The Role of Team Based Care in the Treatment of Diabetes: Pharmacist

Pharmacist Role in Team Based Care
- Medication experts
- Adherence analysts
  - Solve reasons for non-adherence
- Problem solvers
  - Finding gaps in care
  - Create solutions to complex regimens

Pharmacist Role in Team Based Care
- Medication therapy management (MTM) services
- Synchronization of Medications
- Medication Packaging Services
- Immunizations
- DME Services
- Compounding

MTM Services
- Educate patient on disease states and medications
- Drug utilizations reviews and gaps in care
- Situation/Background/Assessment/Recommendation (SBAR) communication with MD

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Synchronization
• Taking a patient’s medication list and organizing them so that they all fall on the same day each month
• Helps to improve adherence and decrease forgotten refills

Prescription Packaging
• Syncing, organizing and enclosing a patient’s medications into calendar packs based on time of day
• Helps to improve adherence, keep a patient’s independence and prevent hospital visits due to non-adherence or accidental overdose

Immunizations
• Pharmacists can provide and administer any immunization except for yellow fever
• Increase access to care for millions of patients in helping to prevent many illnesses
  – On site
  – Off site

DME Supplies
• Pharmacy can be DME certified to help obtain insurance payment on many devices to decrease fall risk (canes, walkers, rollators, etc.)
• Diabetic shoes is another great option to help patients decrease inflammation and blister risk for patients’ feet
  **some payers have specific partners in network – check with insurance to be sure where a patient can go to get these supplies

Compounding
• Pharmacists can help create a medicine that is specifically tailored to exact dose and dosage form that is needed for a patient that is not available commercially
  – Solutions, suspensions, creams, gels, capsules, lollipops, suppositories etc.

Delivery of Medications
• Physical transport of prescription from pharmacy to patient outside of pharmacy walls
• Solution for transportation barrier for patients
  – Residential
  – Facilities
Wellness Screenings
- State Employees’ Insurance Board (SEiB) and Local Government Health Insurance Board (LGHIB)
- Schedule appointments to check:
  - Blood pressure
  - Lipid Profile/Glucose
  - Body Composition Analyzer
    - BMI, Total Body Water, Fat Free Mass, Basic Metabolic Rate
- If measurement or blood test is shown to be too high (state specific level) → refer to physician for follow-up

DSMES classes
- Diabetes education given to patients who are newly diagnosed or have uncontrolled diabetes type 1 or 2
- American Association of Diabetes Educators (AADE) or American Diabetes Association (ADA) Accredited
- Pharmacist able to help educate patients for up to 10 hours of initial training – 2 hours of follow up can be performed after that year

Facilitate Team Based Care
- Respect among all healthcare professionals
  - Recognize we are not the enemy to each other
  - We are all on the same team trying to accomplish the same goal

Facilitate Team Based Care
- Communication – build trust among healthcare professionals in your area
  - Face to face
  - Phone
  - Electronic

Facilitate Team Based Care
- Don’t be afraid to ask
  - See what problems can be simplified through collaboration
- Software development
  - EMR integration technology

Facilitate Team Based Care
- Example (Transition of Care)
  - Call to obtain discharge summary from hospital
  - Help to ensure patient goes to next physician visit
  - If coming from another physician, call and get current med list if patient unsure of what to take
What is the Diabetes Prevention Program (DPP)?
- DPP is evidenced based research published in 2002
  - How to prevent or delay Type II diabetes
    - Pre-diabetics and overweight - population of study
    - Interventions compared metformin and lifestyle changes
    - Multicenter clinical research study

What is the problem?
- The latest data from the Centers for Disease Control (CDC) shows that 84 million people in the US have pre-diabetes
  - Increased risk of developing type 2 diabetes

By the Numbers...
- Research shows that the National DPP results in weight loss of 5-7% of body weight, achieved by reducing calories and increasing physical activity
  - Reduced risk of developing type 2 diabetes by 58% overall
  - People over 60 years of age, the program reduced risk by 71%
  - Metformin was 31% effective

Pre-Diabetes Screening Check
- Are you a woman who has had a baby weighing more than 9 pounds at birth?
- Do you have a sister or brother with diabetes?
- Do you have a parent with diabetes?
- Find your height on the chart. Do you weigh as much as or more than the weight listed for your height?

