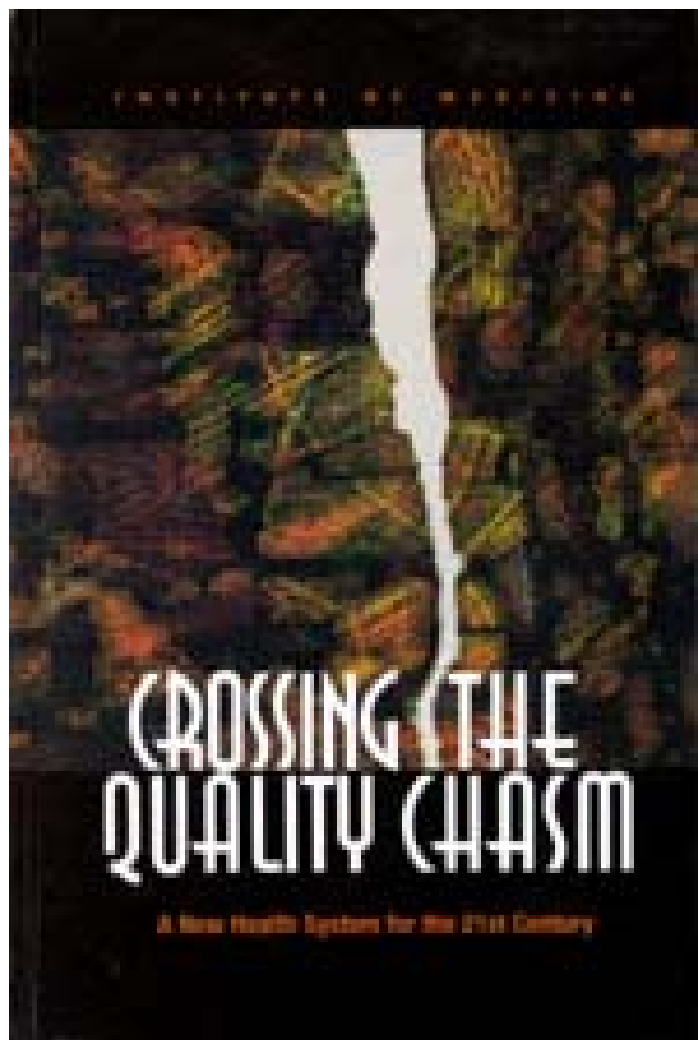


# The Disease Management Challenge: How to Get Value for Your Health Care Dollar

**Paul J. Wallace, M.D.**  
**Executive Director**  
**Care Management Institute**  
**Kaiser Permanente**

# Six Improvement Areas



- Healthcare should be:
  - Safe
  - Effective
  - Patient-centered
  - Timely
  - Efficient
  - Equitable

*The first people to  
cross the quality  
chasm will be  
individuals.*

*The goal has to be to get  
entire populations across.*

## ■ Disease-Population Management Solutions

- Assessing effectiveness and outcomes
- Potential measurement traps

## ■ Managing Populations within KP

- Work to date
- What we believe it will take to be successful in the future (hint: integration)

# Why is the Disease Management Industry on the Rise?

- Accelerating costs, especially for chronic care, have both purchasers' and providers' interest
- High prevalence of chronic conditions impacts nearly everyone or their family
- Availability of information technologies
- Experience and evidence that population based strategies work- they can improve the health of people with chronic conditions better than other approaches
- New recognition of the effectiveness of team care and the evolving role of the clinician and the member within that team

# Seek Out Population Management Solutions That:

- Are based on best evidence
- Manage the whole population
- Anticipate and actively manage multiple conditions (co-morbidities)
- Leverage common integrated systems involving the member, clinician, and elements of delivery system
- Have a robust capacity and capability for measuring the care of the entire population

# Measurement Advice: Be Cautious About Programs That:

- Focus only on high utilizers, or “opt-ins”, and claim dramatic short-term savings
- Carve-out single conditions
- Focus exclusively on short-term benefits
- Don't measure outcomes that are important to members and purchasers (such as quality of life and functional status)

# Be Cautious of Population- based Solutions That:

- Do not integrate all of the components of the healthcare system (e.g., scrutinize those that focus exclusively on direct patient contact without looping in the clinician)
- Do not address the needs of the whole population with a condition (e.g., only dealing with high acuity misses chances for prevention)
- Do not anticipate and accommodate members with more than one condition

*How we're addressing  
population-based care...*

***Making the “right thing” easier***

# Care Management Institute Strategy

## ■ Identify the right thing

- Promote and embed evidence-based medicine within systems to support practice
- Leverage measurement to guide performance improvement
- Implement better and best practices
- Deliver member centered and culturally competent care

## ■ Make the right thing easier

- Hire and support people to lead and engage in local implementation work
- Identify, develop, and implement effective and innovative models of care
- Leverage technology to support population-based care

# Incremental Cost of Chronic Conditions

	Prevalence Within KP Membership	Estimated Members Affected	Annual Incremental Cost (\$/member/year) (assumes 7% cost escalation rate)		Total Incremental Cost (\$ 2003 millions)
			2002	2003	
Asthma	2.1%	141,000	\$2,245	\$2,402	\$338
CAD	3.2%	129,000	\$9,234	\$9,880	\$1,278
Depression	6.2%	547,000	\$4,523	\$4,840	\$2,649
<b>Diabetes</b>	<b>8.7%</b>	<b>577,000</b>	<b>\$4,241</b>	<b>\$4,538</b>	<b>\$2,619</b>
Heart Failure	1.4%	94,000	\$14,964	\$16,011	\$1,510
One or More Conditions	16.1%	919,016			
<b>Total Incremental Cost of Chronic Conditions in “CMI Portfolio”</b>					<b>\$8,394</b>

“Incremental costs” are the annual “extra” healthcare costs per member with the chronic condition, *over and above* the healthcare costs of a member who does not have the chronic condition.

