

Integrating Patient Identification and Diabetes Prevention Program Referral into Clinical Systems

Karen Kmetik, PhD

Group Vice President, Improving Health Outcomes

American Medical Association (AMA)



Building Virginia's Diabetes Prevention
System: Engagement Meeting

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Disclosure Statement

No disclosures to report.

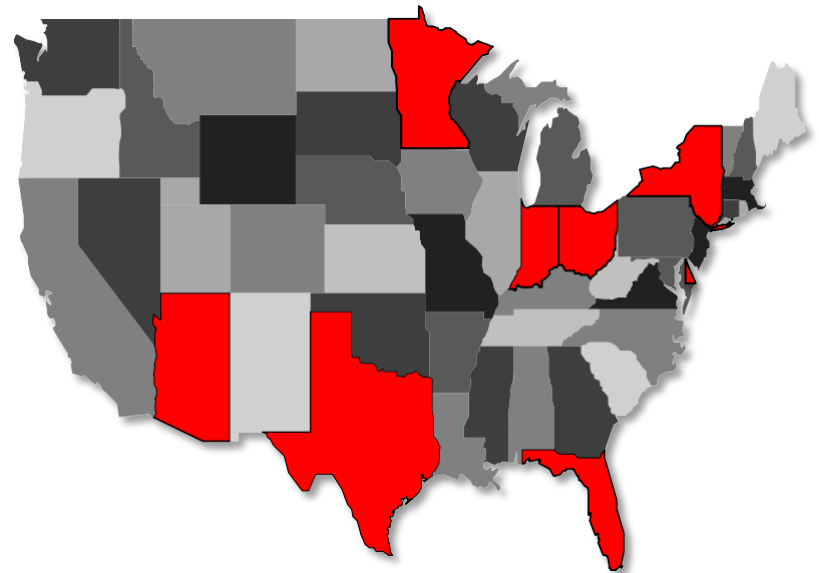
Our goal

Primary care physicians and teams in all 50 states routinely identifying at-risk patients, referring them to a CDC-recognized lifestyle change program, and supporting them through enrollment and completion of the program.

Where we started

AMA collaboration with Y-USA under CMMI award

- Helped connect 26 clinical practices to local YMCA-based programs
- Helped refer >5500 patients with prediabetes → >1,000 enrolled
- Supported clinical practices with screening, testing and referral

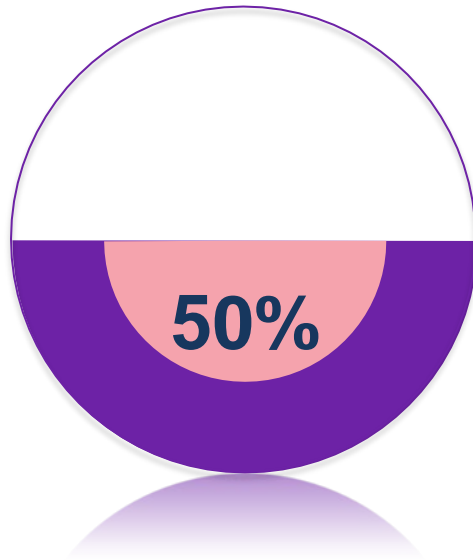


AZ, DE, FL, IN, MN, NY, OH, TX

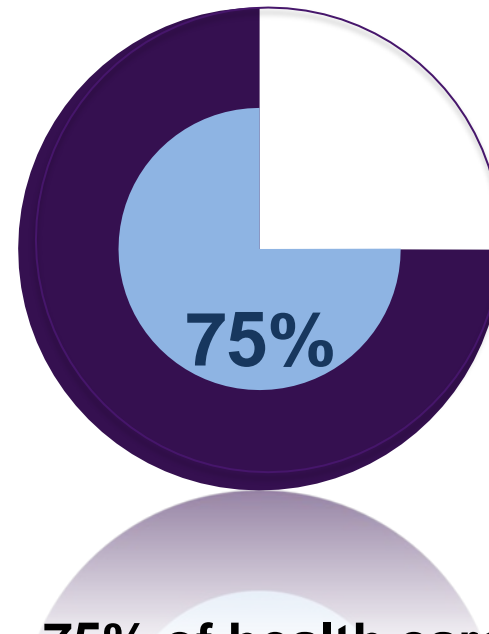
Sharpening our message to physicians and health care teams

