

# Implementing Shared Medical Appointments across Multiple Patient Aligned Care Teams: the role of coordinated care in the improvement of type 2 diabetes outcomes

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## Service

- Central Alabama Veterans Health Care System (CAVHCS) implemented a system wide type 2 diabetes mellitus (DM) shared medical appointments (SMAs) conducted by an interdisciplinary team of clinicians
- Patients with HbA<sub>1c</sub> > 9% were identified using a data warehouse. Ten patients for each SMA were invited to attend via a scripted telephone call. Providers also referred patients via consult
- The first hour of the SMA focused on facilitated discussions driven by patient suggestions. Patient specific “report cards” were reviewed during that time. The second hour focused on patient centered goal setting and medication adjustments by the clinical pharmacist and/or primary care provider
- Two weeks after the SMA, patients were contacted by the clinical pharmacist to review goals, self-monitoring glucose, medication and diet adherence, and provide medication adjustments
- Patients graduated from the SMA when they achieved their HbA<sub>1c</sub> goal

## Justification

- Diabetes mellitus is a disease state of increasing prevalence<sup>1</sup>, and educating patients on diabetes management is time consuming
  - This may make access to quality of care a challenge
- This SMA model employs an interdisciplinary team, which may improve quality of care indicators for chronic disease states<sup>2</sup>
  - Pharmacists play a large role in patient education, medication adjustment, and follow-up
- SMAs also provide patients with strong social support from peers in the group

## Transferability

- This SMA model was adopted by 12 patient aligned care teams (PACT) at 4 campuses within CAVHCS
- Spread via a series of local conferences outlining:
  - Concept of SMA
  - Accounts of SMA experiences
  - Standardized procedures
  - Team roles
- After attending these sessions, interested providers are invited to view an SMA via video conference

## Impact

- A total of 182 patients were identified who attended two or more diabetes SMA visits between November 2011 – August 2014
- Median change from baseline in HbA<sub>1c</sub> across all patients was -0.85%
  - Patients attending more SMA sessions achieved greater reductions in HbA<sub>1c</sub>
  - Maximum impact seen in patients having attended 4 sessions

Table 1. Baseline Demographics

Characteristic	n = 182
Mean age, years (range)	60 (47-83)
Male, n (%)	97
Race	
African American (%)	67
White (%)	32
HbA <sub>1c</sub> < 9 at initial visit, n (%)	45 (25)
Number of SMA attended	
2	57
3	43
4	22
5	17
6+	43

Table 2. Changes in HbA<sub>1c</sub> by Number of SMA sessions

	Baseline HbA <sub>1c</sub>	Final HbA <sub>1c</sub>	Change in HbA <sub>1c</sub>	P-value
2 visits	9.7	9.3	-0.05	0.026
3 visits	10.1	9.2	-0.9	0.0001
4 visits	10.3	9.4	-1.3	0.0002
5 visits	9.9	9.1	-0.8	0.0008
6+ visits	9.9	8.1	-1.2	0.0001
Overall	10	8.7	-0.85	0.0001

