



DIABETES A1C



Valley-Wide
Health Systems, Inc.

Your Health, Our Priority!

DIABETES TASK FORCE

TASK FORCE MEMBERS-

- Quality Improvement
- Providers
- Clinical Pharmacists
- Nursing Leadership
- RN Leads
- Nurse Educators
- Coder
- IS Support

MEETINGS-

- Monthly Meeting
- Created Goals (provider wish list)
- Celebrated our 1-year Anniversary
- Next Meeting- plan on reevaluating and establishing new goals

DIABETES TASK FORCE

CGM (Continuous Glucose Monitoring)

- Needed internal workflows and processes to reduce barriers:
 - Only 2 of our 40 Primary Care Providers were consistently using CGM treatment
 - Providers were ordering but patients were not getting prior authorizations approved/completed
 - Providers and Nursing staff were not comfortable educating and supporting their peers/patients

DIABETES TASK FORCE

- Took a deep dive into Dexcom and Freestyle Libre
- Created Clinic Portal Accounts
 - Invited Providers and Nursing Staff to create “Team Member” accounts
- Gather QR codes for downloading Apps
- Worked with our IS Department on installing/testing software on our servers *(TBD)*
- Implemented use of Parachute Health for DME prior authorizations
- Created a checklist for Care Teams guiding them through visits
- Created an Insurance Eligibility checklist
- Created “My Phrases” for Providers to use to ensure documentation components are captured for prior authorization requirements
- Completed Clinical Pharmacist/QI led In-Services with RN/MA Leads

DIABETES TASK FORCE



Step 1. Scan QR Code & download the Dexcom G7 App (for real-time glucose readings and alerts)



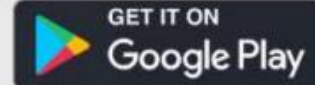
Step 2. Next search and download "Dexcom Clarity" App. This will share data with Provider at the clinic. Use same username & password created for Dexcom G7 App above.



La Junta Clinic

Practice ID#- vwljccgm

LibreView



Valley-Wide Canon City

Practice ID#- vwccgm1

DIABETES TASK FORCE

Coordination Visit- Educate and organize the patients care plan to focus on improving their diabetes outcome. (Provider visit: *determine CGM route is appropriate, educate, prescribe, schedule f/u apt*)

Go-Time Visit- Guide patients through the process of CGM use that focuses on education, placement, and setup. (Pharm. Visit/ Nurse led Provider visit: *sensor placement, connecting device to phone/receiver & portal, education, schedule f/u apt*)

Management Visit(s)- Monitor the patients care plan that helps support their diabetes management. (Pharm. Visit/Nurse led Provider visit: *ensure sensor is capturing data, have pt place next sensor, troubleshoot, schedule f/u apt*)

DIABETES TASK FORCE

-VISIT CHECKLIST FOR CARE TEAMS

Coordination Visit- Educate and organize the patients care plan to focus on improving their diabetes outcome.

- **Dexterity:** Assess appropriate hearing/vision and ability to program device or use phone application.
- **Insurance:** What insurance does the patient have? (*Medicare and Medicaid have eligibility requirements*)
- **Smart Phone:** Does the patient have a compatible smart phone? (*Patient must know their apple or google play login to download the portal app to record AGP data*)
- **Order Receiver:** Order Receiver along with sensors if patient does not have compatible smartphone.
- **Schedule follow-up Visit:** 1-2 weeks from prescribing CGM supplies
 - Remind patients to bring ALL supplies to next visit
 - Print Dexcom/Libre “Clinic Code” & App information- [P:\VW Forms\Screening Forms\CGMs](#)
 - Ask patient to download app and create account (*must have an email address to link to account*) prior, but some patients may need assistance with this process.
 - If the patient is using a receiver, remind them to charge the device before the appointment.

Go-Time Visit- Guide patients through the process of CGM use that focuses on education, placement, and setup.

- **Set up:**
 - Ensure the patient has created an account with appropriate CGM portal (*Dexcom Clarity or Libre View*)
 - Provide the patient with “Clinic Code” to share AGP data with Care Team - [P:\VW Forms\Screening Forms\CGMs](#)
- **Consider Sensor Placement:** Tape allergies, sweaty patients may need Skin Tac before insertion, have patient place their own sensor with observance and guidance
- **Review Basic Functionality & Education:** charging device and changing sensors
- **Set up Alerts:** Follow glucose targets

Management Visit(s)- Monitor the patients care plan that helps support their diabetes management.

