

# Chronic Disease Connections

An e-bulletin created for healthcare systems working with patients to control their diabetes and high blood pressure.

## Health Promotion is Newsworthy . . .

### **Request for Proposals Posted: Clinical Innovations for Prediabetes Assessment and Referral**

A request for proposal (RFP) for Clinical Innovations Prediabetes Assessment and Referral 58817004 was posted recently. The application deadline is Monday, August 15, 2016 at 4:00 pm. To view the funding opportunity, go to: <https://www.iowagrants.gov/index.jsp>. From the Main Menu, click on Grant Opportunities in the left side box. The funding opportunity is ID#169721. Eligible applications are for-profit, not-for-profit, or governmental entities *that provide direct patient care*. The purpose of this RFP is to plan and implement sustainable policy or systems change(s) to assess patients with prediabetes or patients who are at high risk for developing type 2 diabetes through screening and testing and to increase referrals to the National Diabetes Prevention Program (NDPP). Questions about the RFP must be submitted through IowaGrants.gov. Please forward this information to anyone you think may be interested.

## Pre-diabetes and Diabetes News . . .

### **Researchers developing new methods to address T2D among those relying on food banks**

In a 1,300-word article, the New York Times (6/17, Saint Louis, Subscription Publication) reported that researchers have started “pursuing innovative new methods to address Type 2 diabetes among people who rely on food banks.” The Times points out that “a growing body of research links food insecurity to uncontrolled diabetes.” A group of researchers launched a six-month program in which enrollees were given “handpicked appropriate food from the bank’s shelves” twice a month. The participants “also receive referrals to a primary care physician, classes about diabetes management, and regular blood sugar checks.” In a pilot study “of nearly 700 food pantry visitors in Texas, California and Ohio, published in Health Affairs last November, participants with the worst blood sugar readings managed modest improvements in a relatively short time.”

### **More vegetables, fewer animal-based foods may be linked to reduced risk of T2D**

The New York Times (6/16, Rabin) “Well” blog reports that a study suggests that “eating a few extra servings of healthy plant-based foods each day and slightly reducing animal-based foods...can significantly” reduce one’s likelihood of developing type 2 diabetes. The findings were published in PLOS Medicine.

### **AMA adopts policy urging private and public health plans to cover diabetes prevention programs**

Healthcare Finance News (6/15, Lagasse) reports that in order to assist “more people with prediabetes access the Centers for Disease Control and Prevention’s National Diabetes Prevention Program, the American Medical Association has adopted a policy during its annual meeting to encourage private and public health plans to include the DPP as a covered benefit for their beneficiaries.” The newly adopted policy “encourages hospitals to offer the program to their patients, and supports the allocation of community benefit dollars to cover the cost of enrolling patients in an in-person or virtual DPP.” The association will also “reach out to organizations such as the American Hospital Association to develop and disseminate guidance for covering the costs of the CDC’s diabetes prevention program using community benefit dollars.” Health IT Analytics (6/15, Belliveau) reports that in a press release on its website, the association “explained that healthcare payers should consider covering the Centers for Disease Control and Prevention’s (CDC) evidence-based program to help reduce the financial and healthcare challenges related to prediabetes.”

## What’s new about



**Better Choices, Better Health**  
*Put Life Back in Your Life*

Better Choices, Better Health is an evidence-based program that helps individuals learn to manage their chronic disease symptoms. In a Stanford study, people who participated in the Better Choices, Better Health program demonstrated significant improvements in exercise, cognitive symptom management, communication with physicians, self-reported general health, health distress, fatigue, disability, and social/role activities limitations. They also spent fewer days in the hospital, and there was also a trend toward fewer outpatient visits and hospitalizations. Refer your patients so they can realize these improvements! Learn more at <http://idph.iowa.gov/betterchoicesbetterhealth>

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## Million Hearts® Initiative Update

### **Get to know your ABCS!**

CDC's Division for Heart Disease and Stroke Prevention released the *Surveillance and Evaluation Data Resource Guide for Heart Disease and Stroke Prevention*, a cardiovascular disease-specific guide that is a companion resource to *Surveillance and Evaluation Data Resources for Comprehensive Tobacco Control Programs*. This at-a-glance compilation of data sources is useful for heart disease and stroke prevention programs determining policy or conducting data surveillance and evaluation.