# Co-morbidities are Common

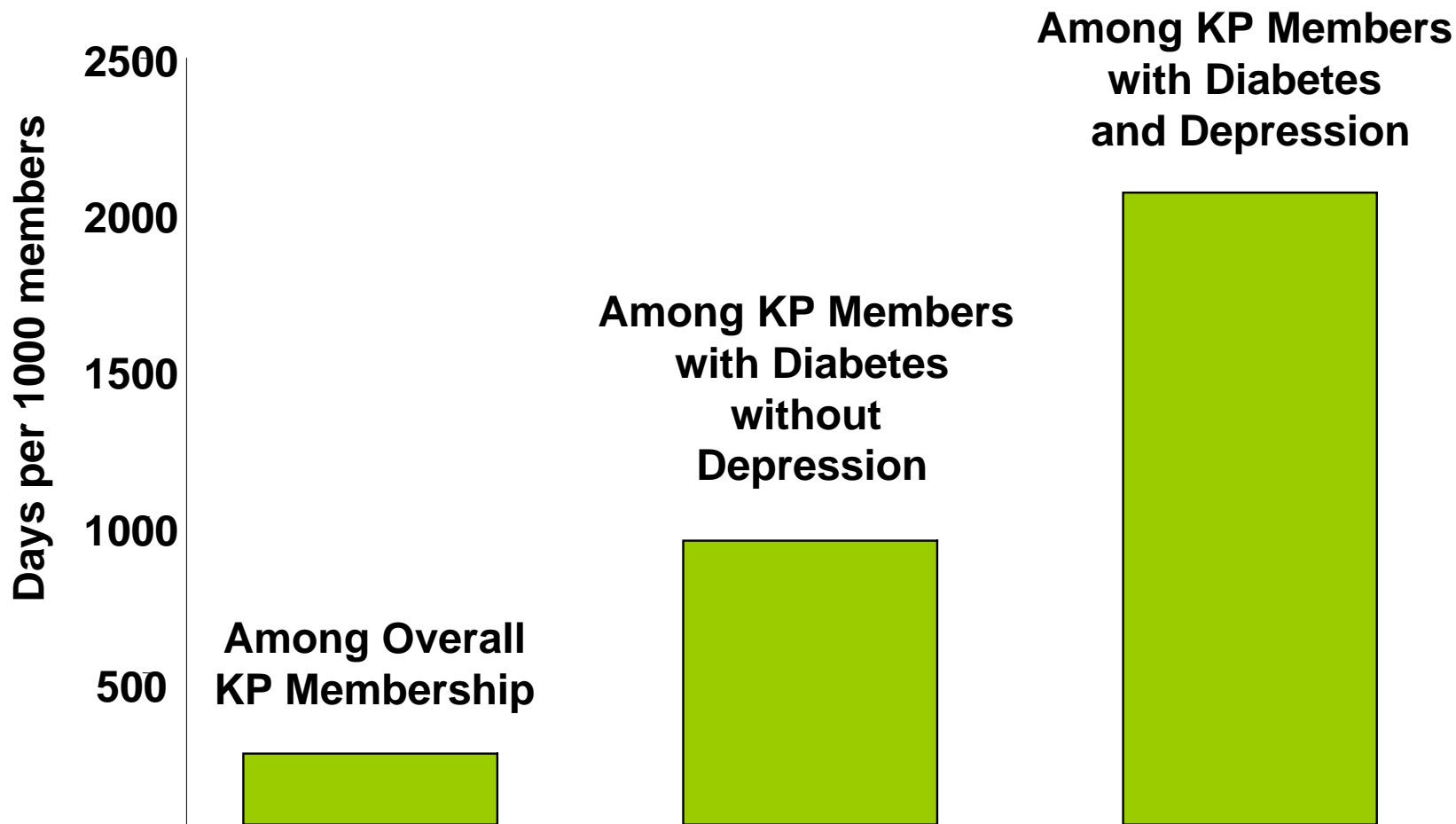
Were also in this cohort?

What percentage of  
 all members  
 those with CAD  
 those with Depression  
 those with Diabetes  
 those with HF

	CAD	Depression	Diabetes	Heart Failure
all members	3.2%	7.1%	7.9%	1.6%
those with CAD		11.9%	33.9%	22.8%
those with Depression	5.3%		11.6%	3.3%
those with Diabetes	13.6%	10.4%		8.2%
those with HF	46.3%	14.9%	41.6%	

# Co-morbidities... impact

## Hospital Day Rates Among KP Members, 2001



Source: CMI 2002 Diabetes Outcomes Report



## APPROACHES TO CULTURAL COMPETENCY IN ASTHMA CARE

# The Evidence

### Why is cultural competency important for asthma care management?

Culturally competent care is a set of skills and knowledge that encompasses four main components: cultural awareness, cultural knowledge, knowledge of epidemiological differences by ethnicity, and cultural skills. Understanding the role of culture in health care beliefs and practices and adapting our interventions accordingly will yield higher quality care



whites.  
mericans and  
insurance or  
ement. Asthma

## CMI ASTHMA GUIDELINES

*These guidelines are informational only. They are not intended or designed as a substitute for the reasonable exercise of independent clinical judgement by practitioners, considering each patient's needs on an individual basis. Guideline recommendations apply to populations of patients. Clinical judgement is necessary to design treatment plans for individual patients.*

*Note: These guidelines are recommended for adults with asthma. Patients younger than 18 are not included.*

Permanente Knowledge Connection - National Clinical Library - Netscape

File Edit View Go Communicator Help

Back Forward Reload Home Search Netscape Print Security Shop Stop

Bookmarks Netsite: <http://pkc.kp.org/> What's Related

**Permanente Knowledge Connection**  
Your National Clinical Library

Home | Help | Feedback

Clinical Guidelines | Reference Shelf | Clinician Ed | Member Ed | Drug, Lab & Imaging | Healthcare News | Operations

Google  in Kaiser Clinical Content Search Ask a Librarian Phonebook

**Clinical Guidelines...**  
[National Guidelines](#)  
[Colorado Guidelines](#)  
[Georgia Guidelines](#)  
[Group Health Cooperative Guidelines](#)  
[Hawaii Guidelines](#)  
[Mid-Atlantic States Guidelines](#)  
[Northern California Guidelines](#)  
[Northwest Guidelines](#)  
[Ohio Guidelines](#)  
[Southern California Guidelines](#)  
[CMI Evidence-Based Summaries](#)  
[New Clinical Technologies](#)

**The Reference Shelf...**  
[MD Consult](#)  
[Micromedex](#)  
[Ovid](#)  
[Permanente Journal](#)  
[PubMed](#)  
[STAT!Ref](#)  
[Taber's Medical Dictionary](#)  
[Northern California Clinical Library](#)  
[Northwest Clinical Library](#)  
[Full-Text Electronic Journals](#)


