Monthly Campaign Webinar
March 21, 2019
Today’s Webinar

• Together 2 Goal® Updates
  – Webinar Reminders
  – AMGA Annual Conference
  – Together 2 Goal® Award Winners
  – 2019 Million Hearts® Challenge
  – Together 2 Goal® Extension

• Overcoming Barriers to Diabetes Self-Management Education (DSME) Referrals
  – Jodi Lavin-Tompkins, M.S.N., RN, CDE, BC-ADM of American Association of Diabetes Educators
  – Valerie Spier, M.P.H., RD, CDE of Sutter Health

• Q&A
  – Use Q&A or chat feature
Webinar Reminders

• Webinar will be recorded today and available the week of March 25\textsuperscript{th} – www.Together2Goal.org

• Participants are encouraged to ask questions using the “Chat” and “Q&A” functions on the right side of your screen
2019 AMGA Annual Conference

March 27-30, 2019
National Harbor, MD

• 1 – 2 p.m.: Affordability: Taming the Cost Curve with Physician Engagement
  – Beth Averbeck, M.D., Senior Medical Director, Primary Care, HealthPartners Care Group

• 2:45 – 3:45 p.m.: The Heart of Diabetes Care: A Practice’s Innovative Approach to Cardiovascular Risk Reduction
  – Francis R. Colangelo M.D., M.S.-HQS, FACP, Chief Quality Officer, Lindsay Venditti, M.D., and Alicia Voll Pharm.D., Premier Medical Associates, P.C.

• AMGA Foundation Celebration
  – Friday, March 29, 2019
    6:30 – 8:00 p.m. EST
Congratulations 2019 Together 2 Goal® Award Winners!

- **Best Performance – Basic Track**
  - Inova/Signature Partners

- **Best Performance – Core Track (Small Group)**
  - Coastal Carolina Health Care, P.A.

- **Best Performance – Core Track (Medium Group)**
  - USMD Health System

- **Best Performance – Core Track (Large Group)**
  - Scripps Medical Foundation
2019 Million Hearts®
Hypertension Control Challenge

- Health professionals, practices, and health systems that have achieved hypertension control rates of at least 80% are eligible to enter
- Submission deadline is April 1
- Visit https://millionhearts.hhs.gov for more information
New Partnership: National Minority Cardiovascular Alliance

The NMC Alliance is fielding a brief survey to understand the experiences and challenges faced by patients in managing their heart health.

The perspectives of minority patients and the physicians who treat them are particularly important to the Alliance. The information obtained will help us to understand what issues and problems patients share in common and identify actionable solutions to address these.

Visit https://www.surveymonkey.com/r/2TMHKTQ to view the survey.
Together 2 Goal® Extension
Today’s Featured Presenters

Jodi Lavin-Tompkins, M.S.N., RN, CDE, BC-ADM
Director of Accreditation
American Association of Diabetes Educators

Valerie Spier, M.P.H., RD, CDE
Clinical Performance Improvement Consultant
Sutter Health
Overcoming Barriers to Diabetes Self-Management Education

DSME Referrals
March 21, 2019
Jodi Lavin-Tompkins MSN, RN, BC-ADM, CDE
Director of Accreditation
American Association of Diabetes Educators
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Valerie Spier, MPH, RD, CDE
Clinical Performance Improvement Consultant
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916-531-0753
What is DSMT (diabetes self-management training) ?

• Medicare covered benefit (AKA: DSME/T, DSMES)
  – If program/service is accredited by ADA or AADE
  – If program/service is a Medicare part B supplier
• Two billing codes: G0108 (individual) & G0109 (group)
• Requires referral from certified provider “managing the beneficiary’s diabetes”
  – Certified providers include MD/DO, NP, CNS,PA
  – Referral expires after 1 year
• Is NOT an incident-to service
• May be billed on same day as physician visit (different NPI)
Medicare Covers: Initial & Follow-up

• **Initial Service**
  - Is a once-in-a-lifetime benefit
  - Beneficiary has 12 consecutive months after the 1<sup>st</sup> G code billing to complete
  - 1 hour of individual + 9 hours of group
  - May offer more of the 10 hours as individual if provider puts on referral and beneficiary has “special needs”

• **Follow-up Service**
  - Coverage for 2 hours per calendar year, either group or individual, after initial benefit
  - Requires new referral
  - Follow-up:
    • Reinforces prior education
    • Addresses new issues
    • Introduces new learning
    • Builds confidence
    • Reduces regression back into former habits
    • Focus on problem solving and living with diabetes
What is DSMT?

