and Continue”.

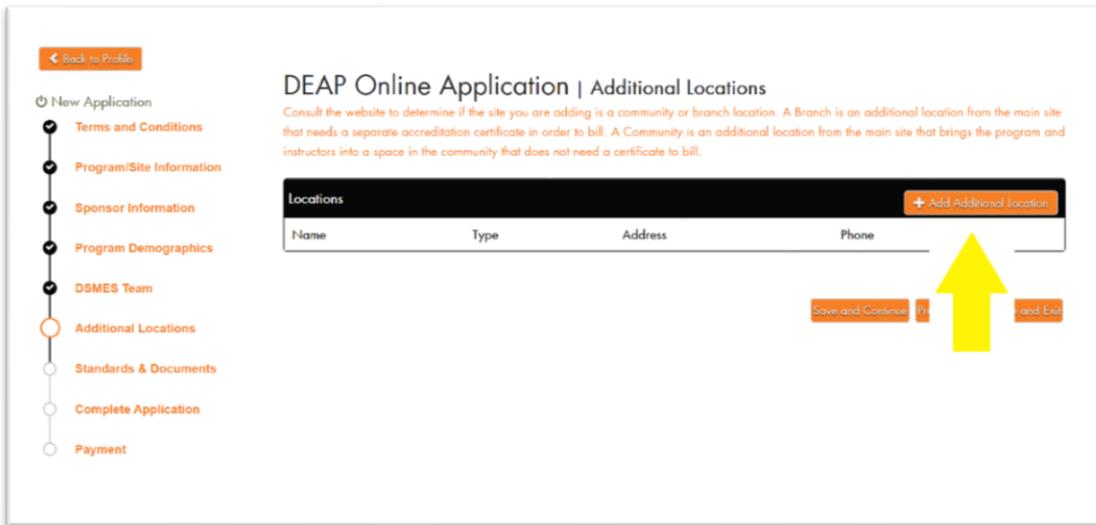
Note: if you need to gather more documentation, you can press “Save and Exit” and return to this screen at a later time.

Additional Locations

This screen allows you to enter branch locations or community sites.

It is important to determine what type of site you are adding, so consult the chart on this page [https://www.diabeteseducator.org/practice/diabetes-education-accreditation-program-\(deap\)/additional-sites](https://www.diabeteseducator.org/practice/diabetes-education-accreditation-program-(deap)/additional-sites) for more information.

There is a fee to add a branch location. It will appear on your payment screen. To start, press the “+Add Additional Locations” button.



You will then get the Location pop-up screen and can enter in information about the location.

Add - Additional Location

Location Name: Faith Community Center **Required**

Type: Community **Required**

Address Line 1: 15 Benjamin Street **Required**

Address Line 2:

City: Mt. Prospect **Required**

State: Illinois **Required**

Zip Code: 60056 **Required**

Phone Number: 847-577-0905 **Required**

Type of Location: Community-Based Program

Type of Location Detail: Religious

Target Population: Type 2 Diabetes

Unique Site Feature:
(choose all that apply)

- Print Augmentation
- Low Literacy Education Tools
- Transportation Opportunities
- Languages other than English
- Interpreters
- Physical Plant Enhancements

Save Cancel

Press "Save" when completed. You will then have the ability to add more locations, or edit/delete the locaitons you have already updated.

When you are finished, press "Save and Continue".

DANA Practice Patient Resources Education & Career News & Publications Research Advocacy Profile

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DEAP Online Application | Additional Locations

Consult the website to determine if the site you are adding is a community or branch location. A Branch is an additional location from the main site that needs a separate accreditation certificate in order to bill. A Community is an additional location from the main site that brings the program and instructors into a space in the community that does not need a certificate to bill.

Locations				+ Add Additional Location
Name	Type	Address	Phone	
Faith Community Center	Community	15 Benjamin Street, Mt. Prospect Il 60056	847-577-0905	Edit Delete

[Save and Continue](#) [Previous Step](#) [Save and Exit](#)

Standards & Documents

You will have the ability to add documents for each individual standard. You will not be able to submit your application without uploading at least one document for each standard.