**Clinician Education...**  
[Epic Learning Modules](#)  
[Nationally Sponsored CME Conferences](#)  
[Online CME](#)  
[Two-Minute Tutorials](#)

**Member Education...**  
[Health Encyclopedia](#)  
[Healthwise Handbook](#)  
[KP Online](#)  
[Nationally-Endorsed Handouts, Publications](#)  
[NCAL Clinical Library Health Education](#)  
[Northwest CORE Health Education](#)  
[Ohio Health Education CORE Library](#)  
[SCAL HealthEdLink](#)

**Drug, Lab, & Imaging...**  
[California DME](#)  
[National Pharmacy](#)  
[Natural Medicines Database](#)  
[Natural Standard](#)

**Healthcare News...**  
[KP Stat](#)  
[Yahoo Health News](#)  
[CMIdeas](#)

**Operational Resources...**  
[AMR](#)  
[Care Experience Council](#)  
[Care Management Institute](#)  
[InsideKP](#)  
[KP Disaster Readiness](#)  
[KP Medicare Risk Adjustment](#)  
[National Clinician Directory](#)

**What's New**  
  
**August 30, 2003**  
[Test drive](#) the new regional editions of PKC! Learn more about the coming changes [here](#).  
 The AMA has developed a [Physician's Guide to Assessing and Counseling Older Drivers](#)  
 Be the first to know about new developments on PKC! [Read the latest newsletter](#)  
[Nationally-Endorsed Member Education Handouts](#) are now available on PKC  
[CMI's Oncology and Hematology Resources](#) are now available on PKC

Contact the PKC Help Desk at (510) 891-5051 or [PKC\\_helpdesk@kp.org](mailto:PKC_helpdesk@kp.org). Subscribe to the PKC Newsletter

Sponsored by the [Care Management Institute](#)  
 ©2003 Kaiser Permanente. All rights reserved. 7/03

Document: Done

<http://pkc.kp.org>

# The computer in the exam room...having the evidence when and where you need it



KPNW, THIRTY-THREE (3193-78-56) Sex: Male DOB: 9/14/1968 Age: 34

EDD: 11/18/2000

GA: 139w 6d



Charting



Exam



Medications



Letters

Allergies/Intol: **Penicillin Vk, Morphine, Naproxen, Sulfonamides**

All Detail

Verified on 07/30/02



BP

Weight

## BestPractice Alerts Reminder

\* This patient is overdue for an annual Hemoglobin Alc.

\* Our records indicate this patient uses Tobacco, click Yes to document advice to quit. (If patient has quit tobacco, you or your MA should update the patient's tobacco status in Social Hx)

Would you like to view the SmartSet?

Yes

No

Update

Query

Reports

Menu

Summary

tSets

Print AVS

&amp; Secure

Accept &amp; Stay

 Close Encounter

Cancel



Accept

KPNW,THIRTY-THREE (3193-78-56) Sex: Male DOB: 9/14/1968 Age: 34

EDD: 11/18/2000

GA: 139w 6d



Charting



Exam



Medications



Letters

## SmartSet - Decision Support

Allergies/Intol: **Penicillin Vk, Morphine, Naproxen, Sulfonamides**

All Detail

Verified on

07/30/02

 Standing  Future

Authorizing Provider: ZZQA, MD SCAN [5640]

 Cosign for Procedures

## Update



Health Maint

## Reports



Clinical



Previous Visit



Histories



Notes



KARE2

 BEST PRACTICE - HB A1C - SmartSet # 333 This patient is overdue for an annual Hemoglobin A1c. Procedures Procedures (single) Order Hemoglobin A1c TODAY Order Hemoglobin A1c FUTURE Not ordering Hb A1c - Pt Instructions (Right Click to View) BEST PRACTICE - TOBACCO ADVICE - SmartSet # 382 Our records indicate this patient uses Tobacco, click Yes to document advice to quit. (If patient has quit tobacco, you or your MA should update the patient's tobacco status in Social Hx) Procedures Procedures (single) Pt. not interested in cessation support (Clinician Advice) Pt. requested cessation support (Classes/Phone counseling)

Accept/Pend



Cancel



Accept

Note: Right click data row to edit

*“I don’t care how much  
you know,*

*until I know  
how much you care.”*

*—KP Member*

# Internet Tools: Member Self-Care

<http://members.kaiserpermanente.org/>

The screenshot shows a web browser window with the address bar displaying <http://members.kaiserpermanente.org/kpweb/membershome/entrypage.do>. The website header features the Kaiser Permanente logo and navigation links: Home, Sign on, Web site map, Search, Get health advice, Appointments/Rx refills, Your plan, Locate our services, and Mailbox. A red circle highlights the 'Get health advice' dropdown menu, which lists: Featured health topics, Health encyclopedia, Drug encyclopedia, Contact a professional, Health classes, Message boards, Clinical practice guidelines, and More... Below the menu, there are links for 'Find hints for a healthier weight' and 'Obesity: Is your child at risk?'. A central image shows a doctor examining a child. To the right, a blue sidebar contains a 'A vital step: Have you selected a physician?' section with a doctor's photo and a 'Featured health topics' section with a dropdown menu labeled 'Select a topic'. At the bottom left, a message states: 'We've made changes to our Web site. Tell us what you think.'

[Return to the Healthwise Table of Contents](#)

Go back to...

[Printer-Friendly](#)



New Search

## Type 2 Diabetes: Living with the Disease

### Topic Overview

This topic provides information for people who have read and understand the information in the topic Type 2 Diabetes: Recently Diagnosed. This topic will help you learn more about eating a balanced diet, monitoring your blood sugar levels, and other ways to care for yourself on a daily basis. If this kind of information is not what you are looking for, the following topics may meet your needs.