### The latest on the **ABCS**...

#### **Aspirin Use**

##### **Immediate aspirin after mini-stroke substantially reduces risk of major stroke**

Using aspirin urgently could substantially reduce the risk of major strokes in patients who have minor 'warning' events. Medical researchers say that immediate self-treatment when patients experience stroke-like symptoms would considerably reduce the risk of major stroke over the next few days.

#### **Blood Pressure Control and Management**

##### **Working single mothers may have higher risk of heart disease and stroke, research shows**

Reuters (6/16, Rapaport) reports that research published online in the American Journal of Public Health suggests "working single mothers may have a higher risk of heart disease and stroke than their married peers." HealthDay (6/16, Doheny) reports that investigators looked at "data from two large surveys that included more than 18,000 US and European women." Investigators found that "compared to married mothers with jobs, single working mothers in the United States have a higher risk of heart disease and stroke." Additionally, "they're...more likely to smoke – a known heart risk – than women with other work and family patterns, said Frank van Lenthe, co-author of the new study."

##### **Tai Chi Resembles Drugs, Aerobics in Blood Pressure Lowering**

Tai chi can lower blood pressure in older people as effectively as drugs or aerobic exercise, a new meta-analysis suggests. The traditional Chinese discipline offers possibilities for older people who can't or don't want to exercise strenuously, said Linda Pescatello, PhD, from the University of Connecticut in Storrs. "Tai chi is low intensity, it's social, and this modality would be very attractive to older adults," she told *Medscape Medical News*. This means that "they may be more adherent to it than to other forms of exercise." And tai chi can provide other benefits, such as improved balance, she added.

##### **Exposure to air pollution may be associated with increased risk of hypertension**

TIME (5/31, Park) reports that research published in Hypertension suggests exposure to air pollution may be linked to an increased risk of hypertension. Investigators "analyzed all available studies involving air pollution and blood pressure and found that people exposed to high levels of pollutants, including ozone, carbon monoxide, nitrogen oxide and sulfur dioxide, were more likely to have high blood pressure...than those exposed to lower amounts of pollutants."

##### **New study uncovers mechanisms underlying how diabetes damages the heart**

Cardiac complications are the number one cause of death among diabetics. Now a team of scientists has uncovered a molecular mechanism involved in a common form of heart damage found in people with diabetes. A research team from The University of Texas Medical Branch at Galveston in collaboration with Baylor College of Medicine, University of California San Diego and the University of Texas at Dallas have published their findings the journal *Cell Reports*.

##### **To Your Health: NLM update: Endometriosis linked to heart disease**

Listen to the To Your Health: NLM update on Endometriosis linked to heart disease. The transcript is also available. Endometriosis significantly increases the risk of developing heart disease among women, finds a pioneering, comprehensive study recently published in *Circulation: Cardiovascular Quality and Outcomes*.

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## Cholesterol Control and Management



### Insurers push back against costly cholesterol drugs with proof-of-effectiveness requirements

The AP (4/20, Perrone) reports that although “spending on specialty drugs has doubled over the last five years,” the “startlingly slow launch of Praluent [alirocumab] and Repatha [evolocumab] suggests insurers may have found their own formula for fighting back: proof-of-effectiveness requirements and rigorous paperwork that limits how many patients ultimately receive high-cost drugs.” Generally, insurers “only cover the costs of the new drugs for patients with extremely-high cholesterol caused by genetic disorders, or those with a history of heart problems and elevated cholesterol.” This requires insurance paperwork that “can run several pages and often requires a detailed history of past treatments.” As a result, “the drugs have barely sold.”



## Smoking Cessation

### Create your own standardized protocol for tobacco cessation treatment

Use this customizable template to craft a protocol for identifying and treating patients who use tobacco. Visit the Million Hearts® website to get the template and explore sample evidence-based protocols.



## Plan Clinic Awareness Activities for Upcoming Health Observations:

JULY

Minority Mental Health Awareness Month  
[www.nami.org](http://www.nami.org)

Fourth of July!  
Be Safe.

August

National Kids Day

August 7

[www.kidspace.org](http://www.kidspace.org)

National Health Center Week

8/14 to 8/20

[www.healthcenterweek.org](http://www.healthcenterweek.org)

Neurosurgery Outreach Month

[www.aans.org](http://www.aans.org)



## Training for Providers:



### Million Hearts® director shares tips and resources from blood pressure Champions

In this Centers for Medicaid Services' podcast, Million Hearts® Executive Director, Janet Wright, highlights the 2015 Hypertension Control Champions and the many resources available for health care professionals on the Million Hearts® and CDC websites.

