

Remote Interventions Improving Specialty Complex Care (RIISCC)

Remote Patient Monitoring for Diabetes Patients (Type 2)

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Mission statement: Develop and test a new care delivery and payment model, utilizing remote patient monitoring in the home, for complex diabetic patients discharged from Nebraska Medicine.

CMS has provided funding for 3 years: Project started September 2014; we are currently planning for its sustainability beyond Year 3.

Who are the patients in the program:

- Diagnosis of type 2 diabetes
- At least 19 years of age
- English speaking
- Discharged from the hospital within the last month
- Not pregnant
- No liver disease
- Not on a waiting list for organ transplant



Description of the Program

Elements of the intervention:

- In-person/phone recruitment and an initial conversation about the program and its benefits.
- Medical Assistant (MA) delivers telemonitoring equipment to the patient's home, so that patient can upload data on blood sugar, weight, and blood pressure daily. MA conducts A1c testing at patient's home.
- Daily (M-F) remote patient monitoring for 90 days
- Coaching and education via weekly telephone calls between patient and RN coach.



Description of the Program

Elements of the intervention (continued):

- At the end of the 90-day intervention, the patient visits one of three clinics (Midtown Clinic, Bellevue Clinic, or Charles Drew Health Center). During this visit:
 - MA administers A1c test
 - MA administers diabetic retinopathy screening
 - MA facilitates telehealth nutritional counseling and foot exam with a CDE
- Monthly RN coach phone call for an additional 9 months.



Outcomes

Patient Characteristics

Number of patients enrolled through end of June 2016 = 1,138

Number of patients completed 90-day intervention = 552

64% between 26 and 64 years old; 36% 65+
57% female.

61% White; 32% Black or African American.

Proportion A1c > 9

The main health outcome in this program is Glycosylated hemoglobin, often referred to as HbA1c or simply A1c, which is the measure of a person's average blood glucose level over the last two to three months.

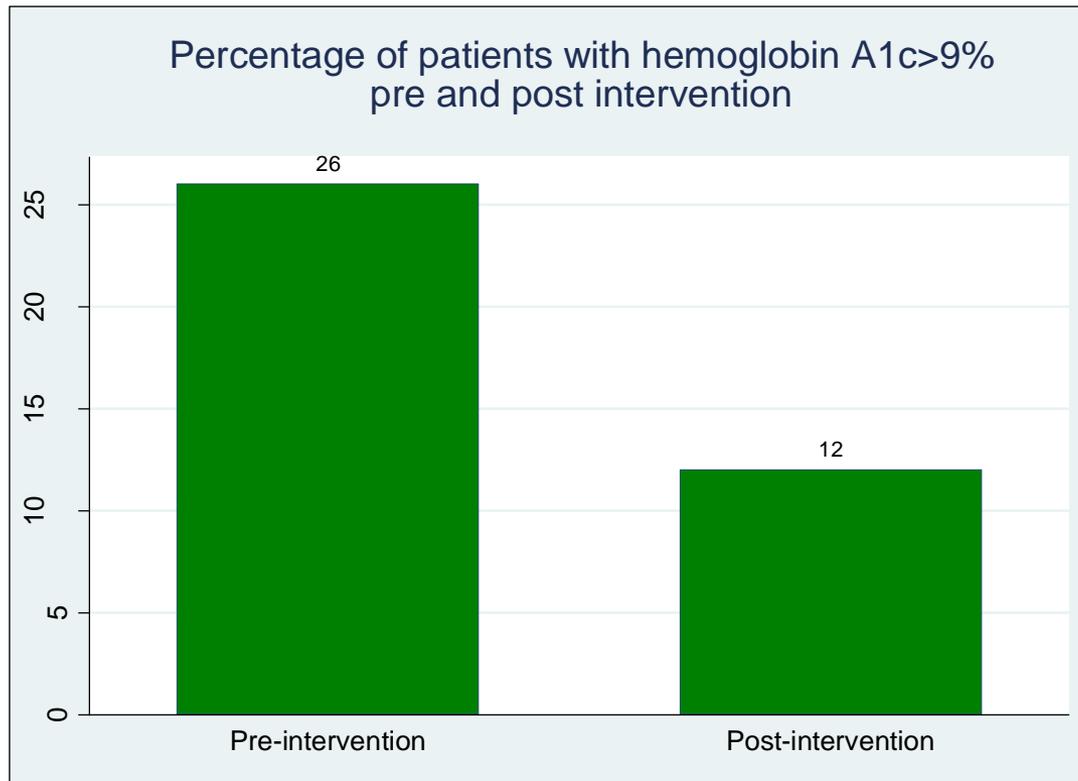
Participants with A1c > 9% at the beginning of the intervention equaled **26%**. When measured again at the 90-day appointment, only **12%** of participants had an A1c > 9%.



