The Diabetic Group Visit – The Nuts and Bolts

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Disclosure of Relationships with Commercial Companies:

Marc Shalaby, MD, FACP

Consultantship: Pfizer

Speakers Bureau: Pfizer
Early Strategic Planning

- Identify the diabetic population
- Identify those with basic diabetes education
- Identify interested patients – mail “invitation”
- Increase patient awareness
- Identify Outcome Measures
- Develop documentation tools
- Plan out the itinerary for each group session
- Roll Out the group session
- Post-session documentation and data gathering

Identifying Our Diabetic Population

- Pulled data from scheduling / billing database
  - From July 2003 to December 2003
  - counted any patient with ICD-9 code 250.0

- Cross-referenced our diabetic education list

- Developed final list of patients to be contacted
Invitation Letter

- Brief introduction to the program
- Eligibility requirements
- Selection Process
- Invitation to Participate
- RSVP to Contact Person

[Sample Letter included in Handout Packet]
Increase Patient Awareness

- Place a sign in the office waiting room or in exam rooms

**DO YOU KNOW YOUR BLOOD PRESSURE?**

IF YOU ARE DIABETIC YOU SHOULD!

ASK YOUR DOCTOR TODAY!!

**DO YOU KNOW YOUR HEMOGLOBIN A1C?**

IF YOU ARE DIABETIC YOU SHOULD!

ASK YOUR DOCTOR TODAY!!

**DO YOU KNOW YOUR LDL CHOLESTEROL?**

IF YOU ARE DIABETIC YOU SHOULD!

ASK YOUR DOCTOR TODAY!!

Develop Outcome Measures

• Easily identified Diabetes Targets
  - Hemoglobin A1C
  - LDL Levels
  - Blood Pressure

• Health Maintenance targets
  - ASA use
  - Pneumovax / Flu Vaccinations
  - Foot / Eye Exams

• Patient Satisfaction Survey
Documentation Tools

- Documentation of the group session occurs at the time of the group visit.

  - Vitals and Physical Exam (foot exam)
  - Health maintenance notes (e.g. eye exam)
  - Prescriptions needed / provided
  - Labs slips needed / provided
  - Time spent on education
  - Provider / assistant name and signature

[Sample group session note included in the hand-outs]
Group Visit Progress Note

Patient Name________________ Provider ____________

Date_______
Time_______ BP____ mm Hg
Weight_______ lbs.  Pulse_______ bpm

Fingerstick Results (3 month average)
Fasting_________
2-hour after meals   , , , , ,

Foot exam:
[ ] Pulses ______ [ ] Skin integrity_______

[ ] Nails ______ [ ] Monofilament result____

Med Refills needed:
______________Rx provided [ ]
______________Rx provided [ ]
______________Rx provided [ ]

Labs Needed:
______________Rx provided [ ]
______________Rx provided [ ]
______________Rx provided [ ]

Dilated Eye Exam [ ] date______
Podiatrist Visit [ ] date______
Education__________________________

Time spent on education______

Provider name____________ initials ______
Provider name____________ initials ______
Provider name____________ initials ______

Notes__________________________

_______________________________

Documentation Tools (cont..)

- Diabetic Flow Sheet filled out at the time of the regular office visit.
  - Diabetes targets
  - Health maintenance targets
  - Group visit participation

[Sample Diabetic Flow Sheet included in the hand-outs]
## Diabetic Care Flow Sheet

<table>
<thead>
<tr>
<th>Targets/Measures</th>
<th>Frequency</th>
<th>Date/Result</th>
<th>Date/Result</th>
<th>Date/Result</th>
<th>Date/Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure</td>
<td>Q 3-4 mos</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal &lt;130/80 mm Hg</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>LDL</td>
<td>Q 3-4 mos</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Goal &lt; 100 mg/dL</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hemoglobin A1c</td>
<td>Q 3-4 mos</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal &lt;6.5%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Microalbumin</td>
<td>Yearly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Goal &lt; 30mg ALB/g</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ophtho Exam</td>
<td>Yearly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumovax</td>
<td>Q 6 yrs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Influenza Vaccine</td>
<td>Yearly</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foot Exam</td>
<td>Q 3-4 mos</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Visit Attendance</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Group Session Pre-work

- Arrange for time in your schedule (2-hour block) for yourself and a medical assistant / nurse to accompany you
- Arrange for educator prn (diabetes educator, dietician, etc.)
- Arrange for conference room (near your office)
  - Large enough to have people sit in a circle
- Notify patients of meeting time (call is preferable)
  - Reminder call one week prior to session
- Prepare a Diabetes Group Support Packet
Diabetes Group Support Packet

- **Patient interest forms**
  - To be filled out by patients before each session starts.
  - Reminder of goals of group visit
  - Topics of interest to be discussed now or in future

- **Agenda**

- **Stretching / Warm up exercise sheets**

- **Educational material pertaining to each session**
Cast of Characters

• Primary Care Provider
  - Identifies appropriate patients
  - Provide education and health maintenance needs
  - Facilitate the meeting
  - Provide care and answer questions

• Diabetes Educator / Nurse
  - Prepares agenda
  - Arranges for “speakers
  - Oversees operations
  - Prepares pre-session charts and packets
  - Co-facilitates the meeting
Cast of Characters (cont.)

