AMGA Foundation
National Diabetes Campaign

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 25th
  - 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

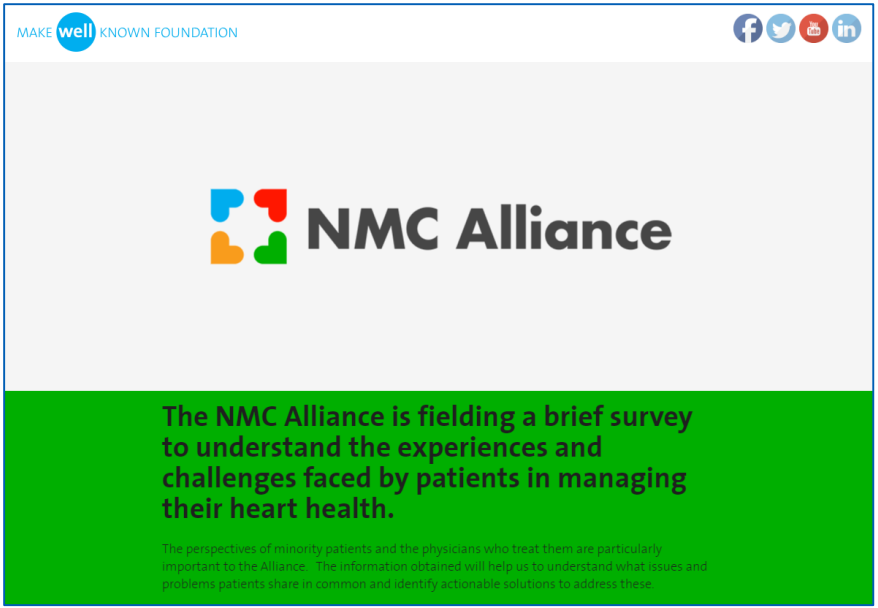
Best Performance – Core Track *(Large Group)*

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



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
jlavintompkins@aadenet.org
312-601-4854

AADE
American Association of Diabetes Educators

Valerie Spier, MPH, RD, CDE
Clinical Performance Improvement Consultant
spierv@sutterhealth.org
916-531-0753

Sutter Health

Together 2 Goal
AMGA Foundation
National Diabetes Campaign

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 1st 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 controls[1]=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]

- 1 C.A. Chrvala, et al., Diabetes self-management education for adults with type 2 diabetes mellitus: A systematic review of the effect on glycemic control, Patient Educ Couns (2015), http://dx.doi.org/10.1016/j.pec.2015.11.003
- 2 Duncan et.al. *The Diabetes Educator*,Volume 37, Number 5, September/October 2011

Current State

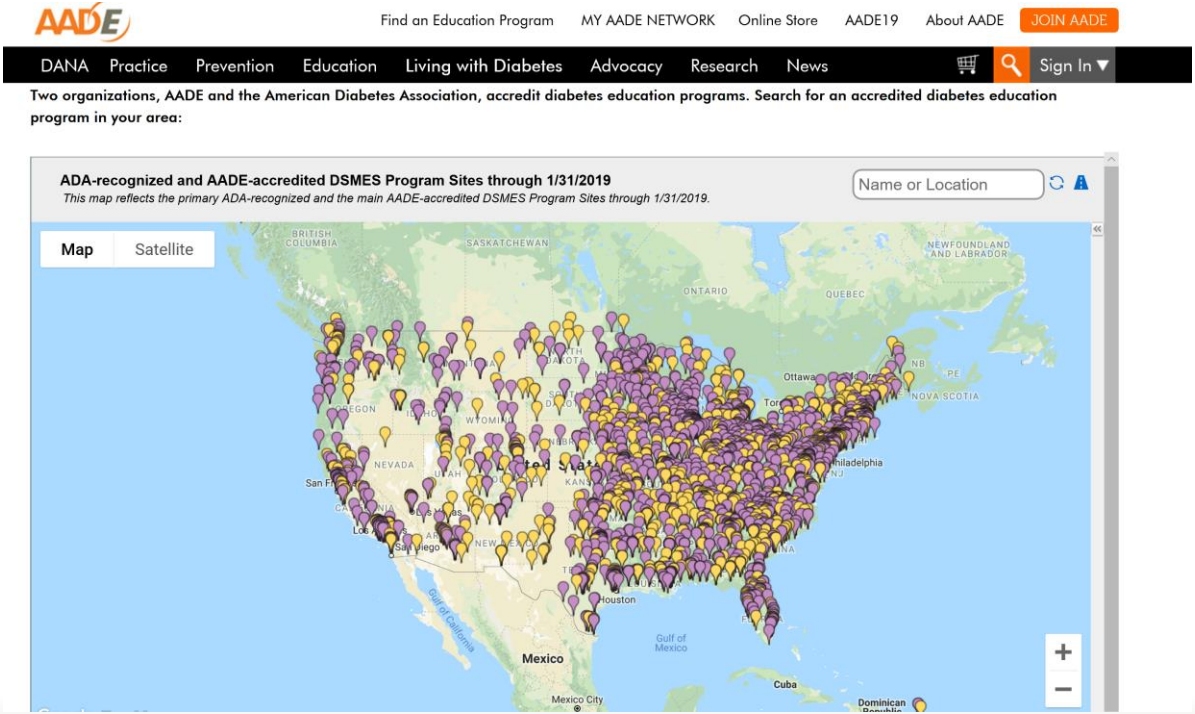
- US: Utilization is low: <5% of Medicare beneficiaries, <6.8% of privately insured
- Success requires a systematic approach to support patients' behavior change efforts.
- High-quality DSMES has been shown to improve
  - patient self-management
  - Satisfaction
  - glucose outcomes.