- If you have not been diagnosed with type 2 diabetes but want information on the disease, see the topic **Type 2 Diabetes** to learn about the disease, including how it is diagnosed and treated. You will also learn whether you are at risk for developing the disease and how you may be able to prevent it.
- If you have been told recently (within 3 to 4 weeks) that you have type 2 diabetes, see the topic **Type 2 Diabetes: Recently Diagnosed** for basic information about the disease, what caused it to develop, how it will be treated, and how to deal with your feelings about the diabetes diet.
- If you have type 2 diabetes, have read and understand the information in the topics Type 2 Diabetes: Recently Diagnosed and Type 2 Diabetes: Living with the Disease, and already have one or more complications (eye, kidney, heart, nerve, or blood vessel disease) related to diabetes, see the topic **Type 2 Diabetes: Living with Complications**. It will give you information about how to deal with your complications and how to stop or at least slow their progression.

### What is it like to have type 2 diabetes?

### Topic Contents

▶ [Topic Overview](#)

[Health Tools](#)

[FAQs](#)

[Diabetic Emergencies](#)

[Complications from Diabetes](#)

[When to Call a Doctor](#)

[Monitoring](#)

[Treatment Overview](#)

[Prevention of Complications](#)

[Living With Diabetes](#)

[Medications](#)

[Alternative Medicine](#)

[Other Places to Get Help](#)

[Related Information](#)

[References](#)

[Credits](#)

[Return to the Healthwise Table of Contents](#)

## **Foot care for people with diabetes**

### **Introduction**

When you have diabetes, your feet need a little extra care and attention. Diabetes damages the nerve endings and blood vessels in your feet, making you less likely to notice when your feet hurt. Diabetes also interferes with your body's ability to fight infection. If you develop a minor foot injury, it could become an ulcer or develop into a serious infection. With good foot care, you can prevent most of these problems.

Caring for your feet is so simple and easy. Most of the care can be done when you are bathing and getting ready for bed. Preventing injury to your feet is merely a matter of wearing properly fitted shoes and socks at all times.

These four things can help you keep your feet healthy.

- Check your shoes for stones or rough edges before you put them on.
- Like brushing your teeth, make looking at your feet part of your daily routine.
- Don't use home remedies to treat foot problems. Home remedies can hurt your feet.
- Get early treatment for any foot problem, even a minor one.

 [What is proper foot care for a person who has diabetes?](#)

 [Why do I need to care for my feet?](#)

 [How do I care for my feet?](#)

 [Where to go from here](#)

More information about diabetes can be found in these topics:



New Search

# Reaching out to the member...

SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE



September 14, 2000

██████████  
██████████  
██████████

Dear Mr. ██████████

Our records indicate you have diabetes. If you do not have a history of diabetes, please call the Bellflower Call Center at 1-800-823-4040, so we can update our computerized records. To help you better manage your health and to help us detect potential health problems that may arise as a result of your diabetes, Kaiser Permanente and the American Diabetes Association now recommend you have specific laboratory tests performed each year.

Your primary care physician has determined it is time for you to have the following yearly tests:

Hemoglobin A1c Lipid profile Microalbumin

If you have recently had these tests done, they do not need to be repeated. These tests have been shown to delay or prevent complications of Diabetes. With proper testing, the appropriate medications can be ordered for you which will help lower these risks.

Please take this letter to the lab and have the tests done. Lab locations and hours are included for your convenience. The results will be sent to your primary care physician and any needed follow up will be determined at that time. Thank you for making this part of your diabetes care a priority. We look forward to being partners with you in promoting your good health.

Sincerely,  
██████████  
Physician Director, Diabetes Care Program  
Bellflower Medical Center

\*\*\*\*\* TAKE THIS PAGE TO ANY KAISER LAB \*\*\*\*\*

Patient Name: ██████████ Medical Record Number: ██████████  
 Provider: ██████████ Provider Code: ██████████  
 Location: BEIMP INT Location Code: 059

[LABORATORY: PLEASE ASK IF THE PATIENT IS FASTING, IF SO, DRAW THE FASTING TEST. IF NOT FASTING, DRAW THE NON-FASTING TEST.]

Fasting-Diabetes Panel (Procedure Code: 837 7580)  
 Fasting Panel Includes: Microalbumin - Random, Hemoglobin A<sub>1c</sub>, and Lipid Profile

OR

If patient is Not Fasting, order Non-Fasting Diabetes Panel (Procedure Code: 837 1570)  
 Non-Fasting Panel Includes: Microalbumin - Random, HbA<sub>1c</sub>, D-HDL, and D-LDL

Specimen Requirements (Fasting or Non-Fasting Diabetes Panel):  
 Random Urine, Red Top, and EDTA Whole Blood

SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE



For the nearest Bellflower Laboratory location near you, please refer to the table below .

LABORATORY	LOCATION	HOURS
Bellflower Medical Center (562) 461-4867	5400 E. Rosecrans North wing, First floor	7:30 a.m. to 6:00 p.m. Mon - Fri Saturday: 7:30 a.m. to 1:00 p.m.
Cudahy Medical Office (323) 562-6477	7825 Atlantic Ave. 1 <sup>st</sup> floor	8:45 a.m. to 5:00 p.m. Mon - Fri
Imperial Medical Office (562) 507-5525	5445 E. Imperial Hwy. Building A, First floor, Suite 105	7:30 a.m. to 6:00 p.m. Mon - Fri
Whittier Medical Office (562) 507-5525	12470 E. Whittier Blvd. 1 <sup>st</sup> floor	8:45 a.m. to 5:00 p.m. Mon - Fri

In addition, Kaiser Permanente and the American Diabetes Association recommend a yearly eye examination or a retinal photograph to check the retinas of the eyes to prevent blindness. If you have not had an eye examination or retinal photograph in the past 12 months, please plan to have a retinal photograph performed by either calling the phone number below for an appointment or coming to a walk-in visit. (It is possible to arrange having this important screening test on the same day that you come for your laboratory tests.)

**Retinal Photographs:**

Appointment or Walk-in Ball:	Phone Number:
Diabetes Clinic Imperial Medical Office 5445 E. Imperial Highway, Downey, Ca. 90242 3 <sup>rd</sup> Floor, Building B, Suite 327	Call (800) 823-4040 for Walk-in Clinic Hours or Appointment

By Appointment Only:	Phone Number:
Bellflower Rosecrans Medical Office Ophthalmology and Optometry Department 5535 E. Rosecrans Avenue, Bellflower, Ca. 90706	Call (562) 461-3054 for an Appointment
Cudahy Medical Office 7825 Atlantic Avenue, Cudahy, Ca. 90201	Call (323) 562-6400 for an Appointment
Whittier Medical Office 12470 Whittier Blvd., Whittier, Ca. 90602	Call (562) 507-5533 for an Appointment

SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE



Seu local saúde e bem-estar em Medical Group  
Bellflower Medical Center

September 14, 2000

[Redacted]

Dear Mr. [Redacted]

Our records indicate you have diabetes. If you do not have a history of diabetes, please call the Bellflower Call Center at 1-800-823-4040, so we can update our computerized records. To help you better manage your health and to help us detect potential health problems that may arise as a result of your diabetes, Kaiser Permanente and the American Diabetes Association now recommend you have specific laboratory tests performed each year.

