

Bree Collaborative | Diabetes
June 8th, 2023 | 8:00 – 9:30 a.m.
Virtual

MEMBERS PRESENT

Carissa Kemp, MPP, American Diabetes Association
Cyndi Stilson, RN, BSN, CMM, Community Health Plan of Washington
Kate Foster
Mary Beth McActeer, MLIS, Virginia Mason Franciscan Health

Nicole Treanor, RD, Virginia Mason Franciscan Health
Pam Kramer, Multicare
Robert Mecklenburg, MD, Virginia Mason (retired)
Sharon Eloranta, MD, Washington Health Alliance
Susan Buell, YMCA of Tacoma Pierce County

STAFF AND MEMBERS OF THE PUBLIC

Nicholas Locke, MPH, Bree Collaborative
Karie Nicholas, MA, G.C., Bree Collaborative

WELCOME

Nicholas Locke, Bree Collaborative, welcomed everyone to the Bree Diabetes Care workgroup. Dr. Norris Kamo, the workgroup chair is out of town. Dr. Robert Mecklenburg has been invited to facilitate the June meeting. Members approved the May minutes.

DISCUSS: TEAM-BASED CARE AND MEDICAL HOMES

Dr. Mecklenburg presented an update on material introduced at the May meeting and invited members to help draft recommendations. Dr. Mecklenburg shared evidence from the ADA standards of care that support diabetes care and education specialists, as well as three citations on how non-medical prescribers can manage diabetes, resulting in cost savings.

Members shared additional resources in the chat, especially about how to integrate community health workers onto the care team, and additional evidence about the efficacy of certified diabetes care and education specialists.

The workgroup drafted a potential recommendation on team based care:

“Preferred provider groups shall have a diabetes care team accountable for managing blood sugar, blood pressure, lipids, and smoking cessation. The group should include, as a minimum, a certified diabetes care and education specialist (either a registered dietitian nutritionist or nurse) and clinical pharmacist, with other members needed to address specific needs of patients. The team will be led by the certified diabetes care and education specialist and be supported by the primary care physician. The team will report results concerning glycohemoglobin, lipids, smoking cessation, and diabetes-related hospitalizations, and make them available to purchasers every six months.”

Following the conversation on team-based care, the workgroup discussed definitions and accreditation for Patient-Centered Medical Homes, using the AHRQ definition.

The workgroup agreed to add a sentence about PCMHs, but more work needs to be done to refine the recommendations:

“Care will be delivered according to the attributes of a patient-centered medical home, as defined by AHRQ.”

DISCUSS: MEDICATION

Dr. Mecklenburg moved on to share new information about evidence-based medications, drawing from the ADA standards. Currently, medications that received an “A” grading or above from the ADA related to cardiovascular health have been identified.

The workgroup discussed two potential recommendations related to medications. Medications and supplies with level A evidence as determined by the ADA guidelines will not require preauthorization. Drugs with grade A efficacy should be part of covered benefits.

The workgroup will continue to work with employers and purchasers on the medication purchasing recommendations, as well as expand to beyond cardiovascular health and into blood sugar monitoring.

NEXT STEPS AND CLOSE

Dr. Mecklenburg closed by sharing the current evidence table and inviting comments. Members agreed that the evidence and collaborative recommendation development process was currently working, but would like to look more into further population health and prevention approaches. Additionally, members would like to invite further participation from employers, purchasers, and patients.

PUBLIC COMMENT AND GOOD OF THE ORDER

Mr. Locke shared that this is his final diabetes workgroup meeting with the Bree. Dr. Emily Robson will help facilitate the transition with a new Bree staff leader. At the next workgroup meeting, the workgroup will continue to refine current recommendations as well as discuss new evidence. The workgroup’s next meeting will be on Thursday, July 14th from 8:00 – 9:30 AM.