• Self-Management outcomes are behavioral
  – Use AADE7™ self-care behaviors framework: Healthy Eating, Being Active, Monitoring, Taking Medications, Reducing Risk, Problem Solving, Healthy Coping*
  
  – See clinical outcomes as a result of behavior changes
  
  – Skilled in assessing participant barriers, problem solving, coaching (not just teaching)
  
  – A big part of DSMES is setting SMART goals for behavior change and following up with the individual, assessing progress

*www.diabeteseducator.org
Not a One and Done!

- Education and support happens over time; follow up is critical
- Education provided is evidence-based
- Accreditation involves meeting 10 national standards = quality
- 2015 systematic review: All methods of DSME achieved greater reductions in A1c compared to controls¹ = equivalent to adding one oral agent!
- DSMT encounters provided by diabetes educators in accredited programs are likely to show lower cost patterns compared to controls.
  - Multiple episodes of DSMT are more likely to lead to adherence to medication regimen.²

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² Duncan et.al. The Diabetes Educator, Volume 37, Number 5, September/October 2011
Current State

• **US: Utilization is low:** <5% of Medicare beneficiaries, <6.8% of privately insured

• Success requires a **systematic approach** to support patients' behavior change efforts.

• High-quality DSMES has been shown to improve
  – patient self-management
  – Satisfaction
  – glucose outcomes.

DSMES Main sites in US
updated by CDC regularly
https://www.diabeteseducator.org/living-with-diabetes/find-an-education-program

Two organizations, AADE and the American Diabetes Association, accredit diabetes education programs. Search for an accredited diabetes education program in your area:
CDC-provider, individual, programmatic barriers, grants to increase access

https://www.cdc.gov/diabetes/dsmes-toolkit/
If you aren’t demanding the services, they won’t be there
Recent survey of AADE accredited programs: best practices for increasing referrals

• Themes
  – System/process change
  – Participant identification
  – Provider-related
  – Marketing
  – Partnerships
  – Community Outreach and Awareness
Four Times to Refer

Sutter Health’s Campaign 2016-2018

Valerie Spier, MPH, RD, CDE
Quality Coordinator
AADE Accredited Diabetes Education Program

Sutter Health, California Bay Area
- Not-for-profit
- Multidisciplinary clinics
- 67,000 doctors, advanced practice clinicians & staff

SHIDEN Diabetes Education Program
- 43 Centers
- 13 Affiliates
~90 Diabetes educators (85% RD, CDEs)
Continuous Quality Improvement Project

• Increase Provider Referrals to DSMES
  – CQI Goal: Increase % referred to all SHIDEN by 3% above baseline (2017 to 2018).
SHIDEN Total eReferrals

Goal: increase EPIC referrals
2% from 2017 to 2018
Actual: 6.45%

2016 Baseline) 2017 (start) 2018 (1 yr)
SMF Lakeside PAMF HOD SPMF

3,870 4,011 4,109
2,700 2,360
144 227 236
Overview

1. 2016 T2G Planks Chosen
2. Increasing Referrals
   - System level work by T2G quality team
   - Local affiliate level work by SHIDEN education programs
3. Collect systematic data and local data
   - Baseline, during & post intervention
4. Conduct experiments
5. Meet regularly to discuss results
   - System (bi-monthly), local (monthly)
6. Advertise the campaign
1) Identify analyst to support project
2) Narrow report
   - Include DSME (G0109 or G0108)
   - Exclude MNT (medical nutrition therapy)
   - Include departments in our program
   - Include orders for both internal and external referrals generated by EHR
   - Include any referring providers
3) Validate report (1 center, compare hand count run by different method), tweak, repeat
Experiments

Making it Easier to Refer

- Create standard electronic referral
- Create standard paper referral
- Create cheat sheet on how to refer
- Identify and fix internal barriers
  - Education on how to create order in EHR
  - Information systems fix access to order
- Standardize process of scanned (ext) referral
Electronic Referral
Electronic Referral

This order must be associated with a diabetes diagnosis.

