

Clinical Care Pathways

Type 2 Diabetes Mellitus

Why is the Clinical Care Pathways Program Important?

- ✓ Federal antitrust laws allow independent hospitals, physicians and other providers to form clinical integration networks (CIN) that may **negotiate prices with payers** only when the CIN engages in the facilitation of interdependence and cooperation between providers to reduce spend and improve clinical quality.
- ✓ The Federal Trade Commission (FTC) specifically requires CIN providers to **create and support clinical guidelines** that continually improve quality and that are utilized to measure network and individual provider performance.
- ✓ This program will **target various chronic disease states** and identify evidence-based clinical guidelines to address them.
- ✓ Guidelines were developed by teams of AdventHealth Provider Network (AHPN) primary care and specialist physicians and are **based on nationally accepted standards**. AHPN physicians participated directly in the design of this program.

38M

US adults have diabetes

1 in 5

adults with diabetes do
not know they have it



Type 2 Diabetes Mellitus (DM) Definitions

DM Clinical Care Pathway: Performance Monitoring Metrics

Glycemic Control:

- Percentage of adult members with diagnosis of Type 2 Diabetes with last A1c below 8
- Percentage of adult members with diagnosis of Type 2 Diabetes with last A1c greater or equal to 9. (*inverse metric*)

Testing for Type 2 Diabetes Complications:

- Lipid panel performed in the past 6 months.
- Urinary albumin-to-creatinine ratio performed in the past 12 months.
- LFTs performed in the past 6 months.
- All the above performed in the past 6 months.

ASCVD Primary Risk Reduction:

- Percentage of members 40-75 years old with Type 2 Diabetes on *moderate- to high-intensity* statin therapy.

Management of Concurrent Diseases:

ASCVD (CAD, h/o TIA, h/o CVA, h/o MI, atherosclerotic carotid artery disease)

- Percentage of members with diagnosis of Type 2 Diabetes and concurrent diagnosis of HFpEF or HFrEF with SGLT2i PDC $\geq 80\%$ in past 6 months.
- Members 40-75 years old with Type 2 Diabetes and concurrent diagnosis of CKD (G1-G5) on *high-intensity* statin therapy.

Chronic Kidney Disease

- Percentage of members with diagnosis of Type 2 Diabetes and concurrent diagnosis of CKD (G1-4) with SGLT2i PDC $\geq 80\%$ in past 6 months.
- Members with diagnosis of Type 2 Diabetes and concurrent diagnosis of chronic kidney disease with microalbuminuria (G1-5, A2-3) with ACEi or ARB PDC $\geq 80\%$ in past 6 months.
- Members 40-75 years old with Type 2 Diabetes and concurrent diagnosis of CKD (G1-G5) on *high-intensity* statin therapy.

Heart Failure

- Percentage of members with diagnosis of Type 2 Diabetes and concurrent diagnosis of HFpEF or HFrEF with SGLT2i PDC $\geq 80\%$ in past 6 months.

Hypertension

- Members with diagnosis of Type 2 Diabetes and concurrent diagnoses of Hypertension and microalbuminuria with ACEi or ARB PDC $\geq 80\%$ in past 6 months.
- Members 40-75 years old with Type 2 Diabetes and Hypertension on *high-intensity* statin therapy.

Obesity

- Percentage of members with diagnosis of Type 2 Diabetes and concurrent diagnosis of obesity or morbid obesity (BMI ≥ 30) with GLP-1a or GLP-1a + GIPa PDC $\geq 80\%$ in past 6 months.
- Members 40-75 years old with Type 2 Diabetes and concurrent diagnosis of obesity on *high-intensity* statin therapy.

Diabetes Mellitus Definitions

DM Performance Score Calculation Methodology

Report Limited to: Clinically Integrated Network providers with ≥ 10 DM patients.

Patient Denominator: Determined by the metrics above with the results between 6 and 17, based on concurrent conditions and age range.

Patient Numerator: ✓ for a metric met, ✗ for a metric not met, leave blank for a metric that does not apply and check the ⚡ for no A1C given within the time frame.

Patient Score: Numerator/Denominator.

Provider Score: The average of all DM patient scores attributed to the provider.

Practice Score: The average of all DM patient scores within a practice.

Network Score: The average of all DM patient scores within the network.

DM Star Performance Rating Calculation Methodology

For a star performance rating, the deciles were calculated for all baseline provider data. Then the deciles were assigned half stars by decile with a minimum of one star, providing the DM star targets for 2025 (subject to change each year).

Baseline Percentile	Score Range	Star Rating
0-10 Percentile	0.00% - 30.95%	1
11-20 Percentile	30.95% - 34.06%	1
21-30 Percentile	34.06% - 37.11%	1.5
31-40 Percentile	37.11% - 39.80%	2
41-50 Percentile	39.80% - 42.15%	2.5
51-60 Percentile	42.15% - 44.59%	3
61-70 Percentile	44.59% - 46.81%	3.5
71-80 Percentile	46.81% - 49.74%	4
81-90 Percentile	49.74% - 54.43%	4.5
91-100 Percentile	54.43% - 100.00%	5