

# Diabetes Management and Screening Training

May 20, 2025



### What is Diabetes?

- About 38 million adults have diabetes, and 1 in 5 of them don't know they have it.
- Diabetes is the eighth leading cause of death.
- Type 2 diabetes accounts for about 90% to 95% of all diagnosed cases of diabetes; type 1 diabetes accounts for about 5% to 10%.
- Diabetes is the No. 1 cause of kidney failure, lower-limb amputations, and adult blindness.
- In the last 20 years, the number of adults diagnosed with diabetes has more than doubled.
- Medical costs and lost work and wages for people with diagnosed diabetes total \$413 billion yearly.
- Medical costs for people with diabetes are more than twice as high as for people who don't have diabetes.



## Current Screening Guidelines

Screening Test	Description	Ranges
Hemoglobin A1c (A1c)	Measures average blood glucose level over the past two to three months.	- Normal: <5.7% - Prediabetes: 5.7% - 6.4% - Diabetes: >6.5%
Blood Glucose	Regular screening for abnormal blood glucose levels.	<ul> <li>Fasting:</li> <li>Normal range: 70-99 mg/dL</li> <li>Prediabetes: 100-125 mg/dL</li> <li>Diabetes: &gt;126 mg/dL</li> <li>Random:</li> <li>Normal range: &lt;200 mg/dL</li> </ul>
Albumin/ Creatinine Ratio (uACR)	Checks kidney function.	<ul><li>Normal: &lt;30mg/g</li><li>Abnormal: &gt;30mg/g</li></ul>
Estimated Glomerular Filtration Rate (eGFR)	Evaluates kidney function.	<ul> <li>Normal: &gt;90 mL/min/1.73m²</li> <li>Mild decrease: 60-89 mL/min/1.73m</li> <li>Moderate decrease: 30-59 mL/min/1.73m²</li> <li>Severe decrease: 15-29 mL/min/1.73m²</li> <li>Kidney failure: &lt;15 mL/min/1.73m²</li> </ul>
Dilated/Retinal Eye Exam	Detects diabetic retinopathy.	Nonproliferative: Retinal blood vessels damaged by high blood sugar may eventually close off. Proliferative: Retina forms new, abnormal blood vessels. New blood vessels can bleed into middle of the eye. Abnormal blood vessels can also form scar tissue that may pull on the retina, causing it to detach.



## Everlywell

## EverlyWell



**2025 Campaign Launch**: May & September

Target Membership: Members with gap in care according to HEDIS measure specifications

Kits Types: A1c, KED, & Diabetic Combination Kit

**Programs**: Opt-Out, Opt-In, & Auto-ship

**Opt-Out Program:** Members are notified that screening kits will be mailed to them, and they have the option to opt-out within a two-week window. This program will include Diabetic Combination Kit (A1c & KED) and stand-alone KED kits (members 75yrs+).

**Opt-In Program**: Members are notified via letter of eligibility and provided with a link/QR code to order via co-branded portal <u>Opt-In Portal (everlywell.com</u>). This program will include A1c kits for members that appear to have a GIC.

<u>Auto-Ship Program</u>: Members are notified via letter of their eligibility, and a screening kit would automatically be shipped to their home. This program will include A1c kits for members with prior results out of range.



## **Everlywell Opt-Out Program**

-Member receives notification letter that kits are being shipped

-Members are given a two-week time frame to opt-out

-Kit is shipped to members home with instructions and pre-paid return label

-Provider sends reminders within the first 45 days to prompt kit completion (letters, emails, SMS)

-Members are notified of results via letter, or can be accessed online via portal

-Members with abnormal screening results, 3 telephonic attempts & result letter.

-Result letter recommends follow up with their health care provider





-Member receives
notification letter outlining
kits eligibility and
instructions for accessing cobranded portal.

-Kit is shipped to members home with instructions and pre-paid return label

-Provider sends reminders within the first 45 days to prompt kit completion (letters, emails, SMS)

-Members are notified of results via letter, or can be accessed online via portal -Members with abnormal screening results, 3 telephonic outreaches and a letter

-Result letter recommends follow up with health care provider

## **Everlywell Auto-Ship Program**



-Member receives notification letter outlining kits eligibility and informed an A1c kit will ship to their home. -Kit is shipped to members home with instructions and pre-paid return label

-Provider sends reminders within the first 45 days to prompt kit completion (letters, emails, SMS)

-Members are notified of results via letter, or can be accessed online via portal -Members with abnormal results, 3 telephonic outreach attempts and letter

-Result letters recommends follow up with health care professional

### **Everlywell Talking Points**



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- Kits are voluntary <u>not</u> required
- There is no out of pocket cost to member
- ❖ All lines of business are eligible except IFP and Your Choice PPO
- Member rewards are available for completing A1c & eGFR kits
- PCP identification card is included in kits, if returned with the sample their provider will receive results.
- \* Results can be accessed via on-line portal and will also be shared with patient via letter
- Health Improvement Team supports outreach if Everly has been unsuccessful in reaching the member regarding abnormal screening results.