Your primary care physician has determined it is time for you to have the following yearly tests:

Hemoglobin A1c Lipid profile Microalbumin

If you have recently had these tests done, they do not need to be repeated. These tests have been shown to delay or prevent complications of Diabetes. With proper testing, the appropriate medications can be ordered for you which will help lower these risks.

Please take this letter to the lab and have the tests done. Lab locations and hours are included for your convenience. The results will be sent to your primary care physician and any needed follow up will be determined at that time. Thank you for making this part of your diabetes care a priority. We look forward to being partners with you in promoting your good health.

Sincerely,

[Redacted]  
Physician Director, Diabetes Care Program  
Bellflower Medical Center

\*\*\*\*\* TAKE THIS PAGE TO ANY KAISER LAB \*\*\*\*\*

Patient Name: [Redacted] Medical Record Number: [Redacted]  
Provider: [Redacted] Provider Code: [Redacted]  
Location: BE IMP INT Location Code: 055

[LABORATORY: PLEASE ASK IF THE PATIENT IS FASTING, IF SO, DRAW THE FASTING TEST. IF NOT FASTING, DRAW THE NON-FASTING TEST.]

Fasting-Diabetes Panel (Procedure Code: 8371580)  
Fasting Panel includes: Microalbumin - Random, Hemoglobin A1c, and Lipid Profile

OR

If patient is Not Fasting, order Non-Fasting Diabetes Panel (Procedure Code: 8371570)  
Non-Fasting Panel includes: Microalbumin - Random, HbA1c, D-HDL, and D-LDL

Specimen Requirements (Fasting or Non-Fasting Diabetes Panel):  
Random Urine, Red Top, and EDTA-Whole Blood

SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE SAMPLE



Seu local saúde e bem-estar em Medical Group  
Bellflower Medical Center

For the nearest Bellflower Laboratory location near you, please refer to the table below.

LABORATORY	LOCATION	HOURS
Bellflower Medical Center (562) 461-4967	5400 E Rosecrans North wing, First floor	7:30 a.m. to 6:00 p.m. Mon - Fri Saturday: 7:30 a.m. to 1:00 p.m.
Cudahy Medical Office I (323) 562-6477	7825 Atlantic Ave 1 <sup>st</sup> floor	8:45 a.m. to 5:00 p.m. Mon - Fri
Imperial Medical Office I (562) 507-3525	5445 E Imperial Hwy Building A, First floor, Suite 105	7:30 a.m. to 6:00 p.m. Mon - Fri
Whittier Medical Office I (562) 507-3525	12470 E Whittier Blvd 1 <sup>st</sup> floor	8:45 a.m. to 5:00 p.m. Mon - Fri

In addition, Kaiser Permanente and the American Diabetes Association recommend a yearly eye examination or a retinal photograph to check the retinas of the eyes to prevent blindness. If you have not had an eye examination or retinal photograph in the past 12 months, please plan to have a retinal photograph performed by either calling the phone number below for an appointment or coming to a walk-in visit. (It is possible to arrange having this important screening test on the same day that you come for your laboratory tests.)

Retinal Photographs:

Appointment or Walk-In Ball:	Phone Number:
Diabetes Clinic Imperial Medical Office I 5445 E Imperial Highway, Downey, Ca. 90242 3 <sup>rd</sup> Floor, Building B, Suite 327	Call 1-800-823-4040 for Walk-In Clinic Hours or Appointment

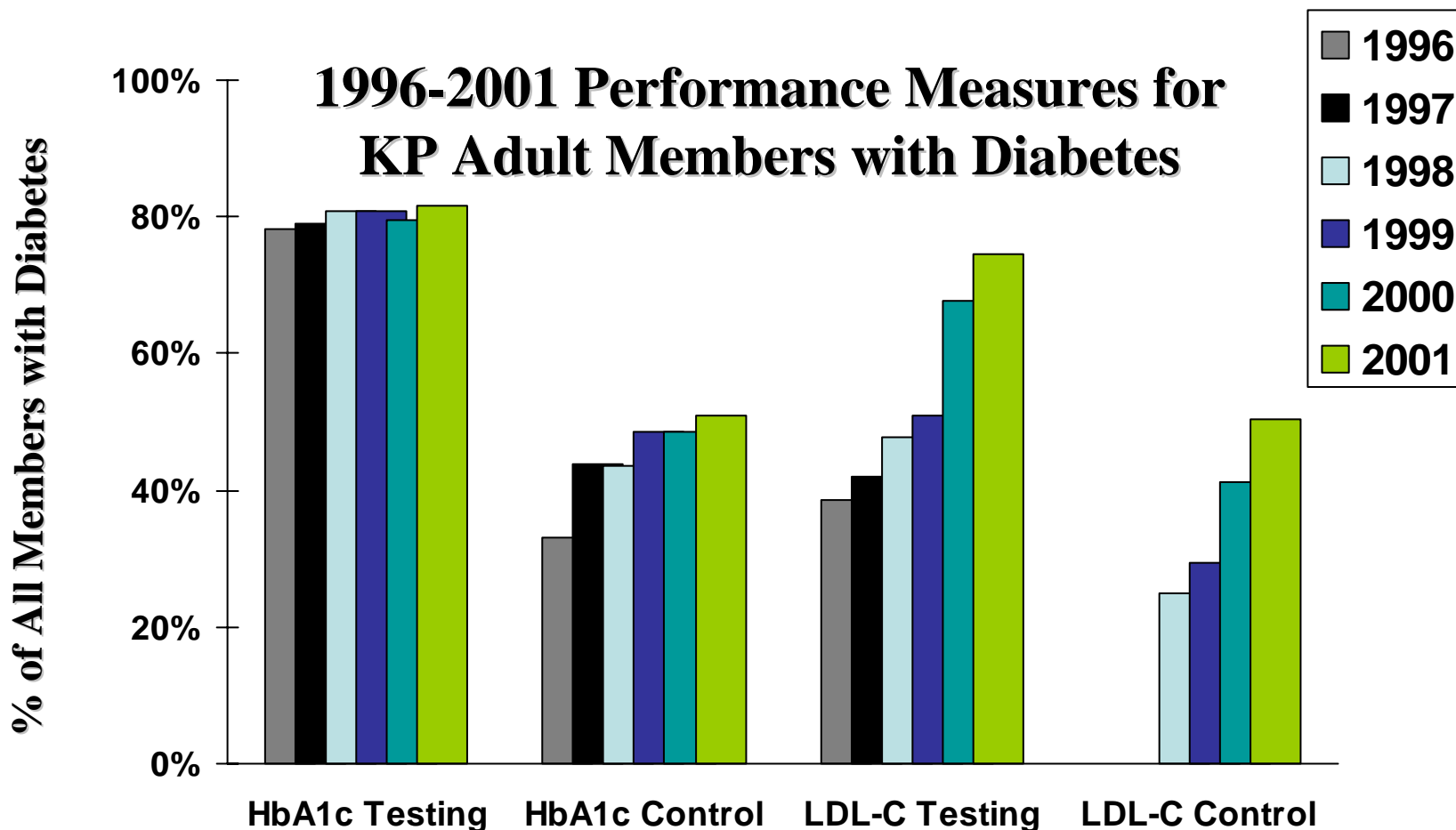
B: Appointment Only:	Phone Number:
Bellflower Rosecrans Medical Office I Ophthalmology and Optometry Department 5400 E Rosecrans Avenue, Bellflower, Ca. 90706	Call (562) 461-3084 for an Appointment
Cudahy Medical Office I 7825 Atlantic Avenue, Cudahy, Ca. 90201	Call (323) 562-6400 for an Appointment
Whittier Medical Office 12470 E Whittier Blvd., Whittier, Ca. 90602	Call (562) 507-3533 for an Appointment