- Alarming rise in diabetes prevalence and complication rate (local rates)
- Growing availability of community-based and online interventions
 - Strong evidence base, easily standardized, highly effective
- Well organized, government-led prevention framework
 - Infrastructure, setting standards, assuring program fidelity
- Clear recommendations from USPSTF and CPSTF
- Growing coverage by private and public insurers, including CMS
- Standardized EHR queries available
- Relevant in value-based purchasing

Chronic disease impact on clinical practice



**50% of visits to
primary care**
are for chronic disease
management*



**~75% of health care
spending**
is due to chronic
conditions†

*National Ambulatory Medical Care Survey: 2010 Summary Tables. Table 16. Presence of selected chronic conditions at office visits, by patient age and sex: United States, 2010

† Robert Wood Johnson Foundation. "Chronic Care: Making the Case for Ongoing Care." February 2010

Diabetes impact on clinical practice

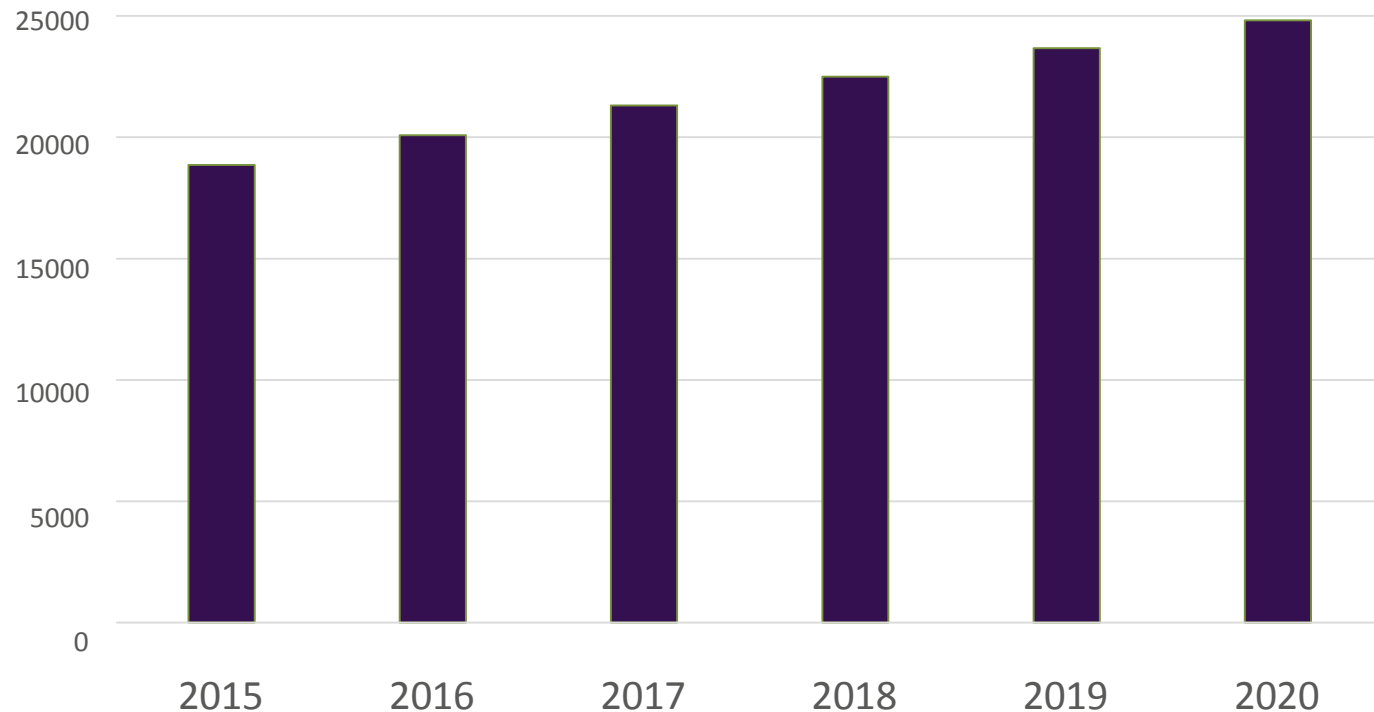


One-third of patients over 18 in the average primary care practice have prediabetes*