Pre-Diabetes Screening Check
- Are you younger than 65 years of age and get little or no exercise in a typical day?
- Are you between 45 and 64 years of age?
- Are you 65 years of age or older?

Depending on answers, if 9 or above is scored, patient is at risk for pre-diabetes

Core Curriculum
- Core Session 1 – Welcome to the National Diabetes Prevention Program
- Core Session 2 – Be a Fat and Calorie Detective
- Core Session 3 – Three Ways to Eat Less Fat and Fewer Calories
- Core Session 4 – Healthy Eating

*16 Weekly Classes performed within 24 weeks
Core Curriculum
• Core Session 5 – Move those Muscles
• Core Session 6 – Being Active: A Way of Life
• Core Session 7 – Tip the Calorie Balance
• Core Session 8 – Take Charge of What’s Around You
*16 Weekly Classes performed within 24 weeks

Core Curriculum
• Core Session 9 – Problem Solving
• Core Session 10 – Four Keys to Healthy Eating Out
• Core Session 11 – Talk Back to Negative Thoughts
• Core Session 12 – The Slippery Slope of Lifestyle Change
*16 Weekly Classes performed within 24 weeks

Core Curriculum
• Core Session 13 – Jump Start Your Activity Plan
• Core Session 14 – Make Social Cues Work for You
• Core Session 15 – You Can Manage Stress
• Core Session 16 – Ways to Stay Motivated
*16 Weekly Classes performed within 24 weeks

Post-Core Curriculum
• Welcome to Post-Core
  • Healthy Eating and Nutrition Classes
  • Fats: Saturated, Unsaturated, and Trans-Fats
  • Food Preparation and Recipe Modification
  • Healthy Eating: Taking it one Meal at a Time

Post-Core Curriculum
• Physical Activity Classes
• Staying on Top of Physical Activity
• Stepping Up to Physical Activity
• Chronic Disease Classes
• Heart Health
• A Closer Look at Type 2 Diabetes
*One class chosen every month for 6 months
Post-Core Curriculum

- Managing Stress and Preventing Relapse Classes
- Balance Your Thoughts for Long-Term Maintenance
- Handling Holidays, Vacations, and Special Events
- Preventing Relapse
- Stress and Time Management

*One class chosen every month for 6 months*

Economic costs of Diabetes

- In 2012, the total cost of diagnosed diabetes was $245 billion (an increase of 41% over data collected just 5 years earlier)
  - This includes $176 billion in direct medical expenses

The National DPP is Cost-Effective

- Even after 10 years, those who had participated in the lifestyle change program had a 34% lower rate of type 2 diabetes
  - The cost per person of offering the lifestyle change program is about $500, depending on factors such as promotion, recruitment, staff, and logistics costs

Post-Core Curriculum

- Program Conclusion
- Looking Back and Looking Forward

Economic costs of Diabetes

- People diagnosed with diabetes incur 2.3 times the medical expenses of people without diabetes
  - The largest portion of these expenditures is for treatment of complications

The National DPP is Cost-Effective

- The cost to prevent diabetes is much less than the cost associated with diabetes
  - CDC data shows that the program is very cost effective and in many cases, cost saving
DPP Sustainability

- How is this sustainable?
- CMS released an updated payment model for DPP July 2017
  - Start to bill as soon as April 2018*
  - Value based payment model for prevention (first time)

Proposed plan*

How DPP relates to team based care for diabetes

- DPP motivates providers to talk to each other
  - As a patient loses weight, medications need to be changed
  - Follow up visit with physician is advised

How DPP relates to team based care for diabetes

- Accomplishing the goals of the program lead to better outcomes for our patients and for us
  - Essentially, the patient becomes a member of our team

Summary

- Pharmacists can help in many ways beyond filling prescriptions
- Having respect and earning respect for all disciplines of the healthcare team
- DPP is a new lifestyle change program to help delay or prevent the onset of diabetes
- DPP fits the agenda of team based care in optimizing outcomes for patients using the different strengths of the healthcare team
Thank You!

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