You will be able to upload multiple documents for each standard if needed. This section has a secondary menu that lists each standard.

When you complete a specific Standard, you will see a checkbox so you can keep track of which ones you have done and what you still need to complete.

To start, simply click on a standard in the list.

The screenshot shows the 'Standards & Documents' section of the DEAP Online Application. At the top, a navigation bar includes 'DANA', 'Practice', 'Patient Resources', 'Education & Career', 'News & Publications', 'Research', 'Advocacy', and 'Profile'. Below the navigation bar, a 'Back to Profile' button is visible. The main heading is 'DEAP Online Application | Standards & Documents'. A sub-heading states: 'Each Standard Requires you to upload documents. You may upload your documents and come back to this screen until you submit.' Below this, a note says: 'Please follow the links below to provide the supporting documents for each standard.' On the left, a vertical progress bar shows steps from 'New Application' to 'Payment', with 'Standards & Documents' highlighted. The main content area lists ten standards, each with a circular icon: Standard 1 - Internal Structure, Standard 2 - Stakeholder Input, Standard 3 - Population Served, Standard 4 - Quality Coordinator, Standard 5 - DSMES Team, Standard 6 - Curriculum, Standard 7 - Individualization, Standard 8 - Ongoing Support, Standard 9 - Participant Progress, and Standard 10 - Quality Improvement. To the right of the standards list, there is a 'Select a standard to start' button and a 'DIRECTIONS:' section with four numbered steps: 1. Prepare documents for each of the sub-standard below, 2. Upload documents, 3. You can change/delete documents until submission is final, and 4. Preferred format is PDF and should not exceed 250MB. At the bottom right, there are three buttons: 'Save and Continue', 'Previous Step', and 'Save and Exit'.

Each standard is setup the same way.

The actual standard is listed and each of the sub-standard requirements are listed with some guidance as the type of documentation that is necessary to provide for that standard.

DAANA Practice Patient Resources Education & Career News & Publications Research Advocacy Profile

[← Back to Profile](#)

DEAP Online Application | Standards & Documents

Each Standard Requires you to upload documents. You may upload your documents and come back to this screen until you submit.

Please follow the links below to provide the supporting documents for each standard.

- Standard 1 - Internal Structure
- Standard 2 - Stakeholder Input
- Standard 3 - Population Served
- Standard 4 - Quality Coordinator
- Standard 5 - DSMES Team
- Standard 6 - Curriculum
- Standard 7 - Individualization
- Standard 8 - Ongoing Support
- Standard 9 - Participant Progress
- Standard 10 - Quality Improvement

Standard 1 - Internal Structure

The provider(s) of DSMES services will define and document a mission statement and goals. The DSMES services are incorporated within the organization – large, small, or independently operated.

DIRECTIONS:

1. Prepare documents for each of the sub-standard below
2. Upload documents
3. You can change/delete documents until submission is final
4. Preferred format is PDF and should not exceed 250MB

For each Sub Standard you will need to upload at least one document. Once you have done this for each substandard a check mark will appear next to the Standard number indicating that you have completed each upload and satisfied the requirements of that standard.

1.1 - Organizational chart (Required)

Please upload an organizational chart showing where the DSMES services fit into the organization

[+ Upload Document](#)

1.2 - Mission statement and program goals (Required)

Please upload your mission statement and program goals

[+ Upload Document](#)

1.3 - Signed letter of support (Required)

Please upload a signed letter of support from your sponsoring organization/owner(s)

[+ Upload Document](#)

[Save and Continue](#) [Previous Step](#) [Save and Exit](#)

The documents that are uploaded are then displayed by each standard. When you have uploaded documents in each sub-standard, press “Save and Continue” to go to the next standard.

To begin, press the “+Upload Document” button.

You will be presented with the following pop-up screen:

Add - Upload Instructor Document

Customer: Emerson District Diabetes Program

Document: Browse...