*Mainous III A, Tanner R, Baker R, *Prediabetes Diagnosis and Treatment in Primary Care*, J Am Board Fam Med March-April 2016 29:283-285

Future impact on clinical practice

Over the next 5 years, a typical large clinical practice could experience a **32% increase** in the number of patients with diabetes



Based on a panel size of approximately 100,000 patients

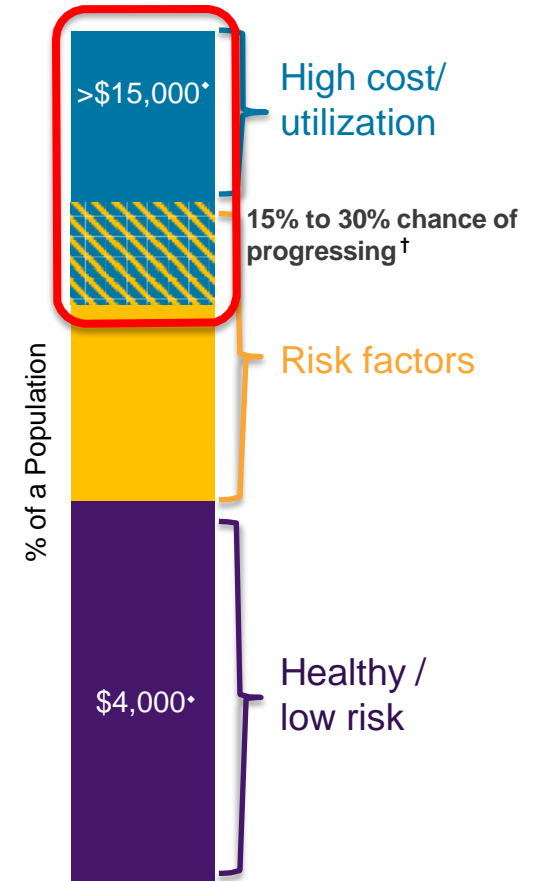
Slide courtesy of Ronald T. Ackermann, MD, MPH, Northwestern University Feinberg School of Medicine

Positioning within population health model

Prevention is moving beyond keeping the healthy well and *targeting those with identifiable risk factors to prevent progression*

- ✓ Alternative Payment Models
- ✓ Community Needs Assessment
- ✓ Merit-Based Incentive Payment System

Stratifying a population



* Health Care Cost Institutes. "Per Capita Health Care Spending on Diabetes: 2009-2013." 2015.

†American Diabetes Association. "Standards of medical care in diabetes—2013." February 2010.

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Healthcare system approaches to diabetes prevention

System-wide Plan

- Network of physicians leaders
- All physician/team education (CME)
- EHR query/registry to identify patients
- Pilot → rollout
- Relationships with DPPs
- Mechanics of referrals and feedback

