Diabetes and BP Control

Paul S Harkaway

What's the fuss anyway?

- BP control (125/75) reduces many serious complications of diabetes
 - Stroke
 - MI and Sudden Death
 - CHF
 - Renal failure
 - Loss of vision
 - Need for amputation

Primary Aim Statement

To improve the health of Diabetics (n=3000 approximately) in our network by accomplishing and documenting control of Blood Pressure in this group.

Secondary Aim Statement

• To use this health care challenge as a springboard to develop a (pre-EMR) digital information strategy to obtain patient health care information from practices in a diverse private practice community regardless of the patients' health insurance

Participants

HVPA

- Laurie Wesolowicz Pharm D.
- Lori Kostoff Pharm D.
- Steve Thiry MD
- Paul Smith MD
- Paul Harkaway MD

Participants

- Quality Institute
 - Mark Cowen MD
 - Jennifer Czerwinski

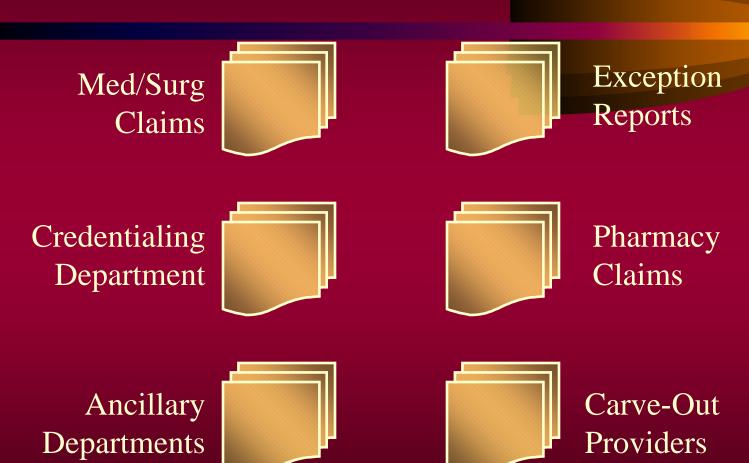
Components

- HVPA wide data repository- multiplan
- Web based portal
- Physician reminders
- Patient reminders
- Physician reporting and profiling

The HVPA Recipe for Quality

- Worthwhile Cause
- The WILL to change
- DATA
 - specific
 - correctable
 - actionable
- PEER Pressure
- \$

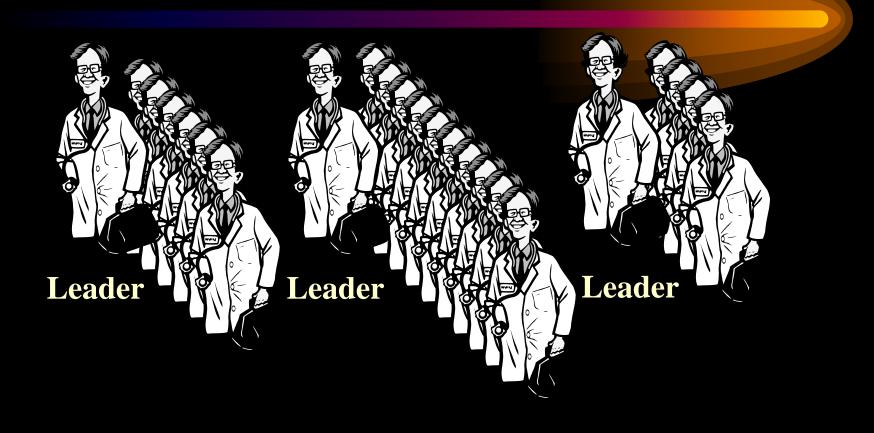
Data Sources



The NEW DATA SOURCE

THE DOC!

Primary Care Panels



Monthly Physician Reports

$LDL \ge 130 \text{ mg/dl}$

Dr. G. Smith 123 Anystreet Asthma Anytown, MI **Patient Name** John Smith 1-24-4 Dr. G. Smith Phone Number 616-312 1567 Plan/Number # HAP $HbA1c \ge 9.5\%$ **Test & Date** 9.8% Medication None

Dr. G. Smith Jane 123 Anystreet **Patient Name** Phone Number 616-3 Anytown, MI Plan/Number #

Test & Date 9.8% Medication

Patient Name Phone Number 616-3 Plan/Number # HAP

Patient Name John Smith 1-24-49 **Zocoi** Phone Number 616-312-4567 **Plan/Number** # HAP *12345678* John Test & Date **9.8%** 12-3-00 Medication Oral agents

> Jane Smith 10-2-44 **Patient Name Phone Number** 616-312-4567 Plan/Number # CC 12345678 **Test & Date 9.8%** 12-3-00 Medication Insulin

> **Patient Name** John Smith 1-24-49 **Phone Number** 616-312-4567 **Plan/Number** # HAP *12345678*

Exception Reporting

scannable forms for individual patient exceptions



Monthly Patient Mailings

Pap Smears

Dear Ms. Smith,

Mammography

Lipid Testing

Is. Smith,

Dear Ms. Sr

Our records pap smear to The last pap have on records 30, 1998...