Outcomes

% participants with A1c > 9%:

- Pre-Intervention: 26%
- Post-Intervention: 12%

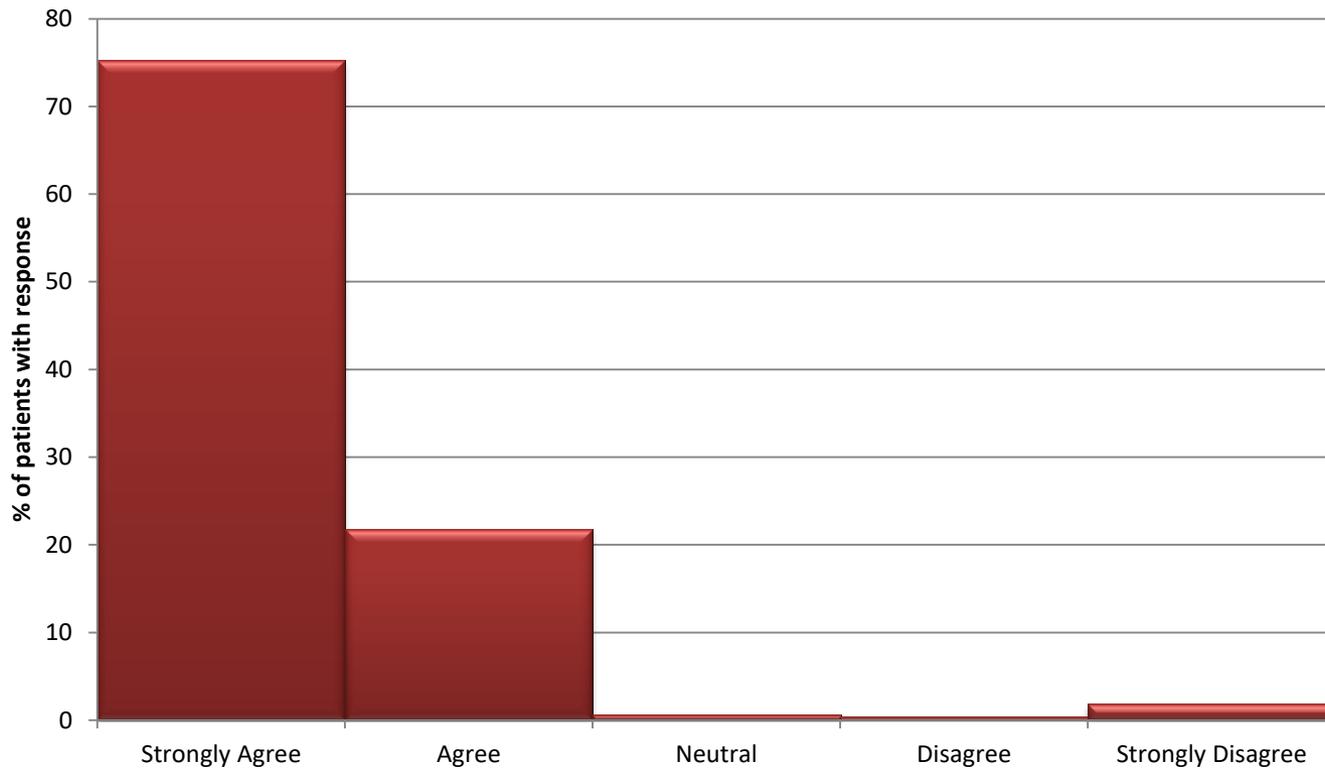


This is a decrease of 55% ($p < 0.001$).