System-owned Health Plan

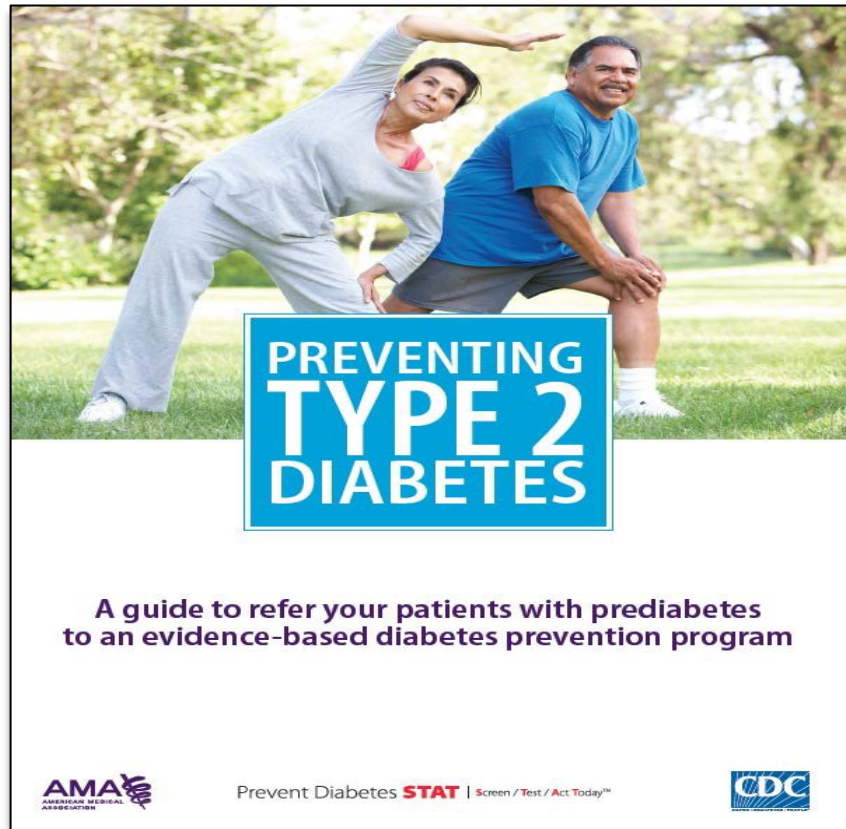
- Business case

System-owned DPP (new)

- How to start a pathway for CDC recognition

Next generation products (*easy to do*)

Based on physician, team feedback



*Will include printable page for physician to share



Step 1: raise awareness

Are you at risk for prediabetes?

1 in 3 U.S. adults has prediabetes. Most don't know it. Are you at risk?

You may have prediabetes and be at risk for type 2 diabetes if you:

- Are 45 years of age or older
- Are overweight
- Have a family history of type 2 diabetes
- Have high blood pressure
- Are physically active fewer than three times per week
- Ever had diabetes while pregnant (gestational diabetes) or gave birth to a baby that weighed more than 9 pounds

Prediabetes can lead to serious health problems

Having prediabetes means your blood glucose (sugar) level is higher than normal, but not high enough to be diagnosed as diabetes. But, nearly 90 percent of adults who have prediabetes don't know they have it.

If you have prediabetes and don't lose weight or increase your physical activity, you could develop type 2 diabetes within five years. Type 2 diabetes is a serious condition that can lead to health issues such as heart attack, stroke, blindness, kidney failure, or loss of toes, feet or legs.

What can you do?

- Talk to your doctor about your risk of having prediabetes.

Here's the good news

If you have prediabetes, your doctor may refer you to a proven lifestyle change program that can help you prevent or delay getting type 2 diabetes.

The National Diabetes Prevention Program can help!

The National Diabetes Prevention Program (National DPP) uses a program that is proven to prevent or delay type 2 diabetes, and will help you lower your risk by improving your food choices and increasing physical activity.

How does it work? As part of a group in your community or online, you will work with a trained lifestyle coach to learn the skills you need to make lasting lifestyle changes. You will learn to eat healthy, add physical activity to your life, manage stress, stay motivated and solve problems that can get in the way of healthy changes.

Features

- Trained coach to guide and encourage you
- In-person or online
- CDC-approved program
- Support from others working on the same goals as you
- Skills to help you lose weight, be more physically active and manage stress
- Some insurance companies will cover

What participants are saying ...

"I love having a lifestyle coach. She has given us great information, helped me stay on track and stay positive!"
—Bruce

"I'm so excited because I went to the doctor last week and all of my numbers were down and I officially no longer have prediabetes."
—Vivien

Now is the time to take charge of your health and make a change! Ask your doctor or nurse.



Prevent Diabetes **STAT** | Screen / Test / Act Today™



**86 MILLION
AMERICAN
ADULTS
have prediabetes**

You could be one of them.

Having prediabetes means you are at increased risk for developing serious health problems such as type 2 diabetes, stroke and heart disease.

You could have prediabetes if you have:

- High cholesterol **or**
- High blood pressure **or**
- A parent, brother or sister with diabetes

Your risk goes up if you are also overweight, and/or over age 45.