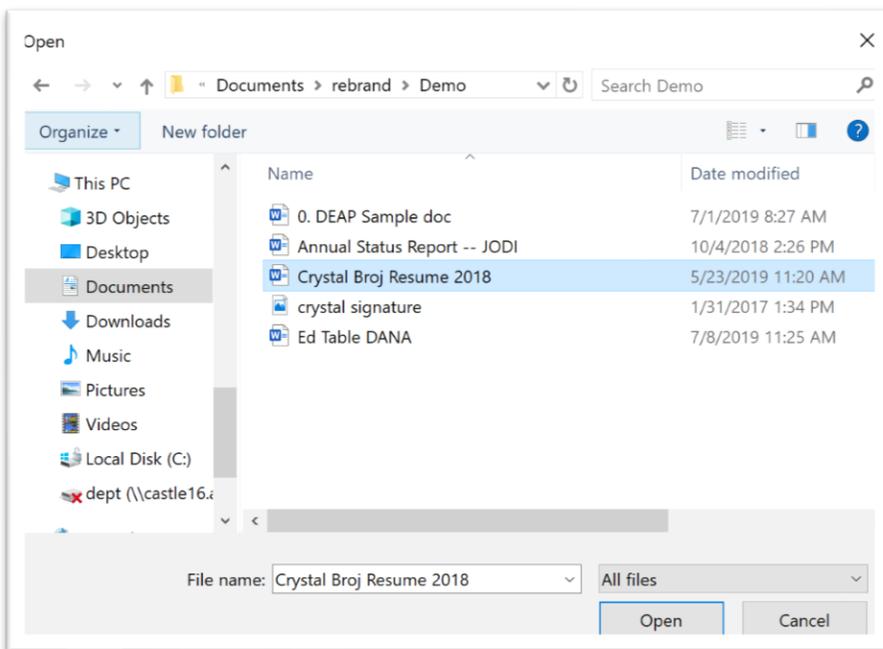
Document Name: Required

Document Description:

Save Cancel

In order to upload the document, press the browse button. This will bring up a file picker that will scan drives that you have access to.

Best Practice Tip: Put all documents for the application in one folder that is easily accessible from your computer so you can upload these files quickly.



Click on the file that you are uploading and press the "Open" button.

Add - Upload Instructor Document

Customer: Emerson District Diabetes Program

Document: C:\Users\cbroj\Documents Browse...

Document Name: Resume Required

Document Description: This is Payton's resume.

Save Cancel

When you have given the document a name, press the Save button.

Note: You do not have to upload all the documentation at once. You can “Save and Exit” and return to the application at another time.

You do not have to upload all the documentation for all the sub-standards in a Standard at once.

If you press “Save and Continue”, what ever you have uploaded will be saved and will be displayed when you return.

When you press “Save” you will then see your document listed under the specific standard.

For each Sub Standard you will need to upload at least one document. Once you have done this for each substandard a check mark will appear next to the Standard number indicating that you have completed each upload and satisfied the requirements of that standard.

1.1 - Organizational chart (Required)

Please upload an organizational chart showing where the DSMES services fit into the organization

+ Upload Document

 Organization Chart

✕ Delete

1.2 - Mission statement and program goals (Required)

Please upload your mission statement and program goals

+ Upload Document

1.3 - Signed letter of support (Required)

Please upload a signed letter of support from your sponsoring organization/owner(s)

+ Upload Document

Save and Continue

Previous Step

Save and Exit

You can add multiple documents – simply click the upload document button again to add another document.

You will then see both documents listed under the specific standard.

4.1 - Quality Coordinator resume (Required)