Has the patient ever received Diabetes Education? NO. Initial Individualized Diabetes Self-Management Education/Training 3 hours due to limitation in learning/special needs that must be specified:

- [Speed needs:127537]
- Vision
- Hearing
- Cognitive Impairment
- Language Limitations
- Injection Training
- Insulin Pump Training
- Continuous Glucose Monitor Training
- Additional Training
- Additional Hours Requested
- Other

Initial DSME/T Content offered:
- Monitoring diabetes
- Diabetes as disease process
- Psychological adjustment
- Physical activity
- Nutritional management
- Goal setting, problem solving
- Medications
- Prevent, detect and treat acute complications

Process Inst.:

Diabetes self-management education and training (DSME/T) and medical nutrition therapy (MNT) require one of the following documented for all insurances:
- A fasting blood sugar greater than or equal to 126 mg/dl on two different occasions
- A 2 hour post-glucose challenge greater than or equal to 200 mg/dl on 2 different occasions; or
- A random glucose test over 200 mg/dl for a person with symptoms of uncontrolled diabetes.

*Medicare coverage: 10 hrs initial DSMT + 3 hrs MNT in first 12 months. Annually thereafter: 2 DSMT + 2 hrs follow-up MNT. Additional MNT hours require a change in medical condition, treatment, and or diagnosis.
Experiments

Build Bridges and Foster Partnerships

- Attend team huddles
- Attend physician meetings (5-10 min.)
- Hold lunch/learn for RNs
- Work with Community Health Resource Ctr
- Meet with nurse case managers, discharge planners
- Enlist quality leaders to champion effort
- Acknowledge/thank top referring doctors
Experiments

**Promote/Market Services**

- Create flyers for patients & doctors 4x to Refer
- Create SHIDEN program brochure
  - Personal delivery, 1:1
  - Mail
  - Left out in lobbies, urgent care, resource ctr.
  - Huddles, MD departmental meetings
- Hold lunch/learn for RNs
- Welcome email to new physicians
Get Valuable Support When You Need It

We work with you when it’s most important.

Confidently Manage Your Diabetes

Learning to manage your diabetes is key to your health.

Sutter Health Diabetes Education

For more information about classes and appointments, contact a Sutter Health resource near you.

San Francisco Bay Area (Cont.)

Lakeside Clinics

(for current primary care patients)

Sutter Health Community Clinic

Make an Appointment

You can make an appointment today for services at any Sutter Health diabetes education center. Our centers are located throughout Northern California—see inside to find one near you. Learn more at sutterhealth.org/services/diabetes.

Bilingual education and supportive services are available for those whose first language is not English.

Most insurance companies cover diabetes education with a doctor’s referral. Please call your insurance company to find out what your plan covers. For more information, call your local Sutter Health diabetes education center.

Sutter Health

Please visit our Sutter Health website for more information about diabetes:

sutterhealth.org/diseases-conditions/diabetes

Diabetes Education and Support

We’re here to help you live better with diabetes.

Personalized Diabetes Support

With Sutter Health, you don’t have to face diabetes alone. Our diabetes team provides support, information and tools to help you feel confident in managing your diabetes and taking steps for better health.

The Sutter Health diabetes education centers serve patients with:

- Prediabetes
- Type 1 and Type 2 diabetes
- Diabetes complicating pregnancy and gestational diabetes

Our goal is to make it easier for you to live well with this long-term disease.
4 Times to Refer Flyers

Diabetes Self-Management Education and Support
A National Best Practice for People With Diabetes*

Engaging in diabetes self-management education and support:
A. Lowers A1C as much as many diabetes medications
B. Helps patients better manage their blood pressure
C. Improves management of cholesterol levels
D. Decreases costs associated with diabetes

Key times to refer:
1. At diagnosis
2. During an annual assessment
3. When new complicating factors arise
4. During transitions of care

Diabetes Educators Partner with Patients to Provide:
- Support for day-to-day problem solving on issues that impact their health and well-being
- Guidance on using self-monitoring data to improve blood glucose levels
- Educational resources to help them understand and optimize the use of medications
- Tips for behavioral changes: physical activity, healthy eating and healthy coping

Call a diabetes educator for more information or visit: Sutterhealth.org/diabetes

Research shows diabetes self-management education and support can help you:
A. Improve your blood sugar and A1C levels
B. Better manage your blood pressure
C. Better manage your cholesterol
D. Decrease the cost of your diabetes care

Diabetes self-management education and support is available to you:
1. At diagnosis
2. For a yearly diabetes education review
3. When new health issues arise
4. During changes in health care needs

Diabetes Educators Will Partner With You to Help You:
- Solve problems with day-to-day issues that impact your health and well-being
- Monitor and improve your blood sugar levels
- Understand your medications
- Create plans for healthy eating, physical activity, and coping

*This referral approach is supported by:
The American Diabetes Association
The American Association of Diabetes Educators
The Academy of Nutrition and Dietetics
The National Diabetes Education Program

http://www.sutterhealth.org/diabetes

Diabetes Support is Here for You!
Hi Doctor X,

First, let me welcome you to the Fremont Palo Alto Medical Foundation.