If you have prediabetes, we can help!

Ask your doctor how you can stop diabetes before it starts.



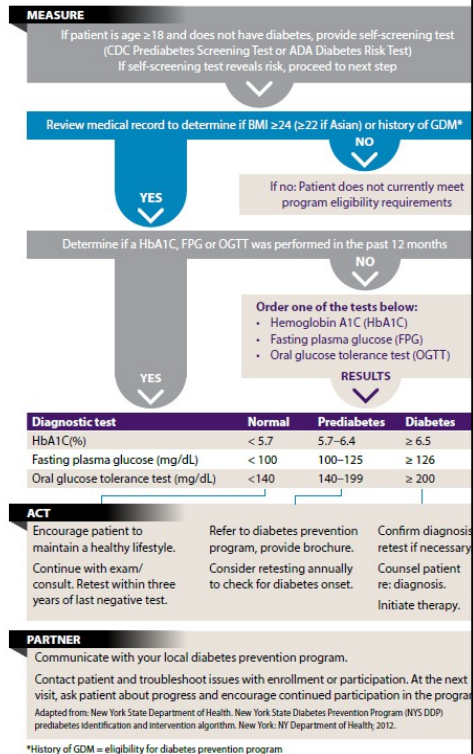
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Step 2: identify patients with prediabetes

Point-of-care prediabetes identification



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Retrospective prediabetes identification



Sample "Talking points" for phone outreach

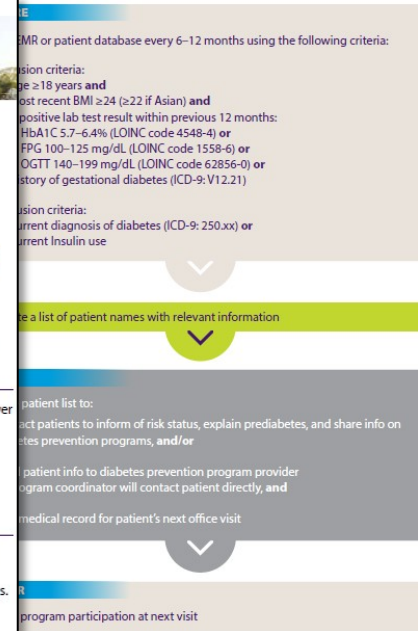
- Hello <<PATIENT NAME>>.
- I am calling from <<PRACTICE NAME HERE>>.
- I'm calling to tell you about a program we'd like you to consider, to help you prevent some serious health problems.
- Based on our review of your medical chart, you have a condition known as prediabetes. This means your blood sugar is higher than normal, which makes you more likely to develop serious health problems including type 2 diabetes, stroke and heart disease.
- We have some good news, too.
- You may be eligible for a diabetes prevention program run by our partners, <<NAME OF PROGRAM PROVIDER>>.
 - Their program is based on research proven to reduce your risk of developing diabetes and other health problems.

Option A

- We have sent a referral to <<NAME OF PROGRAM PROVIDER>> and someone will call you to discuss the program, answer any questions you may have and, if you are interested, enroll you in the program.
- Please feel free to give <<NAME OF PROGRAM PROVIDER>> a call at <<PHONE NUMBER>>.
- Do you have any questions for me?
- Thank you for your time and be well.

Option B

- We have sent a referral to <<NAME OF PROGRAM PROVIDER>> and we urge you to call <<PHONE NUMBER>> to learn more about the program and enroll.
- We hope you will take advantage of this program, which can help prevent you from developing serious health problems.
- Do you have any questions for me?
- Thank you for your time and be well.



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Step 3: educate at-risk patients

So you have prediabetes ... now what?



Prediabetes means your blood glucose (sugar) level is higher than normal, but not high enough to be diagnosed as diabetes. This condition raises your risk of type 2 diabetes, stroke and heart disease.

What can you do about it?

The good news is that there's a program that can help you.

The National Diabetes Prevention Program, led by the Centers for Disease Control and Prevention (CDC), uses a method proven to prevent or delay type 2 diabetes.

By improving food choices and increasing physical activity, your goal will be to lose 5 to 7 percent of your body weight—that is 10 to 14 pounds for a person weighing 200 pounds.