- **Office Visit:** Follow up 10-15 days (when sensor is due to change)
- **Review/Download Data:**
 - Pull up AGP report in clinic portal account and print for Provider
 - If the patient has a receiver, open clinic portal account, plug receiver into computer, upload data, and print for Provider (**TBD**)
- **New Sensor Placement/Assess Site Irritation:** Have patient place their own sensor with guidance
- **Additional Education:** Access barriers & answer any other questions/concerns for patient
- **Follow-Up:** Schedule follow-up appointment w/ Provider in 1 month

DIABETES TASK FORCE

-ELIGIBILITY REQUIREMENTS

Medicare-

- Diagnosis of Diabetes
- Patient or Caregiver has sufficient training using the CGM prescribed
- Patient meets at least one of the criteria below:
 - In insulin-treated; or
 - Has a history of problematic hypoglycemia with documentation of at least one of the following:
 - Two or more level 2 hypoglycemic events (glucose <54 mg/dL) that persist despite multiple modifications to treatment or medication plan
 - One level 3 hypoglycemic event (glucose <54 mg/dL) characterized by altered mental and/or physical state requiring third-party assistance for treatment
 - Seen for diabetes management in past 6 months
 - For continuing eligibility, all of the above must continue to be met
- Patients will need a receiver prescribed even if they plan on utilizing their smart phone
- RN/LPN/MA would create DME Order through the Parachute Health platform and manage Prior Authorization

Medicaid-

- Diagnosis of Diabetes
- Patients are insulin-treated with multiple (3 or more) daily administrations of insulin or a continuous subcutaneous infusion (CSII) pump; and,
- Patient insulin treatment regimen requires frequent adjustment by the patient on the basis of BGM or CGM testing results; and,
- Within 6 months following the initial prescription of the CGM, the treating provider has an in-person visit with the patient to assess adherence to their CGM regimen and diabetes treatment plan.
- Prescribe CGM supplies through Pharmacy Benefits
- RX Refill Department would complete Prior Authorization through "CoverMyMeds" platform

Commercial Insurance/ MCR Advantage Plans-

- Varies depending on the patients' plan benefits
- Prescribe CGM supplies through Pharmacy Benefits
- RX Refill Department would complete Prior Authorization through "CoverMyMeds" platform

DIABETES TASK FORCE

CGM PROVIDER DOCUMENTATION- “MY PHRASE” EXAMPLES

Assessment/Plan-

- **Evaluation:** Patient is actively managing their diabetes and meets the criteria for CGM treatment. Education provided on CGM benefits, the patient agrees to the treatment option. The patient is currently checking glucose **XX** times per day and present for regular diabetic appointments.
- **Insulin Use:** Patient on **XX** insulin injections per day. Requires frequent adjustment of insulin regimen.
- **Hypoglycemia:** Patient has had **XX** or is at risk of having hypoglycemic episodes.
- **Dexterity:** Patient **and/or Care Giver** can hear and view the alerts on CGM device or smartphone.
- **Training/Education:** Patient will schedule follow-up visit in 1-2 weeks once CGM supplies have been received. The patient will bring all CGM supplies to clinic for training on set-up, sensor placement, and education. Patient will be seen at a minimum of every 6 months for diabetes follow-up.

HPI-

Nursing Staff/Provider enters this information from the AGP report on clinic portal account or by extracting information from the patients CGM receiver.

- 14 day average glucose = **XX**
- GMI (glucose management indicator) = **XX**
- Target range 70-180 = **XX**
- Low blood sugar = **XX**

