
IMPROVE OUTCOMES FOR DIABETIC MEMBERS

Goal #1 – Increase Hemoglobin A1c (HbA1c) tests for members ages 18-75 with diabetes.

Goal #2 – Decrease HbA1c poor control (>9.0%) for members ages 18-75 with diabetes.

Goal #3 – Increase HbA1c control (<8.0%) for members ages 18-75 with diabetes.

Goal #4 – Increase diabetic members ages 18-75 whose blood pressure (BP) was adequately controlled (<140/90).

➤ Year One

- Evaluate accuracy and effectiveness of registries in addressing treatment gaps and improving outcomes.
- Identify and study root causes of HbA1c poor control (>9.0% during measurement period) in the Healthy Connections population.
- Identify and study root causes of poor BP control in the South Carolina Medicaid population with diabetes.
- Create registry with data fields necessary to assess members' HbA1c control and BP control.
- Meet with network providers to address technical implementation issues.
- Create and disseminate protocols for network providers to use.
- Conduct education and training of network providers regarding use of registry.

➤ Year Two

- Measure baseline for number of members enrolled in the registry.
- Measure baseline for number of HbA1c tests for members enrolled in registry.
- Measure baseline for members enrolled in the registry with HbA1c poor control (>9.0%).
- Measure baseline for members enrolled in registry whose BP was adequately controlled (<140/90).
- Measure baseline for members enrolled in the registry with HbA1c control (<8.0%).
- Create activities to address root causes of HbA1c poor control for members enrolled in registry.
- Create activities to address root causes of poor BP control for members enrolled in registry.
- Review registry data fields and modify as needed.
- Continuous education and training of network providers regarding use of registry and updates made to registry.
- Create continuous quality improvement plan, including information identifying project impacts, registry modifications needed, lessons learned, opportunities to scale project to a broader population, and key challenges.

➤ Year Three

- Increase number of members enrolled in the registry.
- Increase number of HbA1c tests for members enrolled in the registry.
- Decrease members enrolled in the registry with HbA1c poor control (>9.0%).
- Increase members enrolled in the registry with BP control (<140/90).

- Increase members enrolled in the registry with HbA1c control (<8.0%).
- Implement activities to address root causes of HbA1c poor control.
- Implement activities to address root causes of poor BP control.
- Review registry data fields and modify as needed.
- Continuous education and training of network providers.
- Conduct continuous quality improvement activities.