Please upload Quality Coordinator resume

+ Upload Document

 more documentation

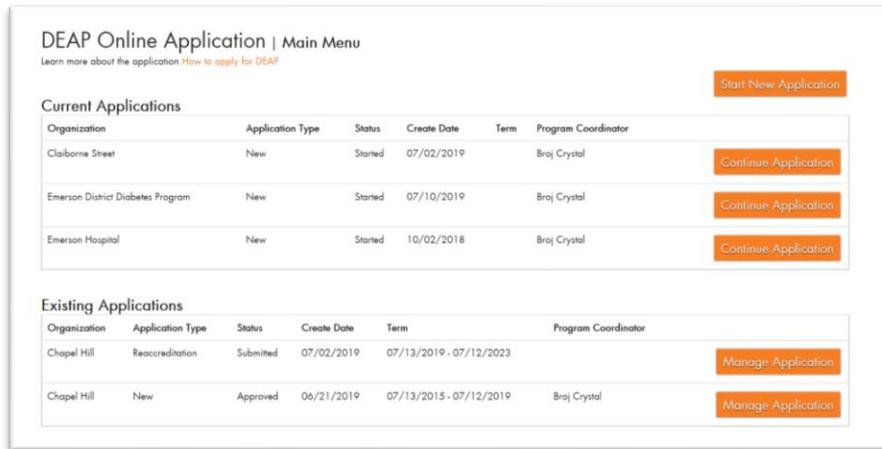
✕ Delete

 test

✕ Delete

Leaving an application and returning

If you decide to “Save and Exit” and return later, when you return to the DEAP dashboard, you will see any applications that you have in process listed in the dashboard.



The screenshot displays the 'DEAP Online Application | Main Menu' dashboard. At the top right, there is a 'Start New Application' button. Below this, the 'Current Applications' section contains a table with three rows of active applications, each with a 'Continue Application' button. The 'Existing Applications' section contains a table with two rows of past applications, each with a 'Manage Application' button.

Organization	Application Type	Status	Create Date	Term	Program Coordinator	Action
Claborn Street	New	Started	07/02/2019		Broj Crystal	Continue Application
Emerson District Diabetes Program	New	Started	07/10/2019		Broj Crystal	Continue Application
Emerson Hospital	New	Started	10/02/2018		Broj Crystal	Continue Application

Organization	Application Type	Status	Create Date	Term	Program Coordinator	Action
Chapel Hill	Reaccreditation	Submitted	07/02/2019	07/13/2019 - 07/12/2023		Manage Application
Chapel Hill	New	Approved	06/21/2019	07/13/2015 - 07/12/2019	Broj Crystal	Manage Application

When you click the “Continue Application” button you will be taken to the Application Profile screen:

[← Back to DEAP Main Page](#)

DEAP Program Profile | Emerson Hospital

Program Coordinator: Broj Crystal
Status: Started
Create Date: 10/02/2018
Term:

New Application



Terms and Conditions



Program/Site Information

Program/Site Name: Emerson Hospital
Program/Site Type: Hospital/Health Care System
Program Coordinator: Crystal Broj, BS



Sponsor Information

Name: #Emerson Hospital
Address: 11 N. Emerson, Mt. Prospect IL 60056



Program Demographics



DSMES Team

Name	Type	Credentials	Certificates
Carolyn Gedes	Professional Instructor		
Leslie Kolb	Professional Instructor		BCADM,CDE



Additional Locations

Name	Type	Address	Phone
No Location provided			



Standards & Documents



Standard 1 - Internal Structure



Standard 2 - Stakeholder Input



Standard 3 - Population Served



Standard 4 - Quality Coordinator



Standard 5 - DSMES Team



Standard 6 - Curriculum



Standard 7 - Individualization



Standard 8 - Ongoing Support



Standard 9 - Participant Progress



Standard 10 - Quality Improvement



Complete Application



Payment

From here you can click on any orange heading and be taken back into that part of the application to continue.

Again, the checkmarks are displayed so you can follow your progress.

When all standards are completed, you will see all the checkboxes completed on the standards menu.

[← Back to Profile](#)

New Application

- ✓ Terms and Conditions
- ✓ Program/Site Information
- ✓ Sponsor Information
- ✓ Program Demographics
- ✓ DSMES Team
- ✓ Additional Locations
- ✓ Standards & Documents
- Complete Application
- Payment

DEAP Online Application | Standards & Documents

Each Standard Requires you to upload documents. You may upload your documents and come back to this screen until you submit.

Please follow the links below to provide the supporting documents for each standard.

