



# Erie Vital Signs

measuring progress. inspiring action.

## Employers Providing Health Insurance

### Diabetes is on the rise:

- Every day, more than 4,000 people in the U.S. are diagnosed with diabetes
- Diabetes affects 25.8 million people nationally, nearly 8% of the U.S. population. According to the CDC (2009), it affects 9.5% in Erie
- Another 35% (79 million) have pre-diabetes
- If the current trend continues, 1 of 3 American adults will have diabetes by 2050

### Diabetes impacts your company's healthcare costs:

- Costs associated with the condition are expected to account for 15% of all health expenditures in 2013 (\$1.6 trillion)
- Average medical expenditures for people with diagnosed diabetes were 2.3 times higher than those without diabetes

### Diabetes affects your company's bottom line:

Diabetes is among the top 10 most costly physical health conditions for employers, in terms of direct medical expenditures, absenteeism (15 million work days), short-term disability (107 million work days) and presenteeism (120 million work days). According to the National Business Group on Health, a person with diabetes incurs on average approximately two times the average medical expenditures of a person without diabetes.

### If you make positive changes, you will see a positive return:

According to the National Business Group on Health, a person with diabetes incurs on average approximately two times the average medical expenditures of a person without diabetes. Reducing the incidence of diabetes among your group health plan may result in cost savings.

This toolkit addresses six action elements: condition awareness and prevention; establishing a primary care relationship; stakeholder healthcare cost management, self-monitoring and management; nutrition, activity and exercise and available community support and resources.

### Step 1

#### Data discovery

- Ask your health plan or insurer/broker how people with diabetes are identified, diagnosed, educated, and treated.
  - Copy and paste the following request: Please provide me with a detailed report on how people with diabetes are identified, diagnosed, educated and treated. I'd like to see my company's results compared to your book of business, including diabetes education, preventive visits, testing, pharmacy costs, bariatric surgery, etc. I'd also like to see [HEDIS](#) measures (A1c test rate, retinal eye exam, lipid test rate, lipid medication rate, micro albumin test rate).
- Review Diabetes and the Workplace: How Employers Can Implement Change guide, developed by the American Diabetes Association and the American Association of Health Plans.
- If self insured, consider a data warehouse to better understand the mechanics of your members' health experience.

### Step 2

#### Review health plan design

- Ensure Plan Design complies with [ADA Standards of Care](#).
- Provide nutrition counseling.
- Ensure education by certified diabetes educator is covered.
- Cover flu and pneumococcal vaccinations at no cost to member.
- Cover podiatric and optic care.
- Ensure member access to cost and quality transparency tools, educate on use.
- Provide disease management programs; have coaches share ADA Standard of Care with diabetic members.
- Monitor Rx adherence; reach out with dosage and renewal reminders.
- Cover bariatric surgery for obese members, proven to resolve many Type II cases.
- Encourage Employees and their family members to select and use a primary care physician. If available, consider utilizing a Patient Centered Medical Home.
- Offer an Employee Assistance Program to encourage mental health.
- Remove financial barriers to medication adherence, including low/no co-pays on related drugs and procedures.
- If on-site health care is provided, ensure provider refers employees to their PCP for continuity of care.
- Set compliance goal related to HEDIS measures (as compared to TPA/insurer's book of business) and measure progress.

If you have questions regarding this toolkit, please contact the Erie County Diabetes Association at **(814) 454-0715**.

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### Step 3

#### Explore workplace interventions

- Sponsor wellness programs with incentives to educate on nutrition and exercise.
- Incentivize appropriate behaviors through a wellness program. Example: improve physical activity through weight-loss programs with incentives.
- Provide on-site diabetes support groups.
- Offer on-site flu and pneumococcal vaccinations.
- Sponsor health fairs for Employees to interact with community resources for those with diabetes.
- Provide self-service resources to those learning to manage disease for themselves or other family members (e.g., health plan or Employee Assistance Program) to build awareness.
- Ensure on-site cafeteria has appropriate food and drink choices for diabetics.
- [Subscribe](#) to the Erie County Diabetes Association newsletter.
- Establish a flexible work environment, in which Employees feel comfortable taking time off to seek coaching.

### Step 4

#### Review a case study

According to a 2008 case study conducted by Buck Consultants, the Polk County Government in Florida with over 8,000 covered lives reduced A1c levels by 1.5 mg/dl and increased medication compliance to 97% through offering a disease management program and providing related incentives (e.g., waiving the copay for formulary-preferred diabetic medications and supplies).

### Step 5

#### Consult online resources

- [Diabetes At Work](#)
- [Diabetes At Work — Designing Your Program](#)
- [Erie County Diabetes Association](#)
- [National Diabetes Education Program](#)
- [Center for Disease Control and Prevention \(CDC\)](#)
- [Journey for Control](#)
- [American Diabetes Association Standards of Medical Care in Diabetes — 2013](#)

### Step 6

#### Supporting research

##### Value-based Design

- Centers for Disease Control and Prevention, Advisory Committee on Immunization Practices (ACIP) Recommended Immunization Schedule for Adults Aged 19 Years and Older — United States, 2013 Supplements, February 1, 2013 / 62(01);9-19.
- Chernew ME, Shah MR, Wegh A, Rosenberg SN, Juster IA, Rosen AB, et al. Impact of decreasing copayments on medication adherence within a disease management environment. *Health Affairs (Millwood)*. 2008;27(1):103–12.
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##### Mental Health and Diabetes

- Anderson RJ, Freedland KE, Clouse RE, Lustman PJ. The prevalence of co-morbid depression in adults with diabetes. *Diabetes Care*. 2001;24:1069-1078.

##### Bariatric Surgery

- Buchwald H, Estok R, et al. Weight and Type 2 Diabetes after Bariatric Surgery: Systematic Review and Meta-analysis. *The American Journal of Medicine*. 2009;122(3):248-256.e.245.

##### Condition Awareness and Social Support

- Al-Qazaz HK, Sulaiman SA, Hassali MA, Shafie AA, Sundram S, Al-Nuri R, Salle F. Diabetes knowledge, medical adherence and glycermic control among patients with type 2 diabetes. *International Journal of Clinical Pharmacy*. 2011;33(6):1028-1035.
- Gallant MP. The influence of social support on chronic illness self-management: a review and directions for research. *Health Education Behavior*. 2003;30:170-195.
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