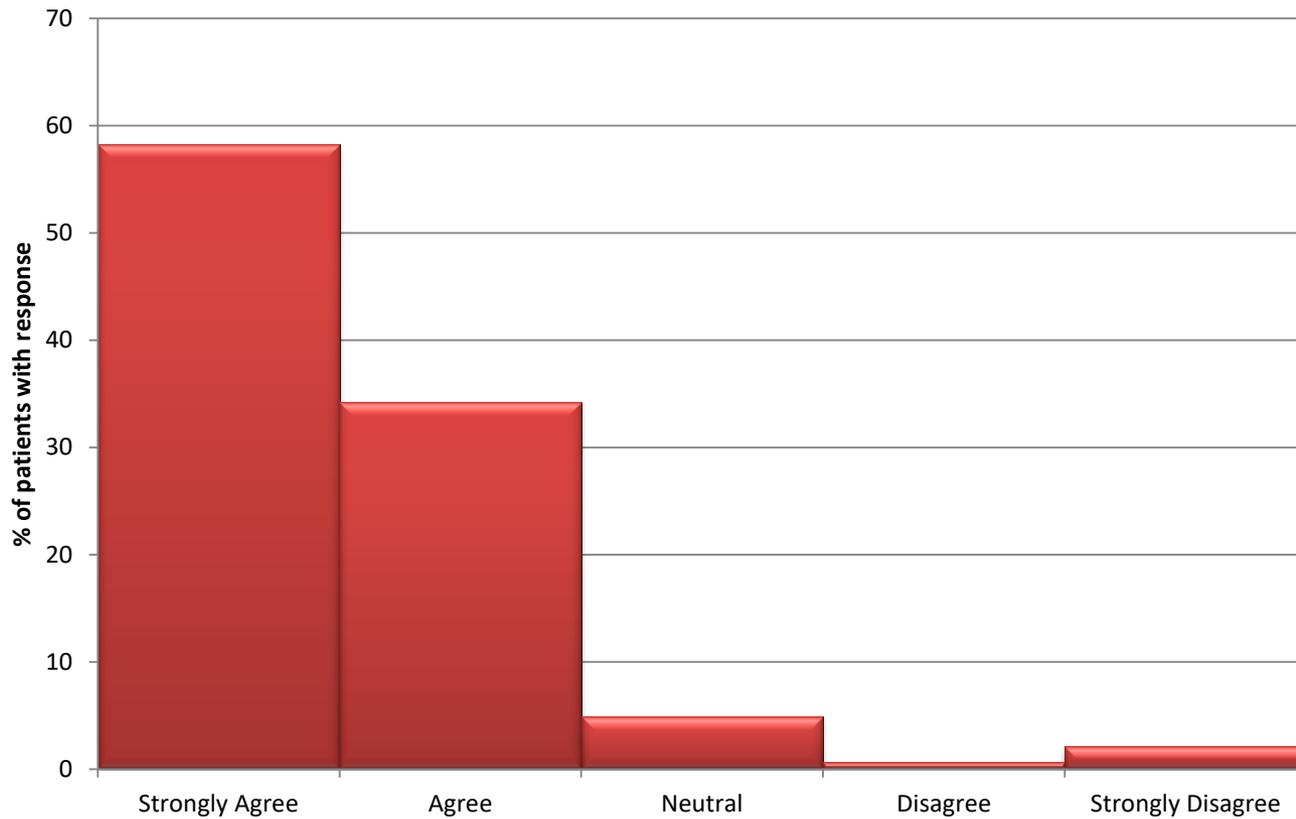
Translating the data into people

I felt the Nurse Coach was concerned about my health and my overall well-being.



Compliance

I learned more about my health and well-being by participating in this program.



Where is Remote Patient Monitoring Going?

- Shorter Hospital Stays
- Chronic Conditions on the rise
- Increasing regulations
- Limited resources
- Penalties for readmissions.



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