# Automated Telephonic Outreach



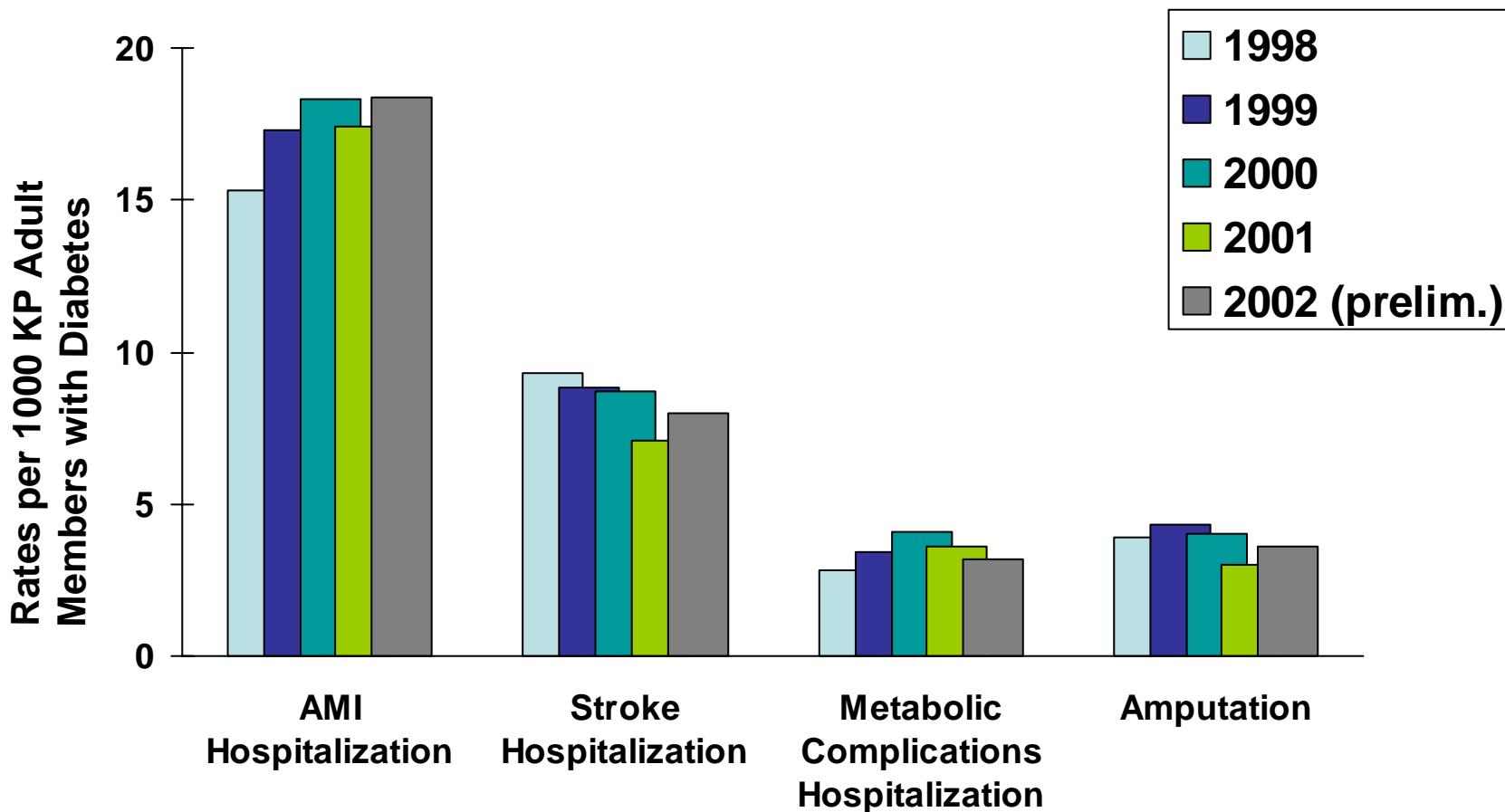
# Population Outcomes Reports



Among KP's adult members with diabetes

# Health Outcomes and Utilization

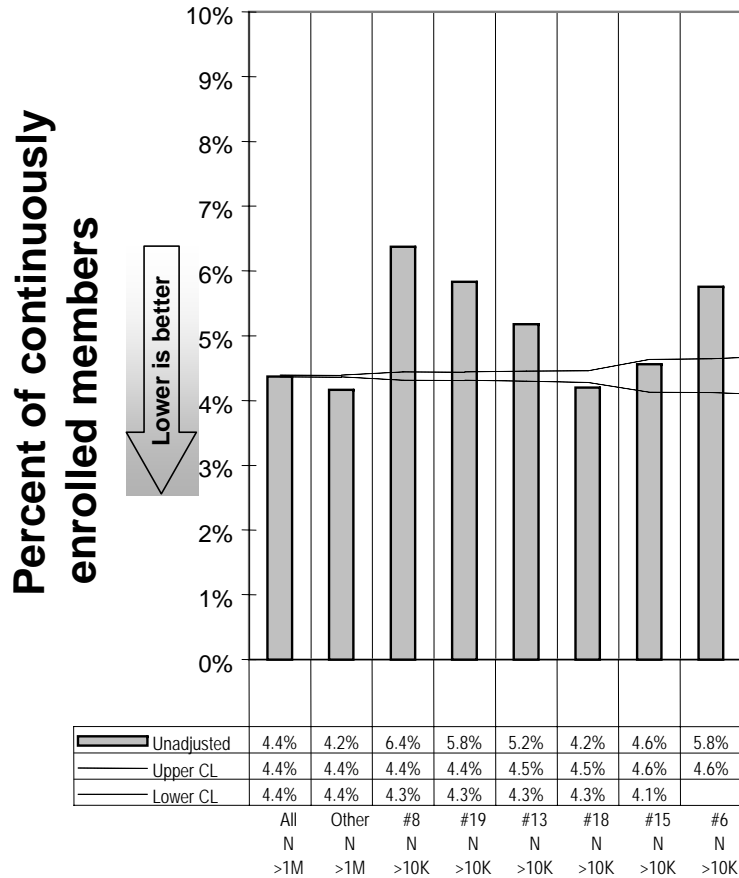
## Incidence Rates Among KP Adult Members with Diabetes



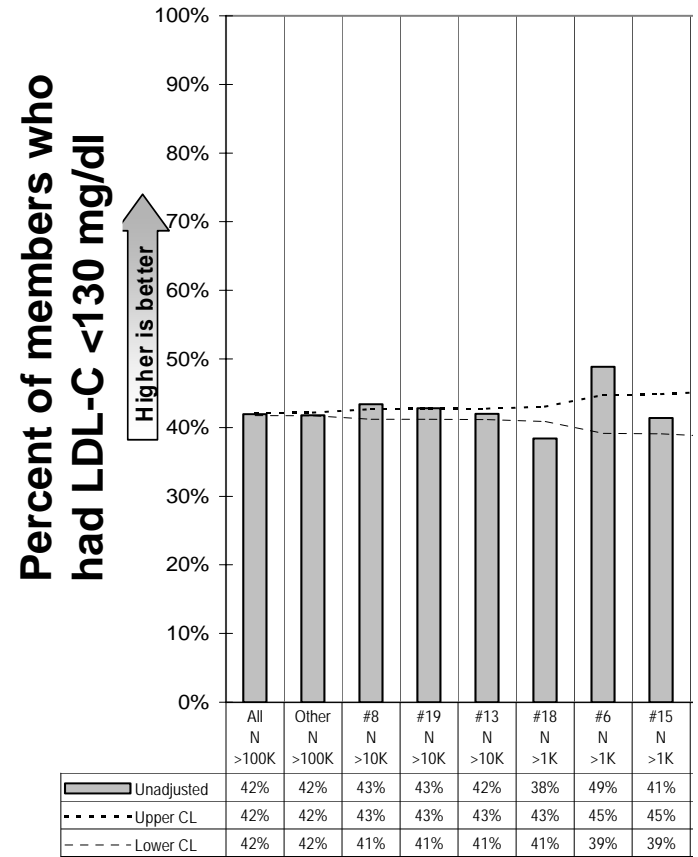