We have att already fille name of the go to any of the back of 1 on June 30,

Diabetes

Dear Mr. Smith,

Our records show that you are due for a blood test to determine if your diabetes is under control...

We have attached a laboratory slip that is already filled out with your name and the name of the test that you need. You can go to any of the laboratory locations on the back of the requisition to have your blood drawn. Your test result will be automatically forwarded to my office...

Sincerely, Bob Breakey, M.D. It you are due for a for breast cancer. In from you that we performed on June

adiology slip that is h your name and the need. You should schedule an ummogram...



Test Requisition or Referral

Glycohemoglobin, Lipids Mammography, etc

Sincerely, Bob Breakey, M.D.

Quality Score =

Number who received desired intervention or experienced desired outcome

Number who *should have* received desired intervention or experienced desired outcome

Incentive Report

CASEY, BEN

2001 Quality Incentive - Individual Report

Region: GRAND RAPIDS

 You
 Your Region
 Entire Network

 Quality Score:
 0.76
 0.77
 75.19

 Care Choices Membership:
 202
 21490

How was the Quality Score used to calculate my incentive? Region Quality Score x Your Membership x \$2.00

Care Choices Quality Incentive Calculation

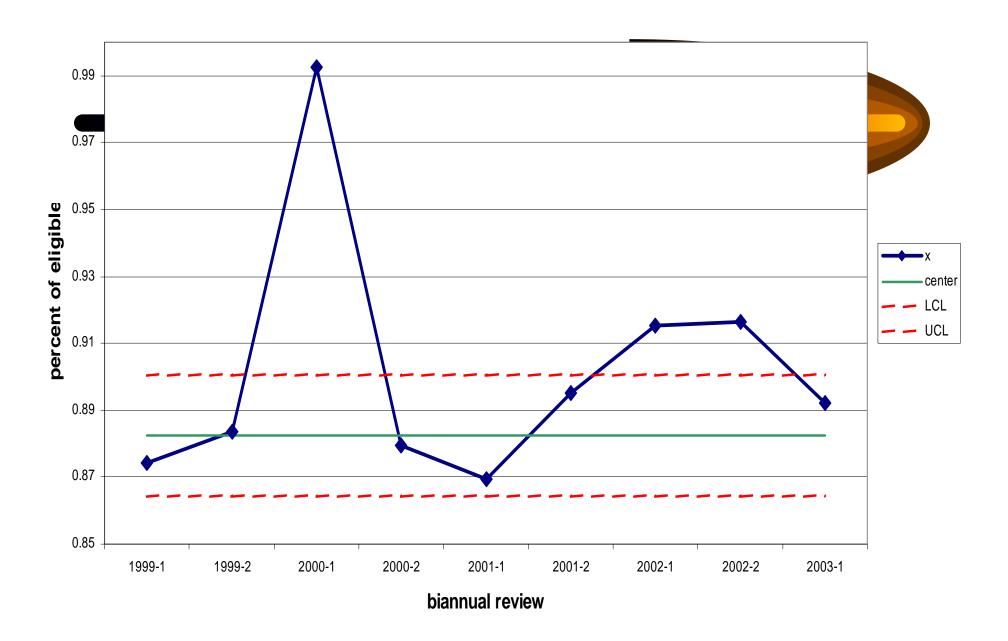
0.77 x 202 x \$2.00 = \$311.36

Performance on Individual Components of the Quality Score

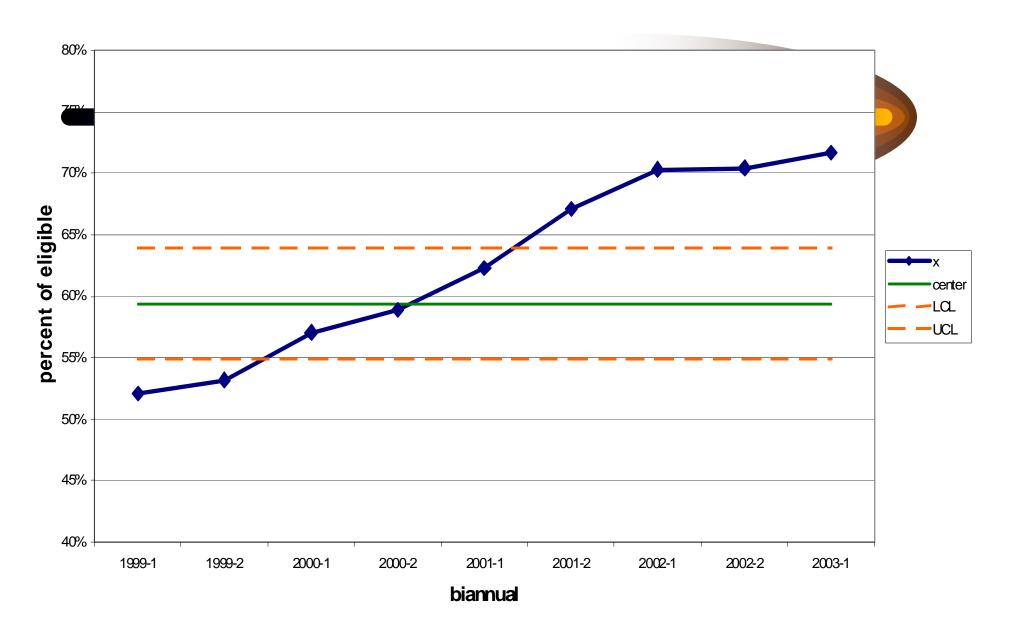
Quality Score	Ben Casey			Grand Rapids		
Component	Numerator	Denominator	Score (%)	Numerator	Denominator	Score (%)
Mammography	11	16	68.75	962	1193	80.64
Diabetes-HbA1c	2	3	66.67	364	561	64.88
HbA1c lt 9.5	2	2	100.00	191	223	85.65
Micro Albuminuria	2	3	66.67	238	561	42.42
CAD - LDL	1	2	50.00	138	221	62.44
LDL lt 130 mg/dl				38	72	52.78
Pap Smear	42	54	77.78	3521	4370	80.57
Adult Asthma	5	7	71.43	362	481	75.26
Child Asthma	4	4	100.00	195	228	85.53
Immunizations				157	214	73.18
3-6 year well child	3	4	75.00	836	961	86.99
Overall	72	95	75.79	7002	9085	77.07

