Diabetes Care and Education Thinking Outside the Box

February 3rd, 2023 NC Diabetes Advisory Council

Presented by: Tammy S. Palumbo RD/LD BC-ADM, CDCES,MAE Kintegra Health tpalumbo@Kintegra.org

Objectives:

Identify ways to:

Expand Services

 Increase Resources for Patients

Sustain Diabetes Program

6) Kintegra Health

Mission

Kintegra Health is a community sponsored, family-centered provider of health care, health education and preventive care services without regard for the ability to pay.

76,000 Patients

15289 with Diabetes

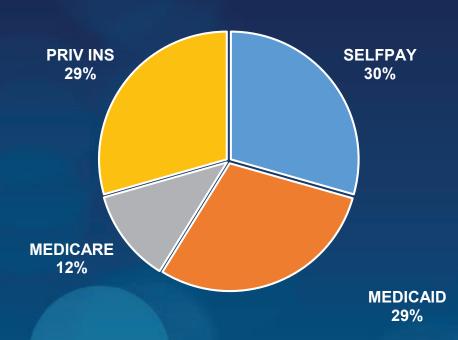
Federally Qualified Health Center

FQHC

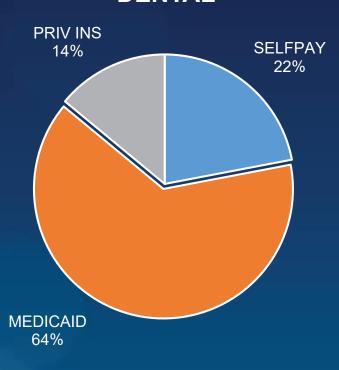
 Federally funded nonprofit health centers or clinics that serve medically underserved areas and populations. Federally qualified health centers provide primary care services regardless of ability to pay. Services are provided on a sliding scale fee based on ability to pay.

Payor Mix

MEDICAL AND BEHAVIORAL HEALTH



DENTAL



More Info

Follow us!

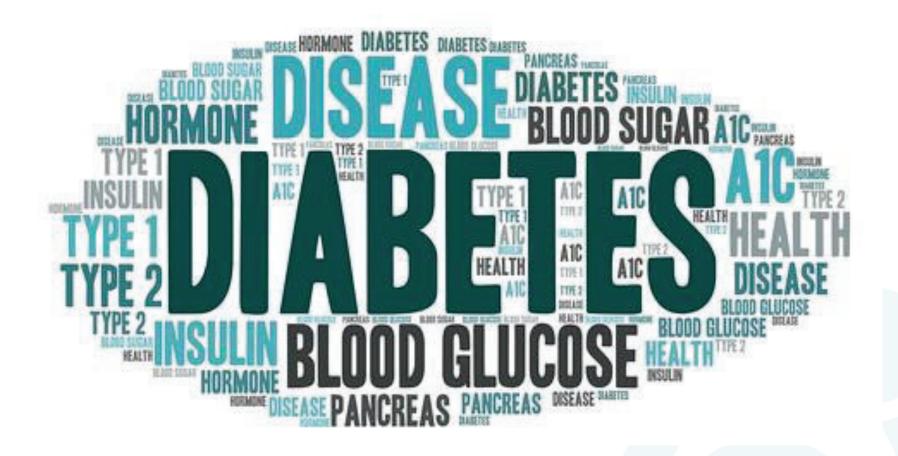
Kintegra.org
Facebook
Instagram
Twitter

Annual Report 2021:

Kintegra » Annual Report 2021



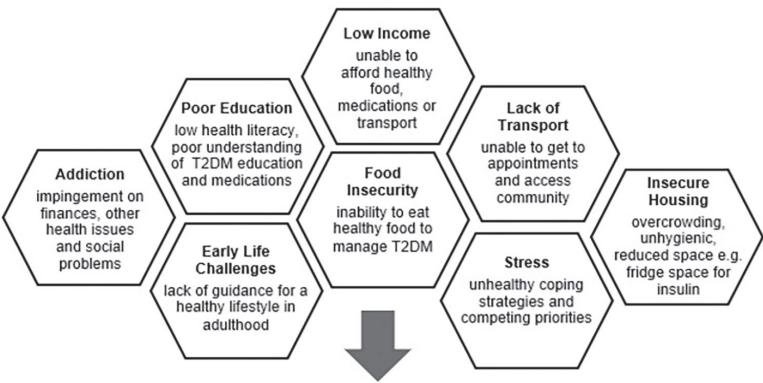






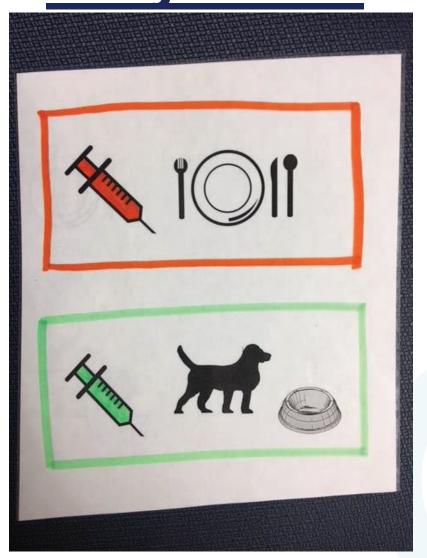
Incorporate Social Determinants of Health into

Individual Cara



Sub optimal T2DM self-management

Meet the Patient Where They are At



Kintegra's Journey

AADE 7 Self-Care Behaviors:

Healthy Eating * Being Active *Monitoring *Taking Medication *Problem Solving * Healthy Coping *Reducing Risks



Chronic Care Model

Chronic Care Model – What is it? Delivery system design It's a framework for improving the quality of diabetes care... it has six core elements Decision support Clinical information systems Community resource Health systems

settings: a systematic review.Prev Chronic Dis 2013;10:E26

Build from Experiences



Hospital Based Diabetes Outpatient Centers

 People want 'diet' Information vs AADE-7

Inpatient Diabetes Educator

 Frequent Fliers not able to obtain meds or know how to inject or store insulin correctly

Endocrinology Office CDE, Pump/CGMS Trainer

- Titrating insulin
- Point of Care A1c
- Benefit of Continuous Glucose Monitoring (CGMS)

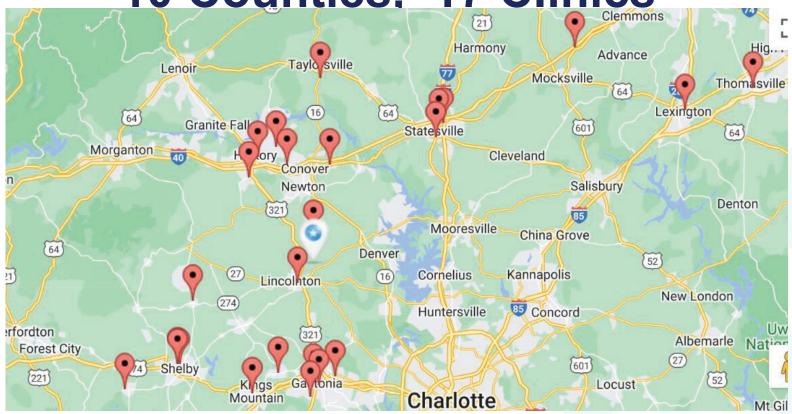
Rebranded Diabetes Department

to

Chronic Illness Patient Education

Chronic Illness Patient Education

Serving
10 Counties, 17 Clinics



Chronic Illness Patient Education TEAM

ADA Recognized Program

3 Team Members (Currently hiring a RD/LD, CDCES)

Offices in Corporate Building Gastonia

Diabetes Program Navigator

- Gatekeeper
- Started with a Grant
- Processes referrals including Free ENDO Clinic
- Review Services offered for diabetes related health inequities/social determinant of health:
 - Medication Assistance Program (MAP's)
 - NC Super SNAP (\$40 extra for fruits/vegetables via EBT card at Food Lion)
- Medicare Enrollment (SHIIP)
- Transportation
- Phlebotomist for ENDO Clinic
- Process Continuous Glucose Monitor Scripts for Insured