Among KP's adult members with diabetes

# Purchaser Specific Prevalence and Clinical Performance

## Diabetes Prevalence, age 64 and under



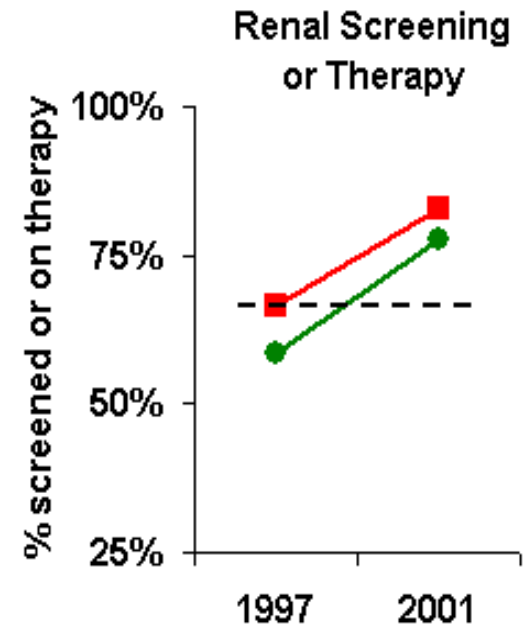
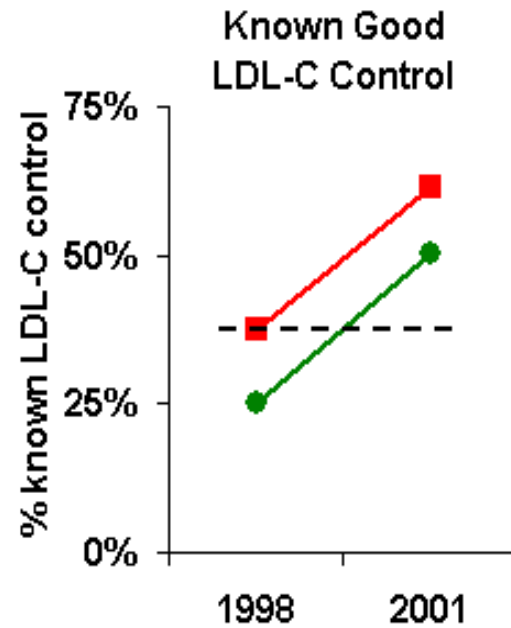
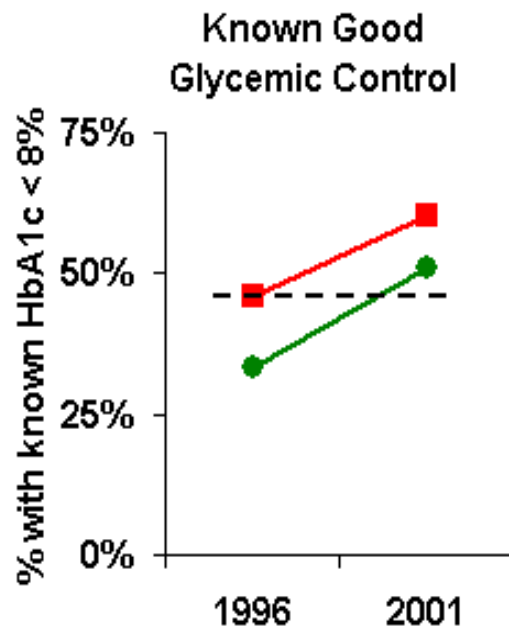
## Known Good Lipid Control in Diabetes, ages 18-64