- ✓ [Standard 1 - Internal Structure](#)
- ✓ [Standard 2 - Stakeholder Input](#)
- ✓ [Standard 3 - Population Served](#)
- ✓ [Standard 4 - Quality Coordinator](#)
- ✓ [Standard 5 - DSMES Team](#)
- ✓ [Standard 6 - Curriculum](#)
- ✓ [Standard 7 - Individualization](#)
- ✓ [Standard 8 - Ongoing Support](#)
- ✓ [Standard 9 - Participant Progress](#)
- ✓ [Standard 10 - Quality Improvement](#)

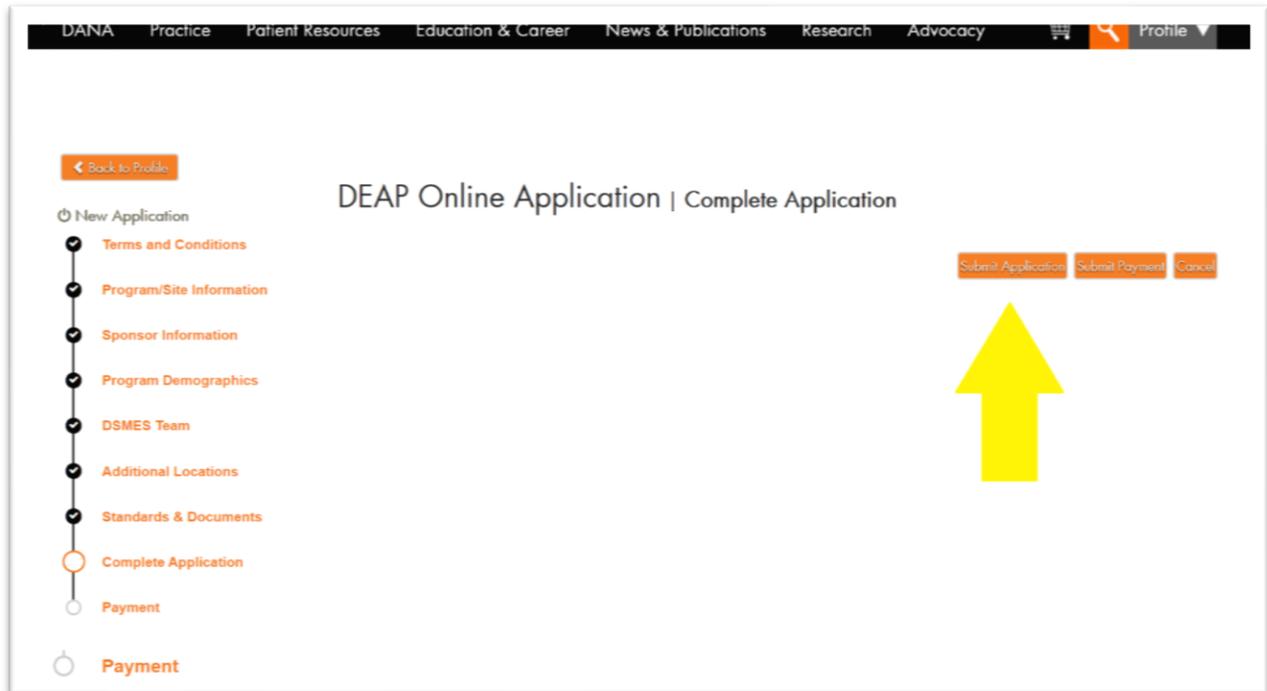
🔍 Select a standard to start

DIRECTIONS:

1. Prepare documents for each of the sub-standard below
2. Upload documents
3. You can change/delete documents until submission is final
4. Preferred format is PDF and should not exceed 250MB

[Save and Continue](#) [Previous Step](#) [Save and Exit](#)

