
Blue Circle Health announces expansion of virtual T1D program to five additional states, for a total of 16 states with access to the platform – October 24, 2025

Massachusetts, Connecticut, Pennsylvania, Virginia, and Kentucky will gain access to Blue Circle health, joining 11 states in the eastern US plus Iowa and Missouri

Blue Circle Health just [announced](#) that five additional states will gain access to its free virtual care, education, and support program for adults with T1D. Massachusetts, Connecticut, Pennsylvania, Virginia, and Kentucky will join 11 US states that already have program access, primarily in the eastern US and also including Iowa and Missouri. Individuals with T1D who are 18 years or older and speak either English or Spanish are eligible to [enroll](#) in Blue Circle Health's patient education program. The organization develops tailored care plans and provides up to six months of multidisciplinary educational programming for participants, integrating holistic support supplemental to patients' existing in-person care teams or "medical homes." While establishing long-term habits is the goal of Blue Circle Health, patients also have the opportunity to re-enroll one year after initial enrollment in the program if needed to sustain new behaviors. Funding for the program is provided by The Leona M. and Harry B. Helmsley Charitable Trust through a [\\$45 million grant](#) provided in 2021 that has since been renewed.

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Blue Circle Health's program integrates with existing in-person care teams and centers patient-provider trust

Blue Circle Health's services include endocrinology care, diabetes education, insurance navigation assistance, social work, diabetes supportive counseling, and connection to peer and community support networks. For eligible participants, it also offers a CGM trial program and prescription assistance program for T1D medications and supplies.

Florida, Maine, Vermont, Delaware, Ohio, Alabama, Missouri, New Hampshire, Mississippi, Iowa, and Louisiana received access to Blue Circle Health between [September 2022](#) and [July 2025](#), with the full program officially launching in January 2024. With this addition of Massachusetts, Connecticut, Pennsylvania, Virginia, and Kentucky, approximately [35%](#) of the US population is now eligible for Blue Circle Health. Many of these program expansions have come to states with limited access to diabetes specialists – in [Iowa](#), for example, just 13 of the 99 counties in the state have practicing endocrinologists, and we imagine demand for their services will continue to go up.

Patient-provider trust is foundational to the Blue Circle Health model

Blue Circle Health's model drew inspiration from two programs that involve diabetes coaches: (i) the [ECHO](#) (Extension for Community Healthcare Outcomes) Diabetes program led by Stanford and University of Florida; and (ii) the Novel Interventions in Children's Healthcare ([NICH](#)) program led by [Dr. Michael Harris](#) of Oregon Health and Science University. According to Blue Circle Health, only 6.5% of people with T1D on commercial insurance plans receive Diabetes Self-Management Education and Support (DSMES), a number that drops to approximately 5% among those on Medicare or Medicaid. Recognizing the importance of DSMES is foundational to Blue Circle Health's philosophy.

Blue Circle Health's model works to establish early trust with patients and establish long-term care and sustained patient-provider relationships (with primary care providers or endocrinologists, specifically). Blue Circle Health uses

T1D support guides, all of whom have T1D themselves, to “[establish trust](#) with patients via a singular point of contact throughout their care.” Blue Circle Health reports that nearly 1,000 people have enrolled in its program to date.

Blue Circle Health offers a breadth of services including social support in addition to medical care

With an emphasis on a whole-person approach, participants in Blue Circle Health’s virtual program have access to:

- Endocrinologists and nurse practitioners who can adjust insulin, refill prescriptions and supplies, and prescribe CGMs;
- Insurance “navigators” who help patients understand their insurance coverage and can help connect them to enrollment support;
- Social workers, who can provide counseling for short-term diabetes distress and refer individuals to community resources to address housing, employment, and food access;
- One-on-one peer support guides;
- Registered dietitians and certified diabetes educators; and
- In cases where complication management is essential for care, connections may be offered to other providers.

Close Concerns’ Questions

1. How has Blue Circle Health chosen the states for expansion?

“We are focused on ET and CST states right now in order to be able to offer care at convenient times for our participants (between 8am-8pm ET). In terms of how we have chosen which states to expand to within those two time zones, we’re at the mercy of state regulatory and licensing procedures. As each state gives us the necessary permissions, we go live.”

2. How can continuity of patient care be maintained beyond the six-month program model?

“Blue Circle Health provides an empowerment program - not a replacement for participants’ long-term diabetes care. Think of it as a diabetes self management education program but with additional services included (DSMES+). Everything we do from enrollment to program completion (which we call “Full Circle”) is designed to provide the skills, education, confidence, and access to medication, insurance, and supplies people need to live better lives with this life long condition.

For example:

- We ask, “Do you have or are you willing to be connected with a primary care physician or endocrinologist,” as a prerequisite for enrollment. If they don’t have one, that’s one of the first things we help with.
- We communicate with patients’ existing care teams via clinical notes and are available to speak with patients’ care teams. We also invite all clinicians to attend our monthly Clinical Partner Meetings in which we share program updates, what we’re learning, participant stories, and we gather helpful feedback from our referring clinicians.
- Education is at the heart of our program and the entire team works to help people gain life-long skills.
- We focus on establishing sustainable access to insurance, medication, and supplies throughout our program.
- Our Prescription Assistance Program provides financial support, to those who qualify, to cover copays for medications and supplies. This card lasts for one year or until the support is spent (i.e., beyond the time people are in the program).
- We extend the program for those in need and re-enrollment after 1 year from the original enrollment date is available.
- Connecting people to community is an emphasis - our ongoing virtual and in-person community events as well as those hosted by other T1D-focused organizations.”

3. How does Blue Circle Health establish awareness of its program for people with T1D? Which forms of promotion have been the most successful thus far?

“Blue Circle Health establishes awareness through a multi-channel outreach approach that involves outreach to healthcare providers and organizations, people living with T1D directly, and fellow nonprofit organizations. On the provider side, the team conducts direct outreach to clinics, hospitals, individual providers, and exhibits at local and national conferences. Direct-to-patient outreach includes partnering with other T1D nonprofit organizations, social media, virtual webinars, and attending community events. Additional awareness comes through listings on trusted diabetes resource platforms such as GetInsulin.org and the ADCES financial accessibility toolkit, media coverage, and word-of-mouth referrals from participants and partners.”

--by Nour Khachemoune, Monica Oxenreiter, Jeremy Alkire, and Kelly Close