Strawbridge LM, Lloyd JT, Meadow A, Riley GF, Howell BL. Use of Medicare's Diabetes Self-Management Training Benefit. *Health Educ Behav*. 2015;42(4):530-538.
Strawbridge LM, Lloyd JT, Meadow A, Riley GF, Howell BL. One-Year Outcomes of Diabetes Self-Management Training Among Medicare Beneficiaries Newly Diagnosed With Diabetes. *Med Care*. 2017;55(4):391-397.
American Diabetes Association. Improving care and promoting health in populations: *Standards of Medical Care in Diabetes—2019*. Diabetes Care 2019;42(Suppl. 1):S7–S12

DSMES Main sites in US

updated by CDC regularly

https://www.diabeteseducator.org/living-with-diabetes/find-an-education-program



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

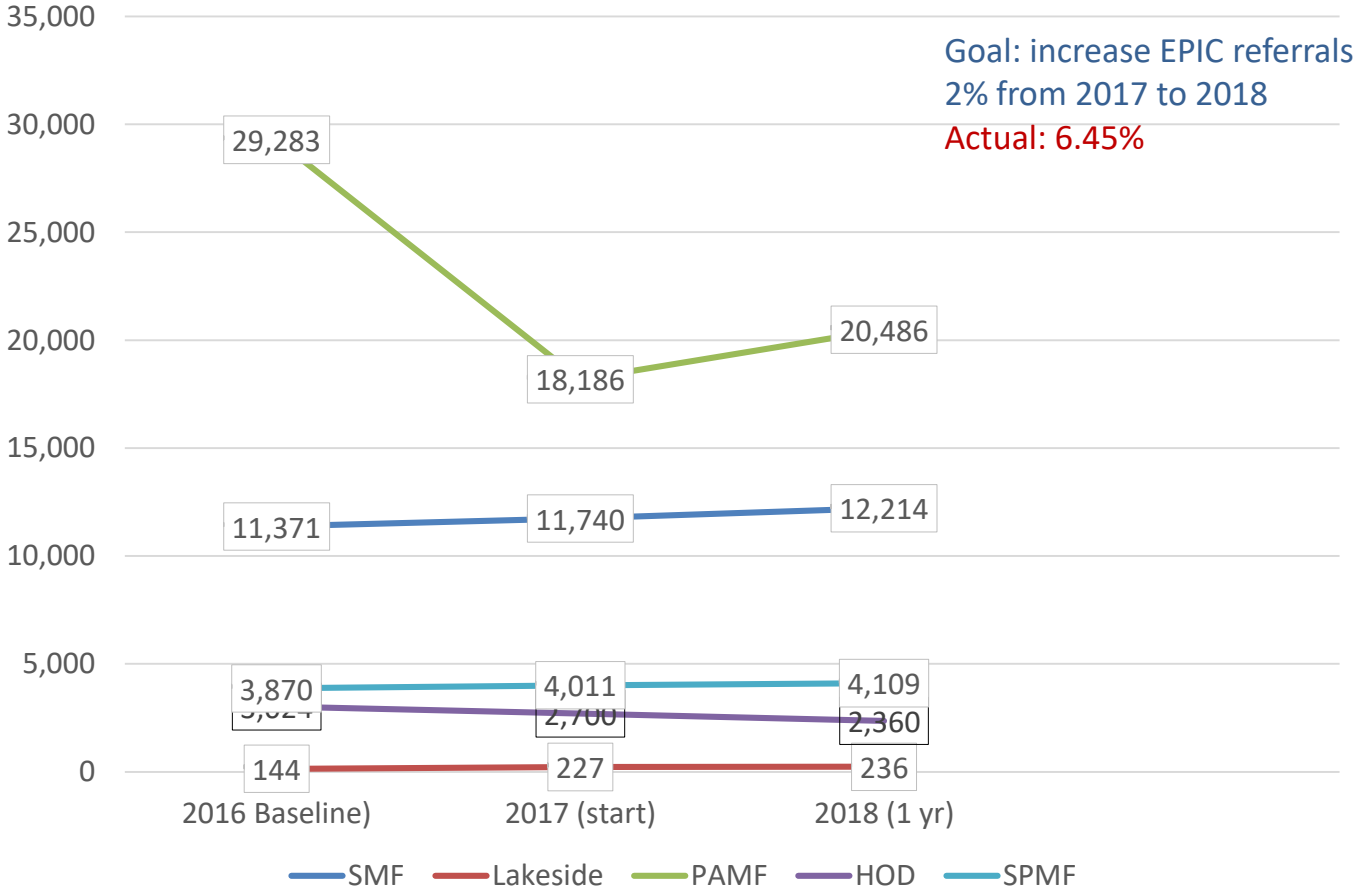
-13 Affiliates

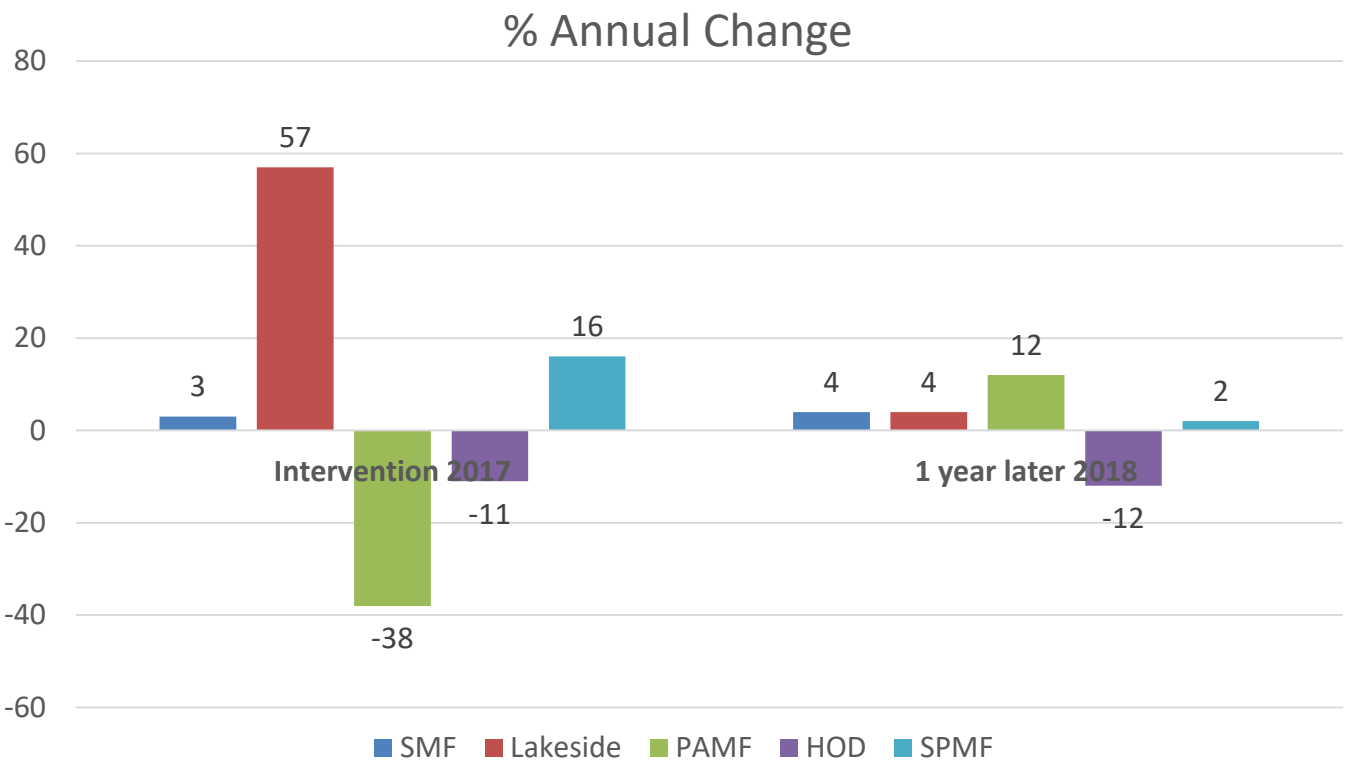
~90 Diabetes educators (85% RD, CDEs)