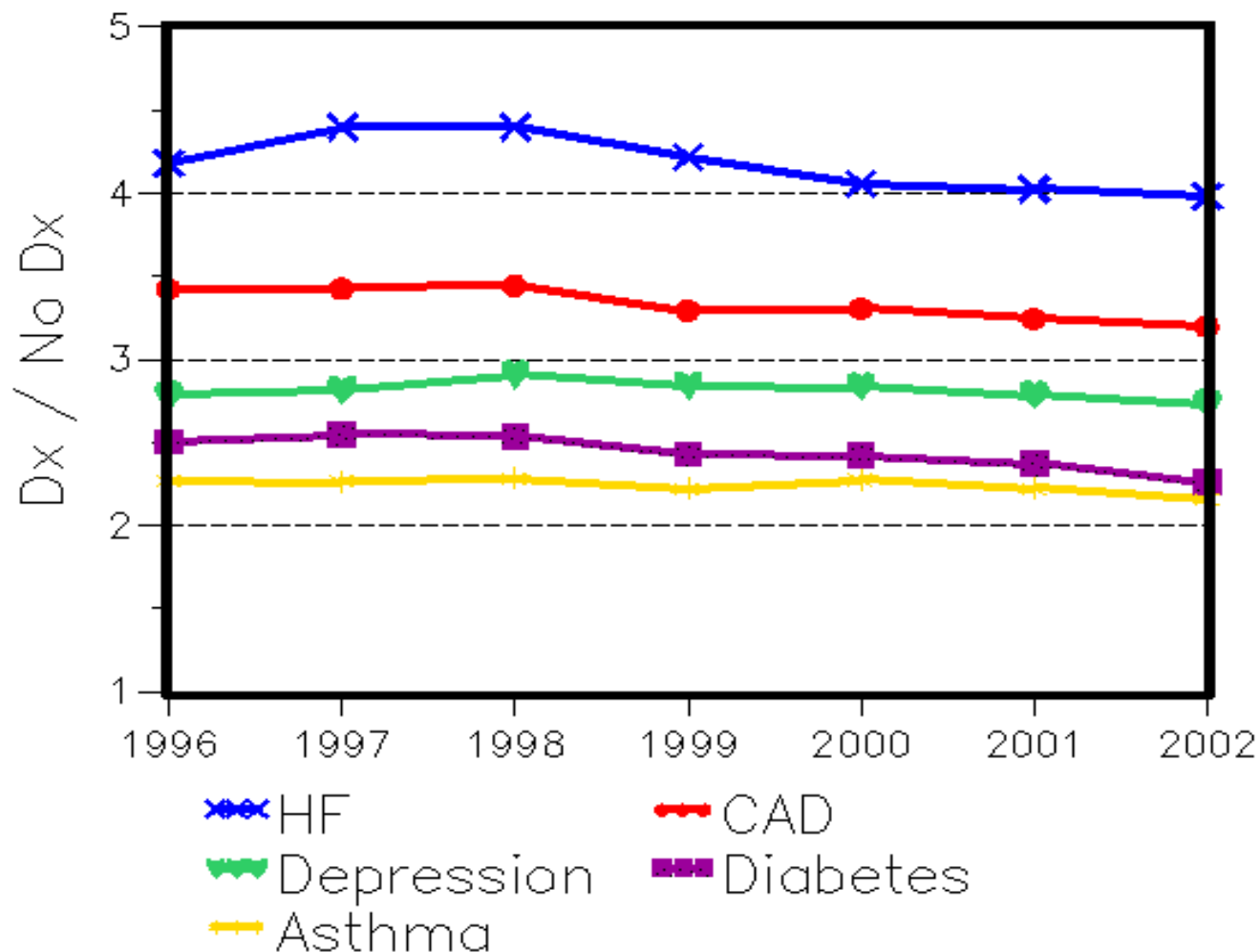
# Clinical Improvement is Occurring Across KP Regions

■ best performing KP Region during year

● average for all KP Regions during year



# Cost Trends in the Care of Chronic Conditions



“No Chronic Condition” normalized in each year to = 1.0

# Impact...

- Evidence\* indicates that performance improvements to date amongst KP's adult members with diabetes would be expected to yield:
  - 1,300 fewer MIs<sup>1</sup>
  - 1,800 fewer other cardiovascular events<sup>2</sup>
  - 1,100 fewer cases of neuropathy<sup>3</sup>
  - 1,500 fewer cases of retinopathy<sup>3</sup>
  - 2,100 fewer cases of nephropathy<sup>3</sup>

\* Including:

<sup>1</sup> LIPID Study Group *NEJM* 339:1349-57.

<sup>2</sup> 4S Study *Diabetes Care* 20(4):614-620.

<sup>3</sup> DCCT Research Group including *Diabetes* 46:271-86.

# Reminder: Seek Out Population Management Solutions That...

- Are based on best evidence
- Manage the whole population
- Anticipate and actively manage co-morbidities
- Leverage common integrated systems involving the member, clinician, and elements of delivery system
- Have a robust capacity and capability for measuring the care of the entire population