I would like to make you aware that you have a tremendous resource in our Nutrition and Diabetes education department, located in Building 1, 2nd Floor in the OB department. I’d like to personally make myself available to meet with you and I can also reply to an Outlook email or EPIC staff message if you have any questions about our services.

To refer a patient for general nutrition needs: you can enter ref0154 or the word, “nutrition” in order entry.

To refer a patient for diabetes education: you can enter ref0071 or enter the word, “diabetes” in order entry.

If you save it to your preference list, that makes it super easy to find in the future and remember to include any relevant diagnosis by associating them on the order. It is also helpful to write down any special needs or focus on your scheduling notes to us.

The ADA/AADE and the AMGA have been campaigning to raise awareness of the 4 times to refer for diabetes. Please see the attached flyers that further explain how we can partner with you in caring for persons with diabetes.

I look forward to working with you.

Valerie Spier, MPH, RD, CDE
Clinical Performance Improvement Consultant, Diabetes
Office of Patient Experience, Quality and Clinical Effectiveness
Mobile: 916-531-0753/ Mondays, Tuesdays & Thursdays

Clinical Dietitian/Diabetes Educator
Palo Alto Medical Foundation
Office: 510-498-2179/ Fax 510-498-2133 Wednesdays & Fridays

- spierv@sutterhealth.org
- Sutterhealth.org/Diabetes
- SHIDEN Affiliates
Experiments

Communicate/Educate

- SHIDEN diabetes educators to “own” campaign
- SHIDEN educators merit based on efforts
- Publish internal articles to increase awareness
  - Triage- direct to all Sutter providers
  - Acute Quality Bulletin- hospital leaders
  - Ambulatory Quality Bulletin – outpatient quality leaders
- External stakeholder meeting
Diabetes Self-Management Education and Support for Adults with Type 2 Diabetes:

**ALGORITHM of CARE**

ADA Standards of Medical Care in Diabetes recommends all patients be assessed and referred for:

- **NUTRITION**
  - Registered dietitian for medical nutrition therapy

- **EDUCATION**
  - Diabetes self-management education and support

- **EMOTIONAL HEALTH**
  - Mental health professional if needed

**FOUR CRITICAL TIMES TO ASSES, PROVIDE, AND ADJUST DIABETES SELF-MANAGEMENT EDUCATION AND SUPPORT**

1. **AT DIAGNOSIS**
   - Newly diagnosed. All newly diagnosed individuals with type 2 diabetes should receive DSME/S.
   - Ensure that both nutrition and emotional health are appropriately addressed in education or make separate referrals.

2. **ANNUAL ASSESSMENT OF EDUCATION, NUTRITION, AND EMOTIONAL NEEDS**
   - Needs review of knowledge, skills, and behaviors.
   - Long-standing diabetes with limited prior education.
   - Change in medication, activity, or nutritional intake.
   - HbA1c out of target.
   - Maintain positive health outcomes.
   - Unexplained hypoglycemia or hyperglycemia.
   - Planning pregnancy or pregnant.
   - For support to attain or sustain behavior change(s).
   - Weight or other nutrition concerns.
   - New life situations and competing demands.

3. **WHEN NEW COMPLICATING FACTORS INFLUENCE SELF-MANAGEMENT**
   - Change in:
     - Health conditions such as renal disease and stroke, need for steroid or complicated medication regimen.
     - Physical limitations such as visual impairment, dexterity issues, movement restrictions.
     - Emotional factors such as anxiety and clinical depression.
     - Basic living needs such as access to food, financial limitations.

4. **WHEN TRANSITIONS IN CARE OCCUR**
   - Change in:
     - Living situation such as inpatient or outpatient rehabilitation or now living alone.
     - Medical care team.
     - Insurance coverage that results in treatment change.
     - Age-related changes affecting cognition, self-care, etc.
Summary: system referral rates mostly growing! Each Foundation is a column Growth varied by foundation 1 to 6%
# System T2G Data: Patients Seen

**Summary:** system patient utilization rates are growing!
Each Foundation is a column
Growth: most increased, others decreased

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<th>MPMG</th>
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Thank You!
April Webinar

• **Date/Time:** April 18, 2019 from 2-3pm Eastern
• **Topic:** T2G Campaign Extension
• **Presenter:** AMGA & AMGA Analytics
Questions