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



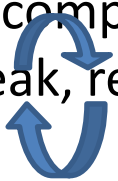

% Annual Change
80
60
40
20
0
-20
-40
-60
3
57
-38
-11
16
4
4
12
-12
2
Intervention 2017
1 year later 2018
SMF
Lakeside
PAMF
HOD
SPMF

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

Data

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

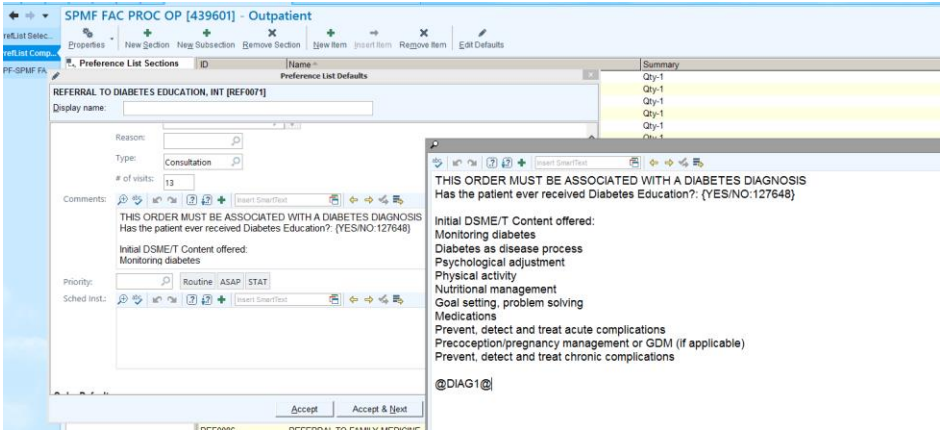


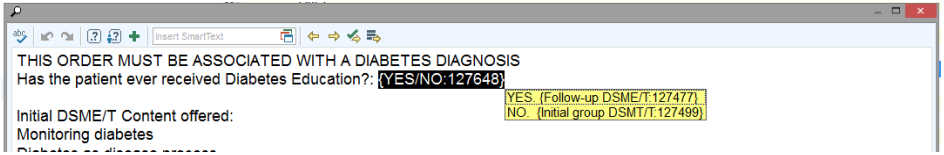
Experiments

Making it Easier to Refer

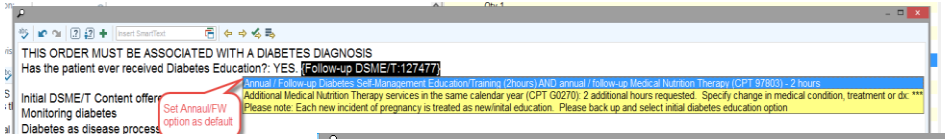
- ✓ Create standard electronic referral
- ✓ Create standard paper referral
- ✓ Create cheat sheet on how to refer
- ✓ Identify and fix internal barriers
  - ✓ Education on how to create order in EHR
  - ✓ Information systems fix access to order
- ✓ Standardize process of scanned (ext) referral