### Undiagnosed Hypertension in the Safety Net: Improving Identification and Diagnosis of Patients Hiding in Plain Sight

Webinar slides and audio now available from this June 14, 2016 webinar. The learning objectives were:

- Describe the importance of addressing undiagnosed hypertension.
- Identify key strategies health centers can apply to address undiagnosed hypertension.
- Discuss future directions in out-of-office hypertension diagnosis and self-measured blood pressure.

Click [here](#) for the presentation and for the audio portion use this [link](#).

### Motivational Interviewing for Healthcare Professionals Online Education

University of Colorado College of Nursing

This **online** series of courses will provide an in-depth understanding of Motivational Interviewing (MI) as an evidence based approach to support health behavior change. A health care provider's skill in recognizing patients' readiness, responding effectively to both sides of the patient's ambivalence and supporting motivation for change is essential to improving health outcomes. Attendees will participate in practice exercises and participatory learning experiences, and after courses 1 and 2 will be ready to try MI in patient encounters. Access to an interactive website for follow-up networking and peer support is also included. **Now aligned with *Motivational Interviewing 3rd Edition!***

**Click here to view a sample video!**

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## New Resources for Healthcare Providers

**From the American Medical Association and John Hopkins School of Medicine:**

### **Self-measured Blood Pressure Monitoring Program: Engaging Patients in Self-measurement**

This document describes a program designed for use by physician offices and health centers to engage patients in self-measurement of blood pressure. It highlights various ways that patients can obtain blood pressure measurements outside of the clinical office either through the purchase of a device or a physician-led blood pressure monitor loaner program. [Click here for the document.](#)

### **The Department of Health and Human Services takes first step to implement legislation modernizing how Medicare pays physicians for quality – MACRA and MIPS** For more information go to this [link](#).

Most Medicare clinicians will initially participate in the Quality Payment Program through MIPS (Merit-based Incentive Payment System). The Affordable Care Act moved many Medicare payment systems, including that for clinicians, towards value, and Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) builds on that work. Consistent with the goals of the law, the proposed rule would improve the relevancy and depth of Medicare's quality-based payments and increase clinician flexibility by allowing clinicians to choose measures and activities appropriate to the type of care they provide.

MIPS allows Medicare clinicians to be paid for providing high value care through success in four performance categories.

**Quality** (50 percent of total score in year 1): For this category, clinicians would report six measures chosen from among a range of options that accommodate differences among specialties and practices.

**Advancing Care Information** (25 percent of total score in year 1): For this category, clinicians would report customizable measures that reflect how they use technology in their day-to-day practice, with a particular emphasis on interoperability and information exchange. Unlike the existing reporting program, this category would not require all-or-nothing EHR measurement or redundant quality reporting.

**Clinical Practice Improvement Activities** (15 percent of total score in year 1): This category would reward clinical practice improvements, such as activities focused on care coordination, beneficiary engagement, and patient safety. Clinicians may select activities that match their practices' goals from a list of more than 90 options.

**Cost** (10 percent of total score in year 1): For this category, the score would be based on Medicare claims, meaning no reporting requirements for clinicians. This category would use 40 episode-specific measures to account for differences among specialties.

**Perfect your physician feedback reporting system** The Agency for Healthcare Research and Quality released a new guide: ***Confidential Physician Feedback Reports: Designing for Optimal Impact on Performance***. The guide is a practical resource designed to help those who develop confidential physician feedback reports. It lists evidence-based strategies to consider when designing or refining a feedback reporting system.

### **Be inspired by nurse practitioner-led ABCS prevention models**

For May's National Nurse Week, the *Journal of the American Association of Nurse Practitioners* featured a comprehensive how-to: "[The Million Hearts® initiative: Guidelines and best practices.](#)"

**Get tips on explaining heart failure to your patients** Download [free posters](#) and a [collection of infographics](#) from CardioSmart. Display them in your waiting and exam rooms to educate patients.

**Office of the National Coordinator for Health Information Technology (ONC)** just released an online tool for doctors, nurses, other clinicians, practice staff, hospital administrators and others who wish to leverage health IT to actively engage patients in their health and care. Click [here](#) for links to **Playbooks Aren't Just for Sports Teams: Helping Providers and Patients Work Together with Health IT.**

## The Iowa Department of Public Health -- Health Promotion and Chronic Disease Control Partnership

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