DIABETES TASK FORCE

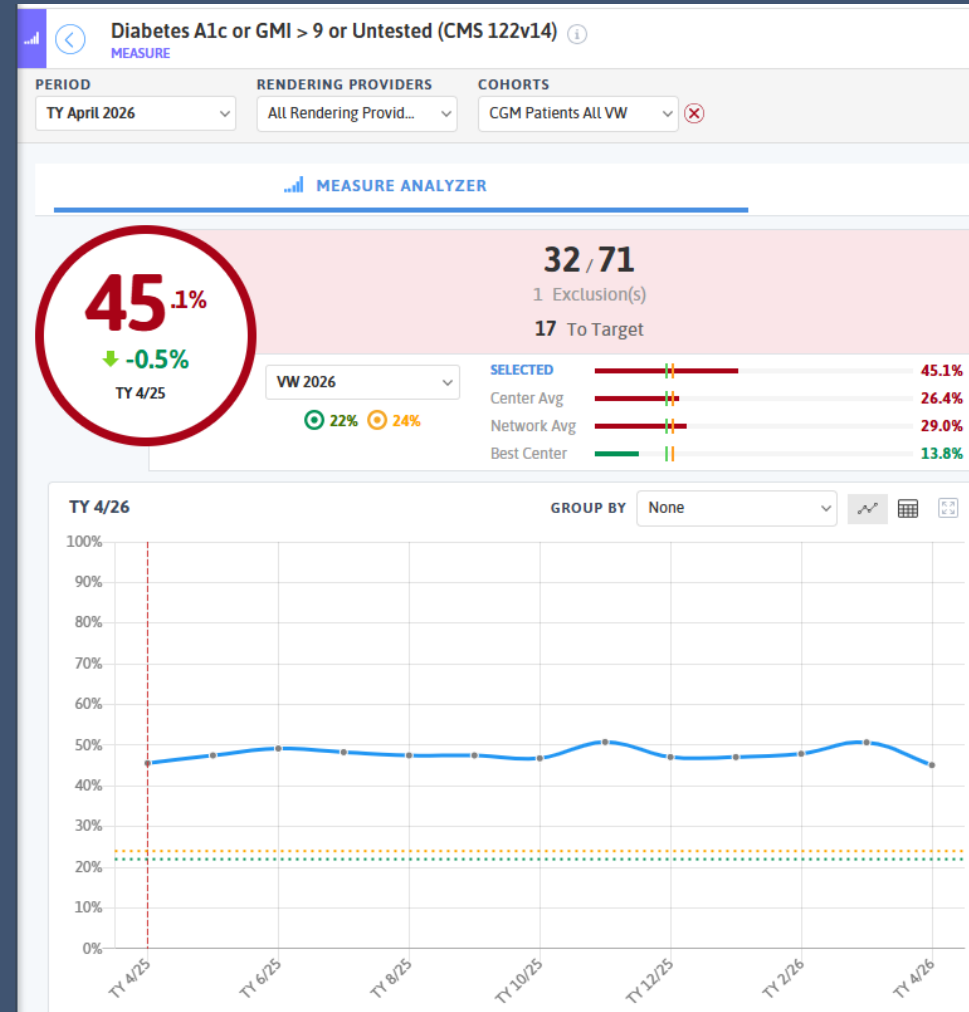
CLINICAL PHARMACIST/QI LED IN-SERVICE

- Differences of Freestyle Libre & Dexcom
 - Cost, Size, Sensor Wear Time, Warm-Up Time, etc.
- Device Demos
 - Contacted the manufactures and asked for demo kits for training
- YouTube Videos
- Program Alerts
 - What is defaulted or can be adjusted later on after use
- Sensor Placement
- Patient Education
 - Acetaminophen, vitamin C, etc. could alert false highs, when to confirm glucose with a fingerstick, importance of sensor storage, keep Bluetooth on, charge phone or receiver, keep phone or receiver in range, etc.
- Connecting to Portals
 - Team member accounts links-has 30 days, Dexcom with expire account if you haven't login in 90 days
- Interpreting Data
 - Time in Range, Time above Range, Time below Range, & GMI
- CGM Visits

DATA- AZARA/DRVS

Azara/DVRS-

- Internal BI Department created a Medication report that can be filtered. Patients prescribed CGM sensors and receivers are identified.
- Created a “Cohort” in Azara to match up against UDS measure
- Looking forward to seeing where this measure is at the end of the year!



CONVENIENT CARE CLINIC (WALK-IN/ACUTE CARE)