These lifestyle changes can cut your risk of developing type 2 diabetes by more than half.

How does the program work?

As part of a group, you will work with a trained diabetes prevention coach and other participants to learn the skills you need to make lasting lifestyle changes. You will learn to eat healthy, add physical activity to your life, manage stress, stay motivated and solve problems that can get in the way of healthy changes.

The program lasts one year, with 16 sessions taking place about once a week and six to eight more sessions meeting once a month. By going through the program with others who have prediabetes you can celebrate each other's successes and work together to overcome challenges.

Some insurance plans will cover the cost of the program. Check with your insurance provider to see if it is covered. Also, some places that provide the program will adjust the fee you pay based on your income.

Why should you act now?

Without weight loss and moderate physical activity, many people with prediabetes will develop type 2 diabetes within five years. Type 2 diabetes is a serious condition that can lead to health issues such as heart attack, stroke, blindness, kidney failure, or loss of toes, feet or legs. **NOW is the time to take charge of your health and make a change.**

Features of the program:

- A trained coach to guide and encourage you
- A CDC-approved program
- Group support
- Skills to help you lose weight, be more physically active and manage stress

What participants are saying ...

"I love having a lifestyle coach. She has given us great information, helped me stay on track and stay positive!"
—Bruce

"I'm so excited because I went to the doctor last week and all of my numbers were down and I officially no longer have prediabetes."

—Vivien

Sign up today for a program near you!

To find a program in our area that is part of the National Diabetes Prevention Program, visit cdc.gov/diabetes/prevention.



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Step 4: refer at-risk patients to evidence-based programs

Diabetes Prevention Recognition Program - Find a Program Near You

Find a program near you by selecting your state or territory. Or, find an online or combination in-person/online program by selecting that link to the right. Some online providers may also have an in-person program. Please contact the organization for in-person program locations.

Location:

GO

 [Export Full Program List](#)



https://nccd.cdc.gov/DDT_DPRP/Programs.aspx



Step 5: follow-up to reinforce behavior change

Sample patient flow process

MEASURE

CHECK-IN

- If age ≥ 18 and patient does not have diabetes, provide CDC Prediabetes Screening Test or ADA Diabetes Risk Test
- Patient completes test and returns it
- Insert completed test in paper chart or note risk score in EMR



ROOMING/VITALS

- Calculate BMI (using table) and review diabetes risk score
- If elevated risk score or history of GDM, flag for possible referral



ACT

EXAM/CONSULT

- Follow "Point-of-care prediabetes identification algorithm"
- Determine if patient has prediabetes and BMI ≥ 24 (≥ 22 for Asians) or a history of GDM
- Advise re: diet/exercise and determine willingness to participate in a diabetes prevention program
- If patient agrees to participate, proceed with referral



PARTNER

REFERRAL

- Complete and submit referral form via fax or email



FOLLOW UP

- Contact patient and troubleshoot issues with enrollment or participation

† Use handouts included in this toolkit or request brochures from your local diabetes prevention program provider.

PREVENTING TYPE 2 DIABETES IN MICHIGAN

The American Medical Association is helping lead the response to America's chronic disease crisis by tackling one of the nation's most costly and debilitating diseases—type 2 diabetes. Currently, 86 million Americans are living with prediabetes. The economic burden associated with diabetes and prediabetes in the United States, according to the latest statistics, stands at a staggering \$245 billion per year. Reversing the devastating impact of diabetes on the health of our nation requires swift action. **Turn the page to learn what you can do to help Michigan Prevent Diabetes STAT™.**



In progress

Focus: Engaged healthcare teams and systems

Roadmap for healthcare systems



Easy ways for teams to test and refer



Activating channels for spread – State Medical Societies



www.preventdiabetesstat.org

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86 MILLION
AMERICAN ADULTS
HAVE PREDIABETES

9 OUT OF **10** PEOPLE WITH
PREDIABETES DON'T
KNOW THEY HAVE IT.¹

PATIENTS AND PARTNERS

HEALTH CARE PROFESSIONALS

EMPLOYERS AND INSURERS