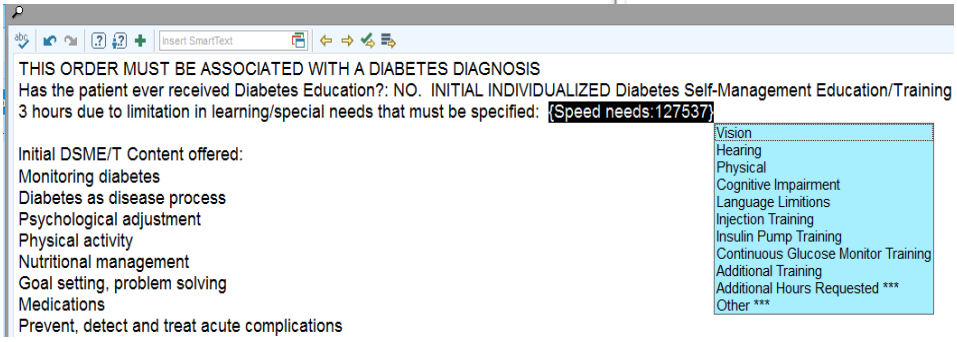
Electronic Referral





Electronic Referral



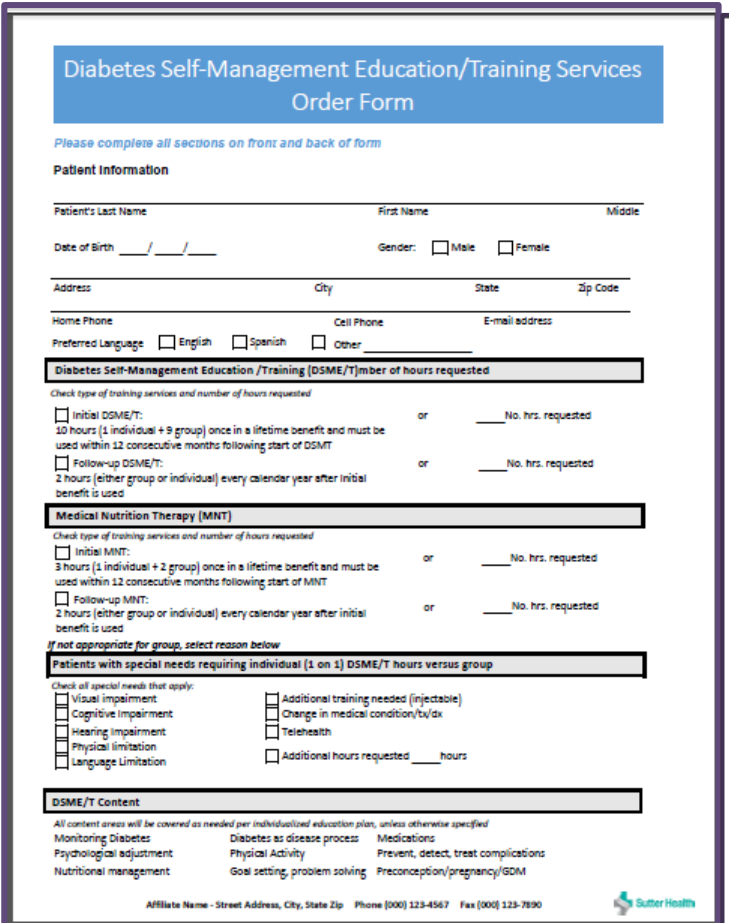


Process Inst.:

```
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 great 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.
```

Sched Inst.: Click to add text

Paper Referral



Diabetes Self-Management Education/Training Services Order Form

Please complete all sections on front and back of form

Patient Information

Patient's Last Name _____ First Name _____ Middle _____

Date of Birth ____/____/____ Gender: ☐ Male ☐ Female

Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____ E-mail address _____

Preferred Language ☐ English ☐ Spanish ☐ Other _____

Diabetes Self-Management Education /Training (DSME/T)mber of hours requested

Check type of training services and number of hours requested

☐ Initial DSME/T: or ____No. hrs. requested
10 hours (1 individual + 9 group) once in a lifetime benefit and must be used within 12 consecutive months following start of DSMT

☐ Follow-up DSME/T: or ____No. hrs. requested
2 hours (either group or individual) every calendar year after initial benefit is used

Medical Nutrition Therapy (MNT)

Check type of training services and number of hours requested

☐ Initial MNT: or ____No. hrs. requested
3 hours (1 individual + 2 group) once in a lifetime benefit and must be used within 12 consecutive months following start of MNT

☐ Follow-up MNT: or ____No. hrs. requested
2 hours (either group or individual) every calendar year after initial benefit is used

If not appropriate for group, select reason below

Patients with special needs requiring individual (1 on 1) DSME/T hours versus group

Check all special needs that apply:

☐ Visual impairment
☐ Cognitive impairment
☐ Hearing impairment
☐ Physical limitation
☐ Language Limitation
☐ Additional training needed (injectable)
☐ Change in medical condition/tx/dx
☐ Telehealth
☐ Additional hours requested ____hours

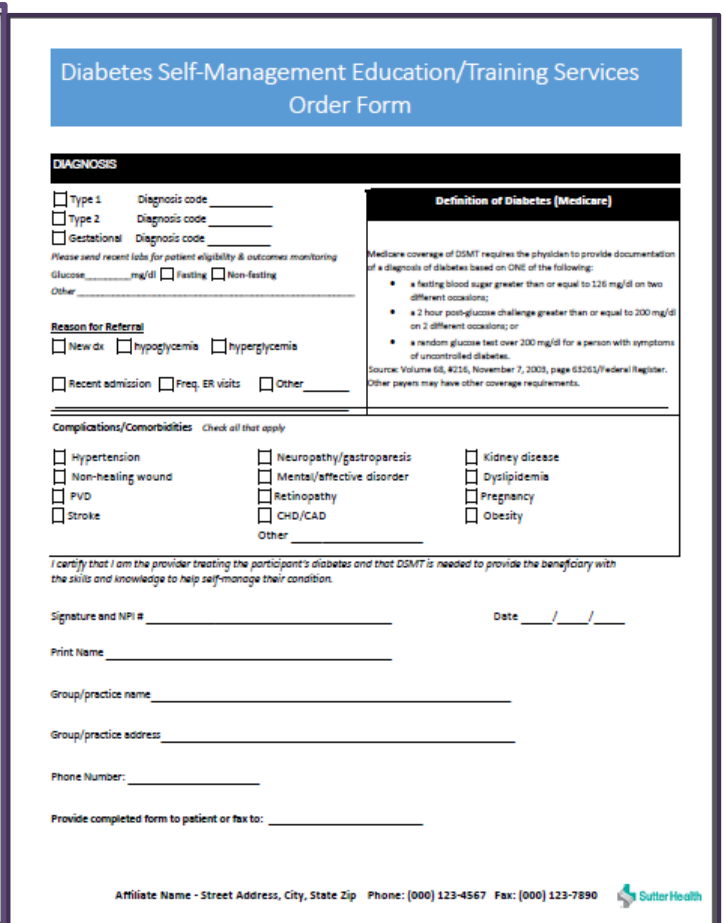
DSME/T Content

All content areas will be covered as needed per individualized education plan, unless otherwise specified

Monitoring Diabetes
Psychological adjustment
Nutritional management
Diabetes as disease process
Physical Activity
Goal setting, problem solving
Medications
Prevent, detect, treat complications
Preconception/pregnancy/GDM

Affiliate Name - Street Address, City, State Zip Phone (000) 123-4567 Fax (000) 123-7890

Sutter Health



Diabetes Self-Management Education/Training Services Order Form

DIAGNOSIS

☐ Type 1 Diagnosis code _____
☐ Type 2 Diagnosis code _____
☐ Gestational Diagnosis code _____

Please send recent labs for patient eligibility & outcomes monitoring

Glucose_____mg/dl ☐ Fasting ☐ Non-fasting

Other _____

Reason for Referral

☐ New dx ☐ hypoglycemia ☐ hyperglycemia

☐ Recent admission ☐ Freq. ER visits ☐ Other _____

Definition of Diabetes (Medicare)

Medicare coverage of DSMT requires the physician to provide documentation of a diagnosis of diabetes based on ONE of the following:

- 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.

Source: Volume 68, #216, November 7, 2003, page 63261/Federal Register. Other payers may have other coverage requirements.

Complications/Comorbidities *Check all that apply*

☐ Hypertension
☐ Non-healing wound
☐ PVD
☐ Stroke
☐ Neuropathy/gastroparesis
☐ Mental/affective disorder
☐ Retinopathy
☐ CHD/CAD
Other _____
☐ Kidney disease
☐ Dyslipidemia
☐ Pregnancy
☐ Obesity

I certify that I am the provider treating the participant's diabetes and that DSMT is needed to provide the beneficiary with the skills and knowledge to help self-manage their condition.