Complete Application



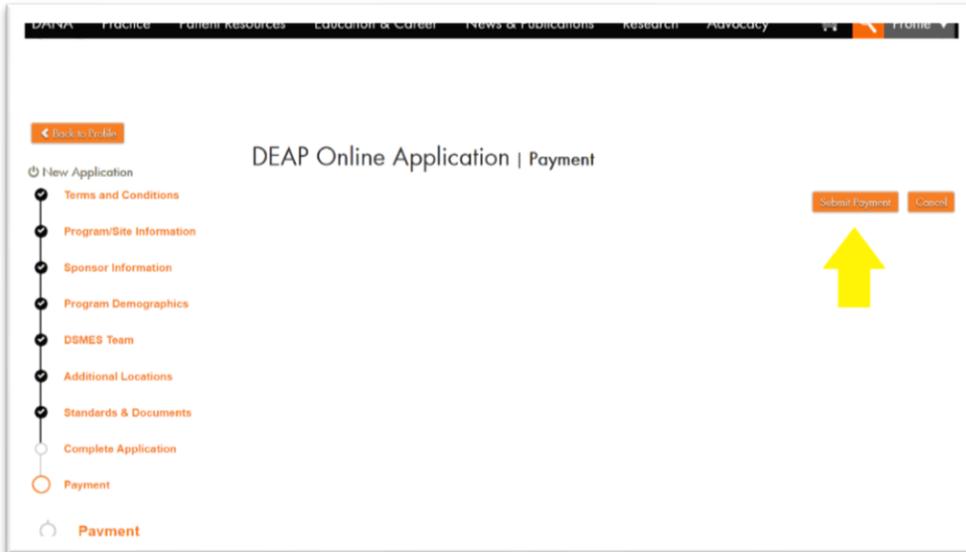
When all steps have been completed, press the “Submit Application” button. The “Submit Application” button will not appear unless every section of the application is completed.

Best Practice: You may wish to print the screens (right click from your mouse and choose print) and or take a screen shot before you submit. You cannot change the application once it has been submitted.

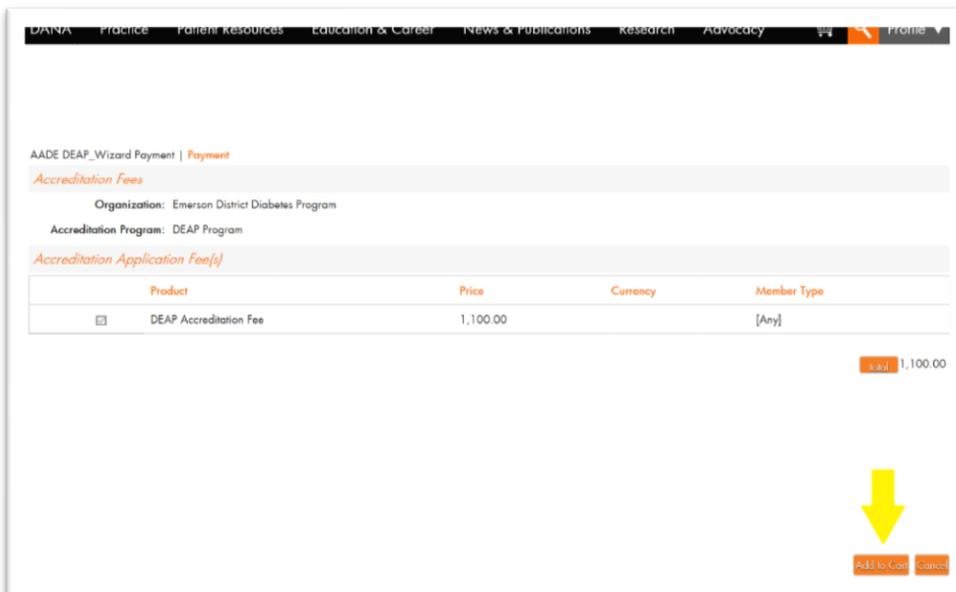
Submit Payment

You can submit payment any time. However, your application will not be sent to review until both the application with supporting documents AND the payment have been submitted.

To submit payment for your application, press the submit payment button.



The payment invoice for the application will be presented on your screen.



Press the “Add to Cart” button to proceed.