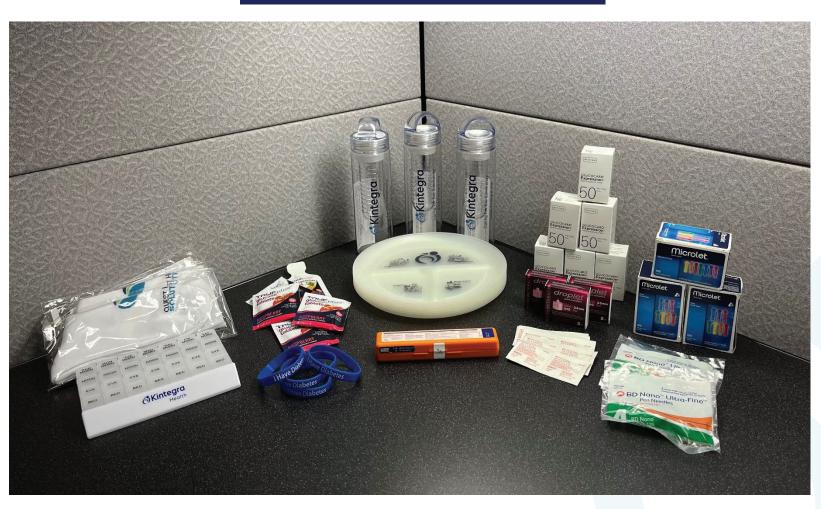
Provider: CDCES – RD/LD

- Diabetes Self Management Training (DSMT)
 - Group free, Individual -\$
- Medical Nutrition Therapy (MNT)
 - Group free, Individual -\$
- Weight Management
 - Group free, Individual -\$
- Grocery Store Tours free
- Community
 - FIT Squad
 - RAM's Kitchen

Provider: BC-ADM, CDCES – RD/LD

- High Risk DM Management
 - Works under Medical Director Protocols for Insulin Titration, Bolus Correction Scale, Point of Care A1 –
 - Frequent Visits for glucose management \$
- ENDO Clinic FREE
 - See initial referrals to ENDO Clinic and between visits with Endocrinologist
 - Continuous Glucose Monitoring (CGMS)
 - Commercial, Medicaid/Medicare CGMS Training
- CaroMont Community Program Discharged patients with dx of DM and self pay
 - Goal: lower A1c to 8 or less

Patient Resources Point of Care



How We Support Our Clinics



Glucomete r

- GlucoCard Expression
- Patient walks out of clinic with meter.
- Free Bulk Meters for Clinic
- Able to provide 50ct strips \$6
- (340B pricing)
- English / Spanish
- Large Display
- Audio

ONLY GLUCOMETER



Clinic Toolbox

Provide injection training for Medical Assistants with annual review.

Supply Clinics with Toolbox that contain:

- Sample pens/pen needles
- Sample syringe/vials
- Injection pillow
- Sample Glucose tablets

Provide injection and medication training for Behavior Health Providers



Patient Education Material

Located on 'STAFF CONNECT' English / Spanish

- Insulin Pen Injection Training
- Vial / Syringe
 Injection Training
- General Diabetes
 Information



Target Education

Current

Re-Think Your Drink

Upcoming

Foot Care

Available on STAFF CONNECT English /Spanish









 Zero-calorie water Tea/Coffee without sugar Low-fat (1%) or fat-free milk, plain Minneapolis tap

Diet drinks

 Reduced-fat (2%) milk, plain • 100% fruit or vegetable juice

Soft drinks (e.g. soda pop) Sports and

energy drinks Fruit drinks or punches Whole or flavored

milk drinks Other sweetened drinks

Behavioral Health Providers (BHP)