• Support Staff (RN / MA)
  - Prepares room
  - “Arrives” the patient
  - Takes vitals and gathers information
  - Cleans up after session
  - Insures billing forms are complete

• Group Members
  - Active participation in discussions, educational sessions
Day of Session Pre-work

• Generate Billing / Encounter Forms
• Gather blank group progress notes
• Transport charts to conference room
• Medical assistant to bring BP Cuff
• Set up chairs in a big circle
• Assistant set up at a table to “arrive” patients
Upon Arrival......

- Patients pay their co-pay

- Vital signs are taken

- Group session progress note partially filled in
  - Med refills needed, Labs needed, eye exam, etc.

- Patient concerns ascertained
Group Visit Progress Note

Patient Name______________ Provider ____________

Date ______
Time _____ BP _____ mm Hg
Weight _________ lbs.  Pulse _____ bpm

Fingerstick Results (3 month average)
Fasting_________
2-hour after meals _____, _____, _____, _____

Foot exam:
[ ] Pulses _____  [ ] Skin integrity_______

[ ] Nails _____  [ ] Monofilament result _____

Med Refills needed:
___________Rx provided [ ]
___________Rx provided [ ]
___________Rx provided [ ]

Labs Needed:
___________Rx provided [ ]
___________Rx provided [ ]
___________Rx provided [ ]

Dilated Eye Exam [ ]  date_____
Podiatrist Visit [ ]  date_____

Education__________________________

__________________________

Time spent on education___________

Notes____________________________

_________________________________
The First Visit

- Sincere welcome
- Overview of the purpose of the group visit
  - Emphasize the session is a “well visit”
  - Preventative health care needs
  - Educational time / Questions answered
  - Learn and share experiences
  - Enjoy each other’s company
  - General outline of how sessions will run
  - Address concerns / questions taken earlier
Group Session Agenda

1:00 – 1:15 pm  Patients are “arrived”
1:15 – 1:20 pm  Introduction / “Ice breaker”
1:20 – 1:30 pm  Exercises / Warm up
1:30 – 1:50 pm  Education Session
1:50 – 2:00 pm  Questions / Answers
2:00 – 2:30 pm  Foot exams / Time with Doctor
2:30 – 2:40 pm  Wrap –up
2:40 – 3:00 pm  Documentation of visit / sign billing forms
Potential Educational Topics

• General information about diabetes
• Goals and Targets
• Diabetes health maintenance
• Medications and how they work
• Foot Care
• General Nutrition / Reading Labels
Ideal Group Sessions

• Involve 8-12 patients
• Sessions last 2 hours (including 30 minutes for documentation
• Patients have some previous diabetic teaching
• Every 2-4 mos between regular office visits, but may be more frequent early on
• Cover general education topics - allows for more efficient office visits.
A little about billing....

- This is medical visit and is treated as such
  - Patients pay their usual co-pay
  - Billed as a Level-3 return visit (99213)
  - “Site of Service” Rules apply
Financially Feasible / Lucrative

• Normally our average is 6 return visits / 2 hours
  – Billing is $70 \times 6 = $420

• Group sessions need 6 patients to break even

• Group sessions with 10-12 patients
  – Billing is $70 \times 10 \text{ (or 12)} = $700 - $840
  – Equivalent to seeing a patient every 10-12 minutes in the office for two hours
Do the group visits affect outcomes?

<table>
<thead>
<tr>
<th></th>
<th>Before</th>
<th>After</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average BP</td>
<td>138/73</td>
<td>128/69</td>
</tr>
<tr>
<td>% at BP goal</td>
<td>44%</td>
<td>60%</td>
</tr>
<tr>
<td>Average Hgb A1c</td>
<td>7.56</td>
<td>7.12</td>
</tr>
<tr>
<td>% at Hgb A1c&lt;6.5</td>
<td>20%</td>
<td>28%</td>
</tr>
<tr>
<td>Average LDL</td>
<td>90</td>
<td>89</td>
</tr>
<tr>
<td>% at LDL &lt;100</td>
<td>64%</td>
<td>84%</td>
</tr>
</tbody>
</table>
Summary... Diabetic Group Visits

- Promote disease awareness
- Improve communication and contact time
- Nice change of pace
- Improve outcomes
- High satisfaction rate with patients and providers
- Can make the office visits more efficient
- Financially viable if documented appropriately
All you need to get started.

- Downloadable files available from ACP
  - Copy of this talk
  - Invitation Letter
  - Diabetes Group Visit Support Packet
  - Diabetic Flow Sheets
  - Group Visit Progress Notes
Thanks for your attention.