- **Identified GAPS**

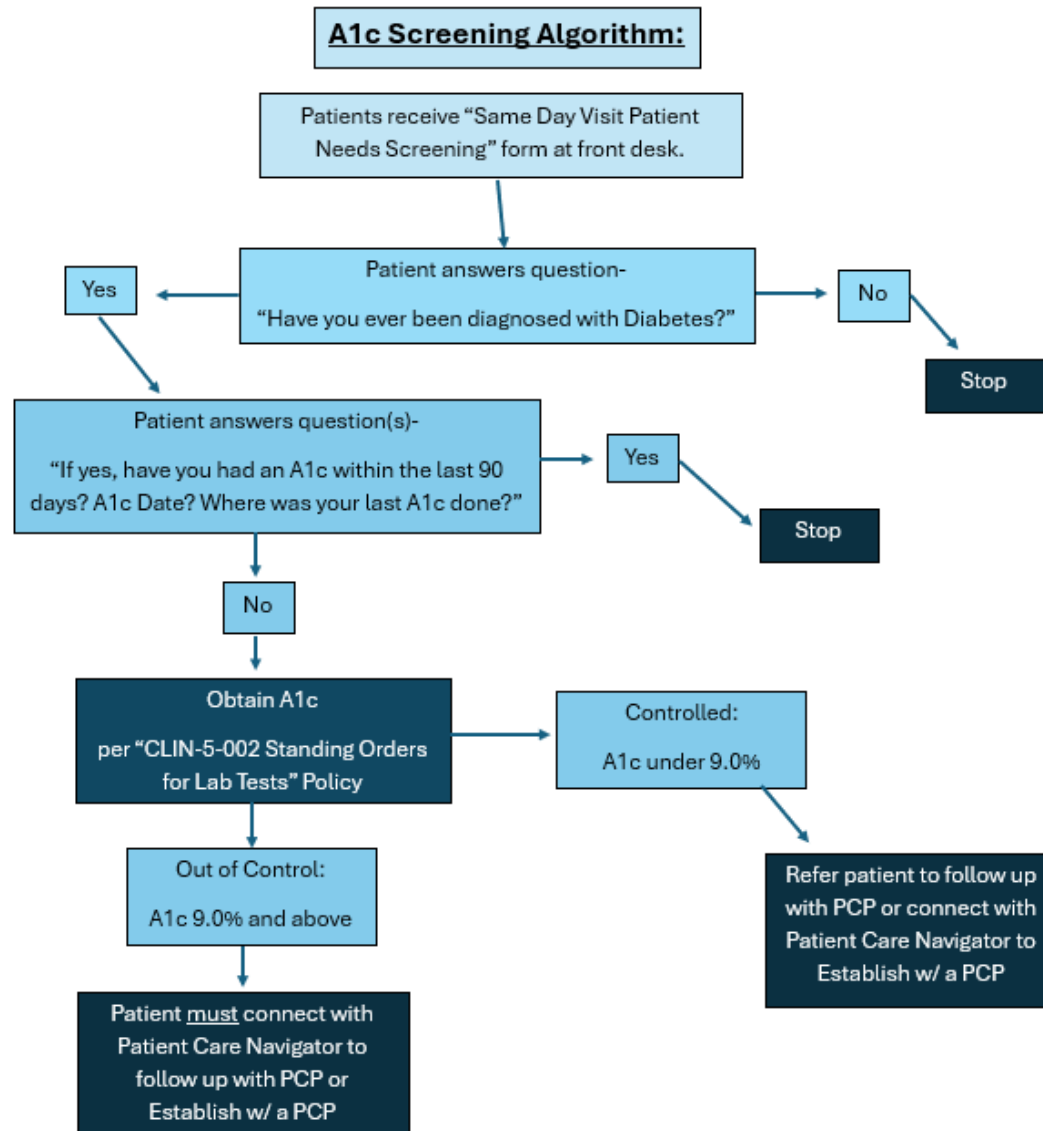
- Diabetic patients were utilizing our Convenient Care Clinic and there was no A1c documented in the last 12 months
 - Not engaged in Primary Care
 - Were our Pt (have DM as a Dx code) but has a PCP elsewhere now
 - Provider is bridging medication on a weekend and adding DM DX

- **Screening for DM & Last A1c**

- Obtain an A1c

Diabetic History		
Have you ever been diagnosed with Diabetes?	Yes	No
If yes, have you had an A1c within the last 90 days?	A1c Date: _____	
	Where was your last A1c done? _____	

CONVENIENT CARE CLINIC (WALK-IN/ACUTE CARE)



- Project started April 1st
- Buy-In:
 - Chief Medical Officer
 - MD (that Supervises Providers)
 - Nursing Leadership
 - RN Lead
 - Clinic Manager

CONVENIENT CARE CLINIC (WALK-IN/ACUTE CARE)

- **Patient Care Navigation**
 - Help ensure patients are getting a follow-up scheduled with Primary Care Provider for Diabetes Management
 - Help patients Establish Care with a Primary Care Provider
- **Next Steps in maximizing efforts**
 - Those screened patients that stated that they have had a recent A1c elsewhere
 - We have the workflow to document A1c performed elsewhere in our EHR system
 - Barrier: Obtaining those records
 - Not considered "Continuity of Care"
 - Asking the "sick" patient to complete an ROI

Thank You!



CF&T Sign Shop 9-23-11, sr: 27 DS/AL

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Valley-Wide
Health Systems, Inc.

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