- Integrated into Clinics
- Available to Providers to step into visit for brief intro to Diabetes, injection training
- Available to CDE, BC-ADM to step into visit or refer to address Diabetes Distress, Fear of Injections, Mental or Family Barriers



This Photo by Unknown Author is licensed under CC BY-SA-NC

<u>Diabetes Education 101 for</u> <a href="https://doi.org/10.101/journal-10.101/journ

- Target Audience
- This program is intended for mental health providers who treat current patients with or who are at-risk for diabetes.
- Learning Objectives
- At the end of this activity, the attendees should be able to:
- Describe major challenges of living with diabetes that may be the focus of mental health treatment
- Apply general knowledge of diabetes to mental health care of people with diabetes
- Discuss potential roles of mental health professionals in the care of people with diabetes
- Integrate supportive terminology to interactions with people with diabetes and with other healthcare professionals

FREE - American Diabetes Association

Behavioral Health in Diabetes <u>Care</u>

- Overview:
- This is a 7-module online learning program, includes a discussion forum once program is complete.
- Target Audience:
- Certified Diabetes Care and Education Specialists
 (CDCES)/Master/Certified Health Education Specialist (MCHES)
 Social Workers with experience working with people with diabetes
 - Other members of the diabetes care team
- CE Credit:
- 5.25 credit hours.

Endocrinology Clinic - ENDO



This Photo by Unknown Author is licensed under CC BY-SA-NC

<u>Dr. Richard Kleinmann - Volunteer</u>

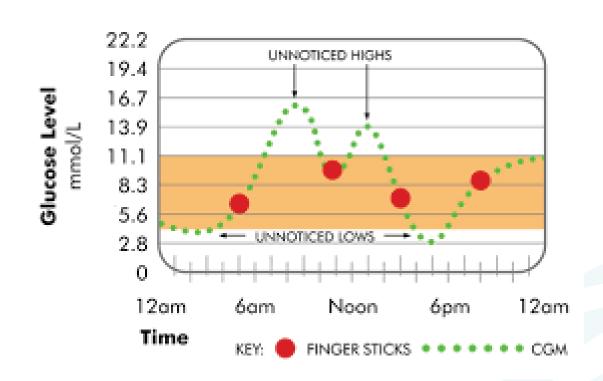
Specializes in Endocrinology, Diabetes &

- 1st & 3rd Tuesday/Month, 8am 2pm
- Common Referrals: Diabetes, Thyroid
- Functions as Consultant
- Initiates Prescriptions (PCP to complete refills)
- Order labs, Calls Patients with Results
- Performs Biopsies
- Requests Continuous Glucose Monitors
- Refers to BC-ADM for follow up between his visits
- Available for Phone Consults for Providers, CDE, BC-ADM
- Can only see Self-Pay Patients NO CHARGE

More Than Replacing Finger Sticks



Why Invest in Continuous Glucose Monitoring?



Continuous Glucose Monitoring System (CGMS)

- Low Alert Alarms
- High Alert Alarms
- Blood Sugar Rise, Fall Arrows
- Great for Those Fearful of Lows
- Ease of Testing
- Data can be shared with others
- Comprehensive Data

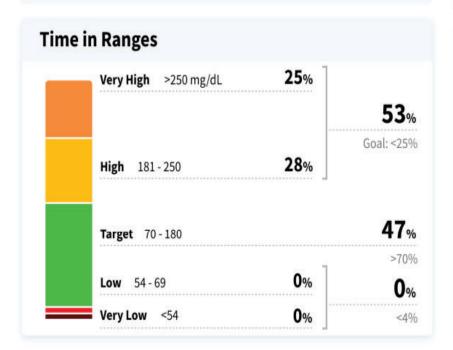
Paper Blood Sugar Log Sheets

M	Breakfast Pre Carbs Post Insulin		Lunch Pre Corbs Post Insulin		Dinner Pre Carbs Post Insulin		Bedtime Carts Insulin	
	าร	5/	25-70	1	138	2/	70	1
т	AL	51	112	7	145	9	102	
w	82	5/	130	/	94	q/	18/3	7
T	126	4/	103	7	97	81	95	1
F	lor	51	57	1	183	4		,