Signature and NPI # _____ Date ____/____/____

Print Name _____

Group/practice name _____

Group/practice address _____

Phone Number: _____

Provide completed form to patient or fax to: _____

Affiliate Name - Street Address, City, State Zip Phone: (000) 123-4567 Fax: (000) 123-7890

Sutter Health

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

SHIDEN Brochure

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

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 Lakeside Community Clinic

Sutter Health

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

sutterhealth.org/diseases-conditions/diabetes

Sutter Health

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.

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 interpretive 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 Diabetes Integrated Network (SHIDEN)

4 Times to Refer Flyers

Diabetes Self-Management Education and Support

*A National Best Practice for People With Diabetes**

Sutter Health
Together 2 Goal.

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

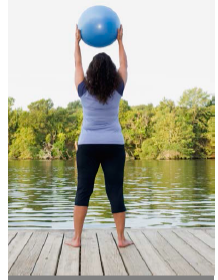
***This referral approach is supported by:**

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!

Sutter Health
Together 2 Goal.



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

Ask Your Doctor About Working with a Diabetes Educator

Diabetes self-management education and support is endorsed 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

Welcome Email

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

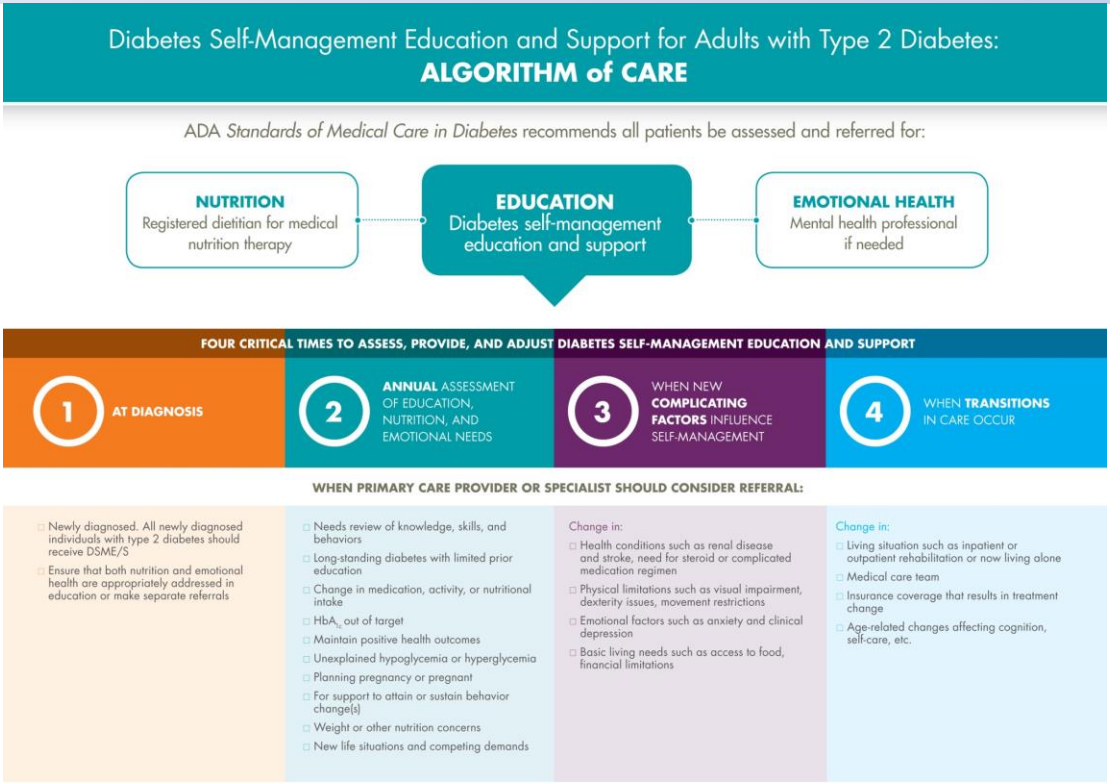
- *spierv@sutterhealth.org*
- *Sutterhealth.org/Diabetes*
- *SHIDEN Affiliates*

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

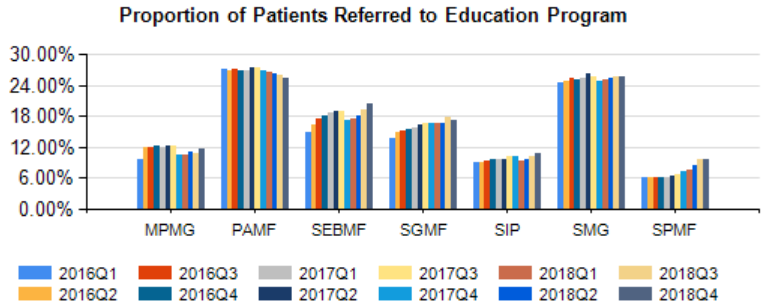
Presentation to Doctors



Powers MA, Bardsley J, Cypress M, Duker P, Funnell MM, Hess Fischl A, Maryniuk MD, Siminerio L, Vivian E. *Diabetes Educ.* 2015 Aug;41(4):417-30.

