Diabetes Management:

How an Integrated Care Model Drives Adherence & Health Behavior Change

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Sponsored By: CENTENE Corporation

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Panelists

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About Us

~22M lives touched as of 6/30/16

Envolve Center for Health Behavior Change

50 states of clinical licensure

24/7 service

50 States and Puerto Rico

Collectively serving Medicaid, Medicare, Commercial & Employee Lives
Diabetes in the U.S.

Diabetes affects 37% of Americans

1 in 4 is at risk of developing diabetes (84 million)

1 in 11 Americans has diabetes (30 million)

Every 19 seconds, someone is diagnosed with diabetes.
Diabetes in the U.S.

*Diabetes costs the health system $245 billion annually... a number that is expected to double in the next decade.*

*$1 of $3 Medicare Dollars
*$1 of $5 Healthcare Dollars

*Amount spent caring for people with diabetes.

Annual medical spend on diabetics is **2.3x higher** than on non-diabetics.
Agenda

1. Detection
2. Intervention
3. Results
Using Pharmacy Claims Data

PDC<80%

Appears Nonadherent
- Dose Change
- Drug discontinued
- Hospitalization
- Drug supplied outside of benefit

True Nonadherence
- Out of refills
- Side effect
- Cost
- Transportation
- Mental illness
- Physical limitations
- Sensory difficulties
- PA needed
- Drug interaction
- Knowledge deficit

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42% of diabetics have an annual eye exam in the United States*

66.0% of diabetics have an annual eye exam at Magnolia Health

1. Detection
2. Intervention
3. Results
Health event identified through claims data

Re-enter cycle awaiting next health event

Current Industry Approach

Complete program

Intervention can take 60-90 days for claims data to be reviewed

Outreach

Engage

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On.Demand: Real-Time Diabetes Management

- Cellular Technology
- Cloud-Based Glucose Readings
- Supply Chain Coordination
- Simple Population Reports
We’ve moved *beyond* traditional disease management.

*of adult testing diabetics*
Layered Intervention

- Activation
- Compliance
- Smart Education
- Monitoring
- Triage
- Coaching
Maximizing Intervention

- Event-driven engagements powered by real-time data
- Accelerated intervention at “teachable moments” to increase retention
- Continuous adaptation to new participant behavior
Transforming Care Management

• Places new, credible clinical knowledge in the hands of every member of the care management team
• Helps drive “the next thing” in member orchestration
• Lays a foundation on which to build national medical management programs
• Creates valuable information for provider integration
Compare and Contrast

**Typical barrier analysis**

- Scripted, list of questions
- Patient feels like they are taking a survey
- Paternalistic, focused on pharmacist solving problem
- Doesn’t change behavior

**Motivational interviewing**

- Open ended questions to guide a conversation
- Respects patients’ autonomy and beliefs
- Member-centric, member engages in change talk
- Behavior changes
# More on Motivational Interviewing

<table>
<thead>
<tr>
<th>Component</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Empathy</td>
<td>Showing empathy through reflective listening and encouraging patients to elaborate on their perspective</td>
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<tr>
<td>Collaboration</td>
<td>Fostering collaboration and interaction with patient (querying patient ideas and incorporating patient suggestions)</td>
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<tr>
<td>Autonomy and Support</td>
<td>Eliciting comments from patients giving credence to their ideas</td>
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<tr>
<td>Direction</td>
<td>Focusing patients attention on their behavior throughout the call</td>
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<tr>
<td>Evocation</td>
<td>Eliciting change talk, evoking patient’s own reason for change, setting a plan for change</td>
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SeeMore: Envolve’s Mobile Vision Van

Transforming the health of the communities we serve, one person at a time.
SeeMore: The Seeing Sprinter

- Launched in May 2015
- 50,000+ miles
- 11,000+ vision screenings
- 4,000+ prescription glasses
Value Add → Vision Hardware Benefit

Benefit Utilization & Member Satisfaction

Retinopathy Presence & Retinopathy Progression

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1 Detection
2 Intervention
3 Results
28.5% prevalence rate of diabetic retinopathy in the United States*

23.0% prevalence rate of diabetic retinopathy among Magnolia members

*www.cms.gov: Measuring Health-Related Quality of Life for Patients with Diabetic Retinopathy
4.4% of diabetics in the United States have Vision Threatening Diabetic Retinopathy (VTDR)*

6.3% of diabetics at Magnolia Health have VTDR

*www.cms.gov/Measuring Health-Related Quality of Life for Patients with Diabetic Retinopathy
Annual Costs of Diabetic Eye Care

Average Annual Vision Claim Cost for Diabetic Members of Magnolia Health

- No Diabetic Retinopathy (E10.9, E11.9)
- With Diabetic Retinopathy (E10.3-E10.618, E11.3-E11.39)
Year-over-year improvement in medication adherence after motivational interviewing adopted
On.Demand Outcomes

Test strip utilization decreased PUPM by 69%

Test strip spend decreased PUPM by 27%

Study Period: Enrollment of August 2015 thru August 31, 2016 with 3 month claim run out allowed. Users” vs. non-users of GHT strips. Magnolia Health plan members only.
On.Demand Outcomes

- Decrease in average glucose levels\(^1\)
- Increase in compliance\(^2\)

\(^1\) 183 in August 2015 to 172 in November 2016
\(^2\) Increase in average number of times testing per engaged member per month in first six months of program; 29 in September 2015 to 37 in January 2016.

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On Demand Outcomes

Study Period: Enrollment of August 2015 thru August 31, 2016 with 3 month claim runout allowed. Users vs. non-users of GHT strips. Magnolia Health plan members only.

- **22% reduction** in ER spend PUPM
- **15% reduction** in ER Visits PUPM
- **14% reduction** in specialist medical spend PUPM

Insulin Spend
- Non-users increased spend by **16%**
- Users only increased spend by **7%**

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Improved Quality Measures

- Effectiveness of Care
- Access/Availability of Care
- Utilization & Relative Resource Use
- Medication Adherence
Transforming the health of the community, one person at a time.
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