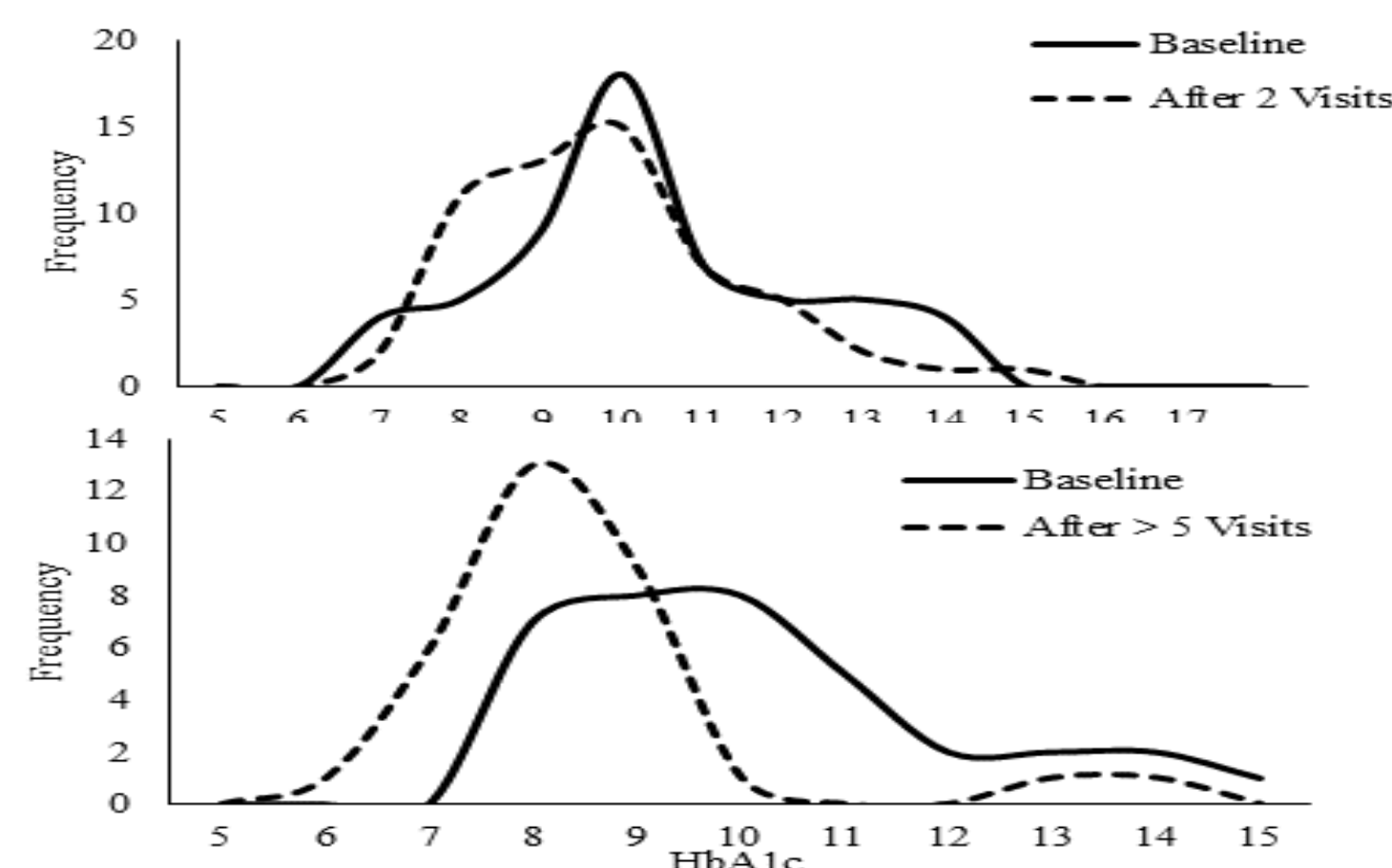


Figure 1. Changes in HbA<sub>1c</sub> from baseline by number of SMA visits

## Discussion

**Interesting findings:** It is important to note that patients attending six or more SMA visits were the only group to reach a median HbA<sub>1c</sub> < 9.0%. This group of patients were more likely to have received a telephone follow-up by the pharmacist in between SMA visits. This follow-up allows for additional medication adjustments and additional patient accountability.

**Conclusions:** Median baseline HbA<sub>1c</sub> in SMA participants was 10%, which was decreased by a median of 0.85% across all patients. The greatest benefit was seen in patients attending four or more SMAs, with a median HbA<sub>1c</sub> reduction of 1.2%. This result is consistent with previous reports of singular cohort DM SMA<sup>3</sup>. New PACTs in CAVHCS are now required to establish a DM SMA to improve patient care and interdisciplinary relationships as result of this quality improvement project.

## Disclosures

Authors of this presentation have the following to disclose concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation:  
Addison Ragan, Sara Britnell: Nothing to disclose.

## References

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