In-Home Kit Initiatives

### An easier way to take control of your health for no extra cost.

At-home lab testing kits are a convenient way to manage your health conditions. We have teamed up with Everlywell, a leading digital health company, to offer you at-home lab tests at no additional cost. These convenient tests are delivered to your doorstep and can be completed in the comfort of your home. You can readily monitor your health to spot a problem early when it's easiest to treat.

Benefits of Everlywell kit:

- Delivered to your doorstep
- Tests can be done in the comfort and privacy of your home
- · Easy-to-follow instructions
- Physician-reviewed results delivered to you by mail and online



To learn more, visit ucare.org/everlywell or simply scan this QR code using the camera on your phone.



#### Got questions? We can help!

Visit ucare.org/everlywell to get more information about what tests are offered. If you have questions about your plan coverage, please call the EssentiaCare Customer Service number on the back of your member ID card. As always, we encourage you to talk with your provider about results and appropriate screenings.

### Member Communications



At no cost to you, order your at-home lab testing kit today.



- Implemented marketing strategies to increase visibility and promote the collaboration
  - Member mailers
  - UCare landing pages: <u>www.ucare.org/everlywell</u>



Presentation title 10



## Diabetic Stars Measures



## Glycemic Status Assessment for Patients With Diabetes (GSD)

#### **Measure Description**

- The percentage of members 18–75 years of age with diabetes (types 1 and 2) whose most recent glycemic status (hemoglobin A1c [HbA1c] **or** glucose management indicator [GMI]) was at the following levels during the measurement year:
  - Glycemic Status < 8.0%.</li>
  - Glycemic Status > 9.0%.

#### **Measurement Period**

January 1 – December 31

#### Denominator

• Members 18-75 years as of the end of the measurement period who also met criteria for participation.

#### Numerator

- Identify the most recent glycemic status assessment (HbA1c or GMI) during the measurement year.
- The member is numerator compliant if the most recent glycemic status assessment has a result of >9.0% or is missing a result, or if a glycemic status assessment was
  not done during the measurement year. The member is not numerator compliant if the result of the most recent glycemic status assessment during the measurement
  year is ≤9.0%.
- If there are multiple glycemic status assessments on the same date, use the lowest result.

#### **Exclusions**

Hospice services, death, palliative care, living long-term in institution, frailty and advanced illness

## Kidney Health Evaluation for Patients with Diabetes (KED)



- The percentage of members 18-85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) and a urine albumin-creatinine ratio (uACR), during the measurement year.
- Exclusions:
  - Members with evidence of ESRD (ESRD Diagnosis Value Set) or dialysis (Dialysis Procedure Value Set) any time during the member's history on or prior to December 31 of the measurement year.
  - Members receiving palliative care (Palliative Care Assessment Value Set; Palliative Care Encounter Value Set; Palliative Care Intervention Value Set) during the measurement year.
  - Exclude members who meet any of the following criteria:
    - Medicare members 66 years of age and older as of December 31 of the measurement year who meet either of the following:
    - Enrolled in an Institutional SNP (I-SNP) any time during the measurement year.
    - Living long-term in an institution any time during the measurement year as identified by the LTI flag
      in the Monthly Membership Detail Data File. Use the run date of the file to determine if a member
      had an LTI flag during the measurement year.
  - Members 66 years of age and older as of December 31 of the measurement year (all product lines) with frailty and advanced illness.



### Eye Exam for Patients with Diabetes (EED)

#### **Measure Description**

The percentage of members 18-75 years of age with diabetes (types 1 and 2) who had a retinal eye exam.

#### Measurement Period

January 1 – December 31

#### **Denominator**

Members 18-75 years as of the end of the measurement period who also met criteria for participation.

#### **Numerator**

- A retinal or dilated eye exam by an eye care professional (optometrist or ophthalmologist) in the MY.
- A negative retinal or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the MY.
- Bilateral eye enucleation any time during the member's history through December 31 of the MY.

#### **Exclusions**

Hospice services, death, palliative care, living long-term in institution, frailty and advanced illness



## Summary



## Questions?