Shopping Cart | [View](#)

discount	net total	price	quantity	item
0.00	1100.00	1100.00	1.0000	DEAP Accreditation Fee

Sub total: 1100.00

Total discount: 0.00

Total tax: 0.00

Total: 1100.00

Discount: (please use UPPERCASE)

Source:

Code:

discounts applied:



The full shopping cart will display, press “Check out” to enter payment information.

Enter your payment information and press “Continue”. You can pay online with a credit card or click “I have sent payment” if sending a check.

Shopping Cart | [Payment](#)

Customer Information

Customer: Emerson District Diabetes Program

Use this phone: (847)226-6380 (847)2266380

Use this email: Please select

Billing Information

Bill to: Emerson District Diabetes Program Susie Sunshine

Billing contact: Broj Crystal /Program Coordinator

Pick your billing address: Work: 200 W Madison St **Required**

Bill to: Emerson District Diabetes Program
200 W Madison St
Mt. Prospect, IL 60006
UNITED STATES

Ship to: Emerson District Diabetes Program
200 W Madison St
Mt. Prospect, IL 60006
UNITED STATES

Payment Information

I have sent my payment:

Payment amount: 1100.00

Payment method: Visa

Cardholder's name: CRYSTAL BROJ

Credit card number: 411111111111

Expiration date: 2021/02

Security code: 111

Invoice total: 1100.00



The final screen will be shown for your review. Press "Submit for Review".

Shopping Cart | [Confirm your order](#)

item	quantity	price	Tax	Shipping	Discount	net total	Paid Amount	Balance Due
DEAP Accreditation Fee	1.0000	1100.00	0.00	0.00	0.00	1100.00	0.00	1100.00

The DEAP application is not submitted for review until the "Submit for Review" button is clicked.

Billing/Shipping Information

Customer name: Emerson District Diabetes Program
Phone: (847)226-6380 (8472266380)
Email:

Billing name: Susie Sunshine
Contact: Crystal Broj, BS

Ship to: Emerson District Diabetes Program
200 W Madison St
Mt. Prospect, IL 60606
UNITED STATES

Bill to: Emerson District Diabetes Program
200 W Madison St
Mt. Prospect, IL 60606
UNITED STATES

Payment Information

Credit to apply: 0.00
Net applied: 1100.00
Net-balance: 0.00
Payment amount: 1100.00
Payment method: Visa
Cardholder's name: CRYSTAL BROJ
Credit Card Number: 41*****1111
Expiration date: 2021/02

Total discount: 0.00
Total tax: 0.00
Total shipping: 0.00
Net total: 1100.00

Send confirmation by email

97285
Enter code above:
97285

[Edit Payment](#) [Submit for Review](#)

You will receive a completion screen and the process is complete.

You will also receive an email receipt.

Program Profile

This dashboard allows you to see all the information about your program and to update various areas.

DEAP Program Profile | Chapel Hill

Program Coordinator: Broj Crystal
 Status: Approved
 Create Date: 06/21/2019
 Term: 07/13/2015 - 07/12/2019

Action Links

- [Reprint DEAP Certificate](#)
- [Change Program Name](#)
- [Adding/Deleting Locations](#)
- [Change Program Coordinator](#)
- [Change Sponsor Information](#)
- [Change Program/Branch Contact Information](#)

New Application

Terms and Conditions

Program/Site Information

Program/Site Name: Chapel Hill
 Program/Site Type: Hospital/Health Care System
 Program Coordinator: Crystal Broj, BS

Sponsor Information

Name: Chapel Hill
 Address: 23788 Hearthsides Dr, Deer Park IL 60010

Program Demographics

DSMES Team

Name	Type	Credentials	Certificates	
Annabelle Anybody	Other HealthCare Worker	Other:volunteer		+ ✎ ✕
Stanley Dog	Professional Instructor	RN	CDE	+ ✎ ✕
Dummy Resume				✕
Credentials				✕
Susie Sunshine	Professional Instructor	PA	CDE	+ ✎ ✕
Resume				✕

Additional Locations

Name	Type	Address	Phone
Michigan Ave Clinic	Community	5108 Michigan Ave, Nashville TN 37103	3125551221