CGMS Glucose Data

Glucose Pattern Insights

Selected Dates: Jan 15 - Jan 28, 2023 (14 Days)



Generated: 01/28/2023 Page: 1 of 1

Time CGM Active: 88%

Average Glucose

Glucose Statistics

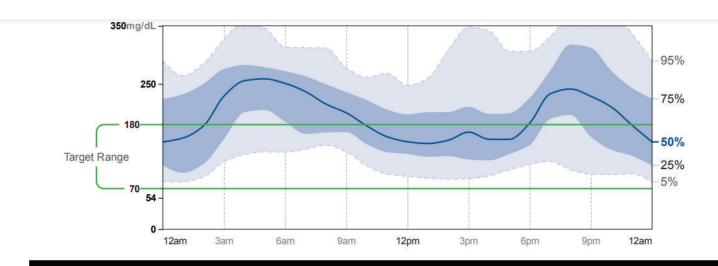
196 mg/dL Goal: ≤154 mg/dL

Glucose Management Indicator (GMI)

Approximate A1C level based on average CGM glucose level.

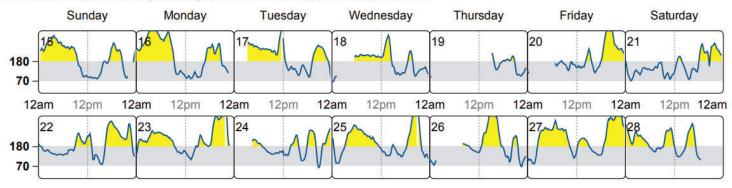
8.0% Goal: ≤7.0%

CGMS Patterns and Daily Data



DAILY GLUCOSE PROFILES

Each daily profile represents a midnight to midnight period with the date displayed in the upper left corner.



Free Style Libre 2









How to Obtain CGMS for Insured

Medicare/Medicaid

- Must be taking 3 injections a day
- Must order the reader
- Medicaid needs Prior Authorization
- Free Style Libre OR Dexcom
- Reimbursed for Training \$

Commercial

- Depends on Insurance company regarding # of injections.
- Do not have to order reader
- Requires Prior Authorization
- Free Style Libre or Dexcom
- Reimbursed for Training \$

CGMS for Self Pay

- No coverage for either Free StyleLibre 2 or Dexcom
- For Patient Assistance Card call Free Style Libre

Kintegra ENDO

- Grant Funded
- Kintegra ENDO Clinic Patient
- Appointment scheduled 4-6 weeks for download and receive new sensors
- Requirements:

Multiple Daily Injections, Hx of DKA, Hx of Hypoglycemia, Fear of lows, Frequent Hospitalization

What We Have Learned

- Value is based on more than reimbursement.
- Train and utilize other staff: Chronic Care Managers, Community Resource Advocates (CRA's). That way everyone is speaking the same language and message.
- ENDO Clinic Providers need reminder that Dr. Kleinmann does not take over care of the patient's diabetes.
- Primary Care Providers not quick to embrace CGMS. Not downloading data. Opportunity for training
- Use of CGMS for ENDO Patients, is it the CGMS or frequent follow up attributing to improvement? Potential study
- Advocate for patients at every resource juncture.

Summary

- Expand Services Chronic Care Model
- Increase resources for Patients Grants, Public Relations
- Sustain Diabetes Program Increase Program Value

Tools

- Draw on your past experiences
- Increase your skill set
- Build a multidisciplinary support team
- Advocate for patients as every resource juncture
- Do no be afraid to ask. The worst thing you could hear is no!





https://www.cdc.gov/diabetes/dsmestoolkit/index.html

American Diabetes Association



Standards of Care in Diabetes

Abridged Standards of Care for Primary Care Providers

Standards of Care App

https://professional.diabetes.org/