

Diabetes Advisory Council

WELCOME

November 15, 2016

Legislative Office Building

Agenda

- Welcome
- Public comment
- Workgroup updates:
 - Diabetes education
 - Clinical Quality Measures
 - Diabetes prevention for type 2
- Next steps

Diabetes Education Rec. #1

- **Secure Medicaid coverage for DSME.**

-Discussion Question: Given state fiscal climate what are merits of this recommendation now?

-Note: from Duncan et.al.: \$2,002 direct medical care cost savings per pt. per year (Medicare population) Duncan: Assessing the value of diabetes education. Diab. Ed. (5) 752-57, Sept / Oct 2009

-DAC discussion and vote

Diabetes Education Rec. #2

- **Devise a plan for, and seek financial support, to increase CT's pool of diabetes education leaders, who reflect at-risk populations including: minorities, those residing in lower-socioeconomic and rural areas.**
- DAC discussion and vote

Diabetes Self-Management Education/Support Workgroup Discussion Recommendation #3

- Investigate reform of insurance policies to eliminate barriers e.g. discontinuing high deductible and co-pays for DSME.

-DAC Discussion and Vote

Clinical Quality Measures Workgroup: Online Scorecard

- Research and planning for the development of a CT online healthcare scorecard is underway as part of the State Innovation Model
- An online quality scorecard facilitates transparency, consumer choice, and programming and policy decisions.
- Currently scorecard ratings are planned for FQHCs and Advanced Networks

Clinical Quality Measures Workgroup: Recommendation #1

1. The scorecard should include diabetes-related measures recommended by the SIM Quality Council
 - Currently recommended measures
 - a1c poor control,
 - a1c screening,
 - diabetes eye exam, and
 - medical attention for nephropathy

Clinical Quality Measures Workgroup: Recommendation #1

DISCUSSION QUESTION:

Should other quality measures that relate to poor diabetes outcomes (ex. smoking, hypertension) be included in our recommendations?

Clinical Quality Measures Workgroup: Recommendation #2

2. Reporting organizations should work towards developing data systems and analytic capacity to stratify clinical quality measures by race and ethnicity

Clinical Quality Measures Workgroup: Recommendation #3

3. The third recommendation is reserved for the a recommendation related to the status of healthcare organizations reporting on clinical quality measures related to diabetes control

DPP Recommendation #1

- Work towards Diabetes Prevention Program coverage in commercial, state employee and Medicaid plans

-DAC Discussion and Vote

DPP Recommendation #2

- Work towards making referral to Diabetes Prevention Programs (or other evidence-based lifestyle change program) a “standard of care” for medical and other healthcare service providers.

-DAC Discussion and Vote

DPP Recommendation #3

- Support building state-wide program capacity with a focus on culturally and linguistically tailored awareness, referral, retention and program implementation strategies.

-DAC Discussion and Vote

Next Steps

Next meeting:

December 8, 2016 2-3:30 pm

Room 1A LOB Hartford, CT