American Diabetes Association. AADE American Association of Diabetes Educators. eat right. Academy of Nutrition and Dietetics

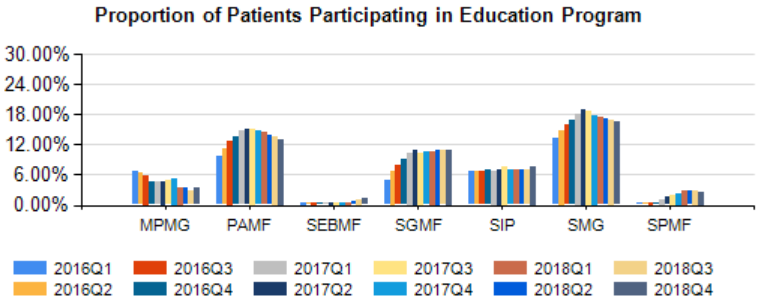
System T2G Data: Referral Rates



Run Date	MPMG	PAMF	SEBMF	SGMF	SIP	SMG	SPMF
2016Q1	9.67%	27.05%	14.93%	13.84%	9.19%	24.48%	5.99%
2016Q2	11.94%	26.96%	16.25%	14.84%	8.96%	24.91%	6.16%
2016Q3	12.07%	27.05%	17.48%	15.25%	9.28%	25.41%	6.13%
2016Q4	12.30%	26.89%	17.99%	15.34%	9.54%	25.05%	6.25%
2017Q1	11.90%	26.93%	18.56%	15.73%	9.53%	25.43%	6.16%
2017Q2	12.18%	27.60%	18.86%	16.41%	9.60%	26.22%	6.51%
2017Q3	12.27%	27.55%	18.89%	16.62%	10.35%	25.58%	6.83%
2017Q4	10.38%	26.89%	17.13%	16.67%	10.12%	24.96%	7.17%
2018Q1	10.57%	26.56%	17.39%	16.67%	9.30%	25.22%	7.71%
2018Q2	11.11%	26.18%	18.22%	16.52%	9.70%	25.53%	8.53%
2018Q3	10.94%	26.00%	19.26%	17.85%	10.25%	25.83%	9.52%
2018Q4	11.79%	25.49%	20.50%	17.37%	10.90%	25.76%	9.67%

Summary: system referral rates mostly growing!
Each Foundation is a column
Growth varied by foundation
1 to 6%

System T2G Data: Patients Seen



Run Date	MPMG	PAMF	SEBMF	SGMF	SIP	SMG	SPMF
2016Q1	6.61%	9.68%	0.47%	5.07%	6.83%	13.24%	0.18%
2016Q2	6.34%	11.31%	0.44%	6.72%	6.74%	14.81%	0.25%
2016Q3	5.72%	12.55%	0.47%	7.96%	6.76%	16.12%	0.33%
2016Q4	4.63%	13.63%	0.41%	9.13%	7.01%	17.00%	0.56%
2017Q1	4.76%	14.65%	0.46%	10.37%	6.67%	18.02%	1.07%
2017Q2	4.67%	14.99%	0.36%	10.79%	7.09%	18.84%	1.52%
2017Q3	5.05%	15.19%	0.33%	10.44%	7.73%	18.66%	2.04%
2017Q4	5.12%	14.63%	0.36%	10.45%	7.16%	17.70%	2.33%
2018Q1	3.47%	14.33%	0.36%	10.64%	6.91%	17.42%	2.77%
2018Q2	3.30%	14.01%	0.64%	10.94%	6.96%	17.24%	2.96%
2018Q3	2.93%	13.59%	0.91%	10.91%	7.16%	16.90%	2.77%
2018Q4	3.46%	13.07%	1.22%	10.85%	7.69%	16.51%	2.51%

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

Thank You!

April Webinar

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

Questions