^{. =} no eligible members.

HbA1c< 8.5%



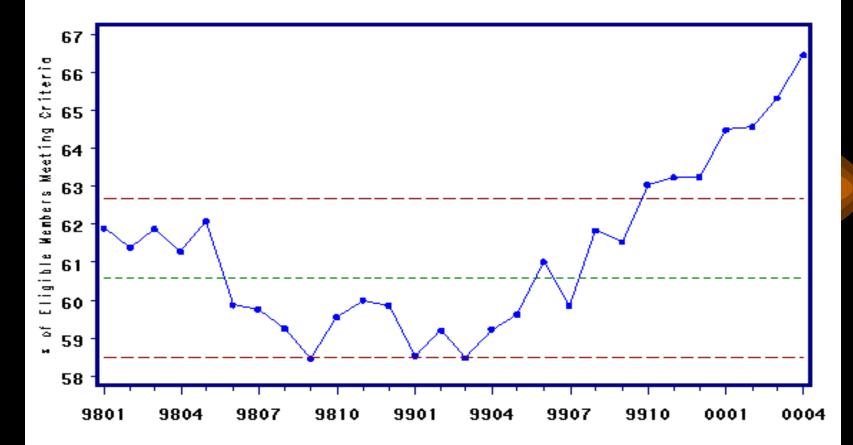
LDL<130



Care Choices Commercial

(Members Under 65 Years of Age)
Patients on 3+ Bronchodialators and Steroid Inhaler

Claims Processed through July 2000



The mean, upper confidence limit, and lower confidence limit are based on the period from 9801 to 9912

August 28, 2000

Quality Score =

Number of Diabetics who have their BP within the desired range

Total Number of Diabetics in Physician's Patient Panel

Is your Blood Pressure under control? The goal has changed......It's not 140/90 anymore

For many years we have known that high blood pressure can result in stroke, heart attack, and kidney failure. In people who already have kidney disease caused by diabetes, we learned the importance of the following in slowing down the worsening of kidney disease:

Good control of your blood sugar

Lower blood pressure goal: at or under 125/75

Use of certain blood pressure medications* if medication is needed

Now we have <u>new</u> evidence that control of blood pressure to lower levels (at or under 125/75) reduces nearly all complications of diabetes such as:

Stroke

Heart attack

Heart failure

Sudden death

Kidney failure

Bleeding in the eyes and loss of vision

Need for laser eye surgery

Need for limb amputation

Your doctor is anxious to work with you to prevent these serious complications of diabetes with the appropriate medications. You and your doctor should work closely together to achieve the 125/75 blood pressure target. Contact your doctor now to:

Be certain that your blood pressure is controlled to the new target level

Be certain that you are on the right medications

Learn how you can work with your doctor to monitor this important vital sign

WEB Portal

 http://qp.aa.trinityhealth.org/hvpa_hypertension/sec2.asp
 X

Next Steps

- Process map in pilot practice (n=161) with one health plan only
- Develop and complete Web portal
- Ensure connectivity now and in future
- Institute process with pilot practice then rapid pdsa
- Rollout with entire network through panel leads

Next Steps

- Develop randomized study on pharmacist intervention
- Develop and deploy patient reminders and physician reminders

SWAG

- 1year
 - Data on 75% of Diabetics of <u>all</u> plans
 - 80% of those at goal BP

Barriers

- Health plan command and control
- Practice capacity ("one more thing")
- Analyst/ data collection/programmer availability
- No \$ to put in the kitty (lighthouse effect)
- Lack of "computer"/ "internet" access
- Lack of broadband