Annual Status Report

Year	Status	Last Modified	
2020	Submitted	07/08/2019	+ 📄

Target Achievement Goal

Year	Last Modified	
2021	07/08/2019	✎
2020	07/01/2019	✎

Additional Documents

Document	Upload Date	
No Additional Document provided		

Annual Review

Year	Status	Sub-Status	Notifications Sent	Review Notes	Rpt Rec'd Date	Rpt Doc
No Annual Review Data						

- ✓ **Standards & Documents**
 - ✓ Standard 1 - Internal Structure
 - ✓ Standard 2 - Stakeholder Input
 - ✓ Standard 3 - Population Served
 - ✓ Standard 4 - Quality Coordinator
 - ✓ Standard 5 - DSMES Team
 - ✓ Standard 6 - Curriculum
 - ✓ Standard 7 - Individualization
 - ✓ Standard 8 - Ongoing Support
 - ✓ Standard 9 - Participant Progress
 - ✓ Standard 10 - Quality Improvement
- ✓ **Complete Application**
- ✓ **Payment**
 -  Invoice 1758363

[View Invoice](#)

One of the new features is the ability to view and print the invoice for the application from the profile page.

Click on the Invoice in the payment section of the profile, and it will open a PDF copy of the invoice.

- ✓ **Payment**
 -  Invoice 1758363

Customer #: 0007124480
 Crystal Broj, BS
 Chapel Hill
 23788 Hearthside Dr
 Deer Park, IL 60010

Receipt
 Invoice #: 1758363
 Invoice Date: 07/01/2019

Description	Quantity	Price	Discount	Amount
DEAP Accreditation Fee	1	\$1,100.00	\$0.00	\$1,100.00

Last Payment On This Invoice: Paid by MasterCard on 07/01/2019

Invoice Total	\$1,100.00
Taxes	\$0.00
Amount Paid	\$1,100.00
PLEASE PAY	\$0.00

PLEASE DETACH AND REMIT WITH YOUR PAYMENT

Invoice#: 1758363
 Customer #: 0007124480

Crystal Broj, BS
 Chapel Hill
 23788 Hearthside Dr
 Deer Park, IL 60010

Select Payment Method

Check Enclosed

Card Provider _____ Exp Date ____/____/____

Card # _____ CVV _____

Card Holder's Name _____

Card Holder's Signature _____

Remit Payment To: _____

Total Due: **\$0.00**
 Amt Remitted: _____

Additional Documents

Another new feature is to add additional documents at any time during the year.

You might need to provide clarification for a review of your application or an audit – you can do that from the Profile page under the Additional Documents section.

Additional Documents

Document	Upload Date	+
No Additional Document provided		

Target Achievement Goals

Another new feature is the ability to add next year's Target Achievement Goals and go back to update them at any time until you complete your Annual Status Report.

The Target Achievement Goals are your benchmarks you are comparing your outcomes to in your Annual Status Report.

In this new version, you set your Targets for the next year at the time you complete your annual status report.

Edit - Target Goal

Please enter your target Achievement Goals for Behavior Change. These will be automatically displayed in your annual status report.

Year: 2021

AADE 7 Category	Target Percentage of Patient Goal Achievement
Healthy Eating Goal:	65.00 Required
Being Active Goal:	10.00 Required
Monitoring Goal:	20.00 Required
Taking Medication goal:	20.00 Required
Problem Solving goal:	10.00 Required
Reducing Risks Goal:	10.00 Required
Healthy Coping Goal:	30.00 Required

Save Cancel

Additional Team Members

You can also add additional team members throughout the year.

Program Demographics

DSMES Team Add Team Member

Name	Type	Credentials	Certificates	
Annabelle Anybody	Other HealthCare Worker	Other:volunteer		+ ✎ ✕
Stanley Dog	Professional Instructor	RN	CDE	+ ✎ ✕
	Dummy Resume			✕
	Credentials			✕
Susie Sunshine	Professional Instructor	PA	CDE	+ ✎ ✕
	Resume			✕

Or add additional documents for team members (like additional certifications or proof of training).