

Increasing accessibility to CGM in an equitable fashion

Blake Adams, BSN; Jayme Wasson, BSN; Kathryn Sumpter, MD; Grace Nelson, MD;
University of Tennessee Health Science Center and LeBonheur Children's Hospital

Introduction

- Our mission at Le Bonheur Diabetes Clinic is to partner with families to aid them in finding the best ways to manage their Diabetes.
- Technology has shown to improve overall outcomes, specifically continuous glucose monitoring (CGM). Unfortunately, the process is still limited by insurance qualifications and a lengthy authorization process.
- Our AIM is to reduce the Inequities in CGM use between NH White and NH Black T1D Patients by increasing CGM use in NH-Black patients from 35% to at least 45% by June 2022 and by decreasing the use difference by 10% in that same timeframe.

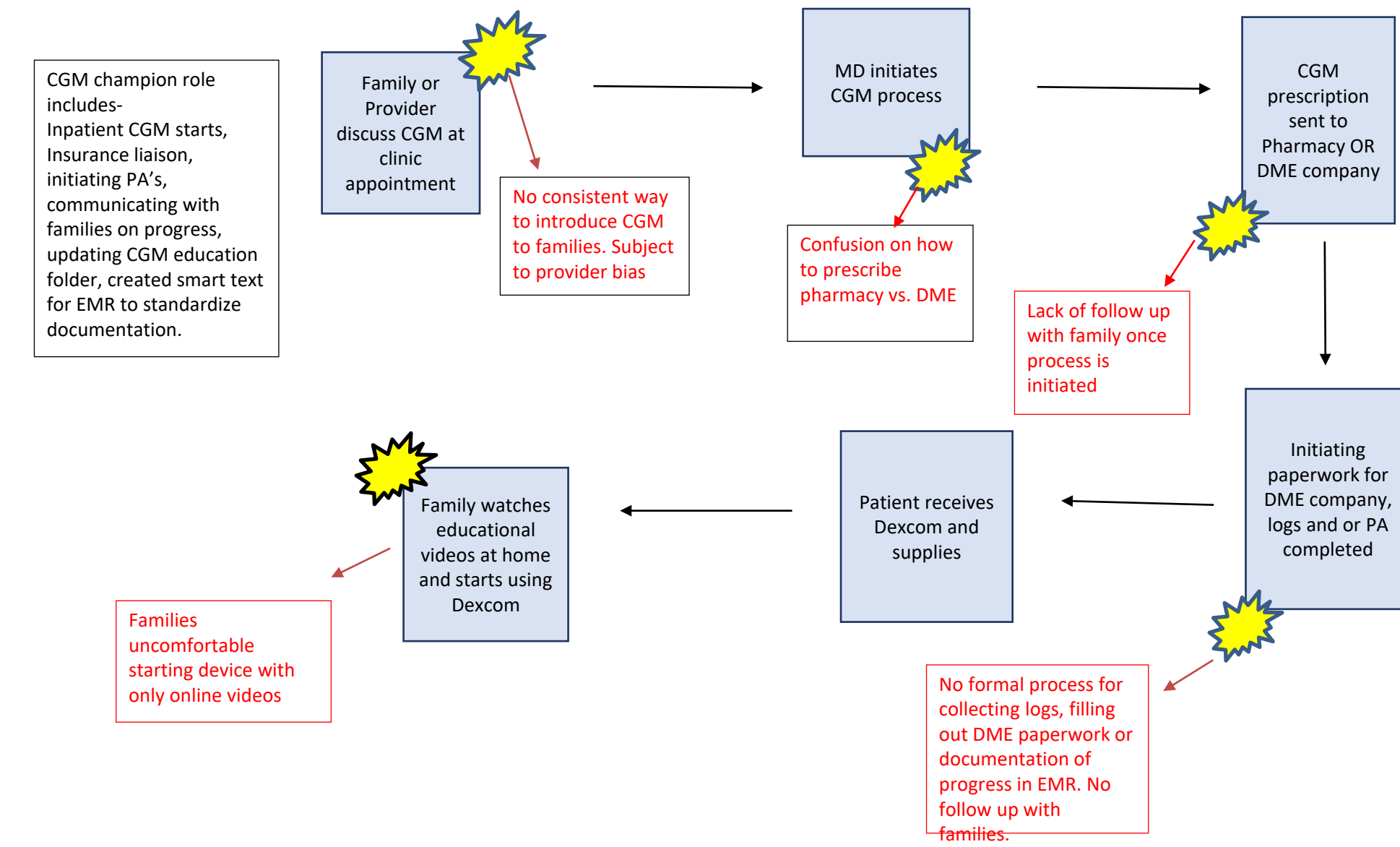


Figure 1: CGM process map. Original CGM prescribing process, mapped out with pain points

Methods

- A CGM champion was identified and created a streamline process for initiating CGM to prevent extra work on staff and delays for patients receiving the device.
- Relationships were formed with DME company and a patient education folders with up-to-date information for our families were created.
- We worked with staff to increase knowledge of CGM and utilized smarttext to make sure all orders were entered and trackable documentation.
- Staff attended bias training.
- Future changes include changing the new onset education process to be sure all patient have equal access to CGM and working to change insurance requirements

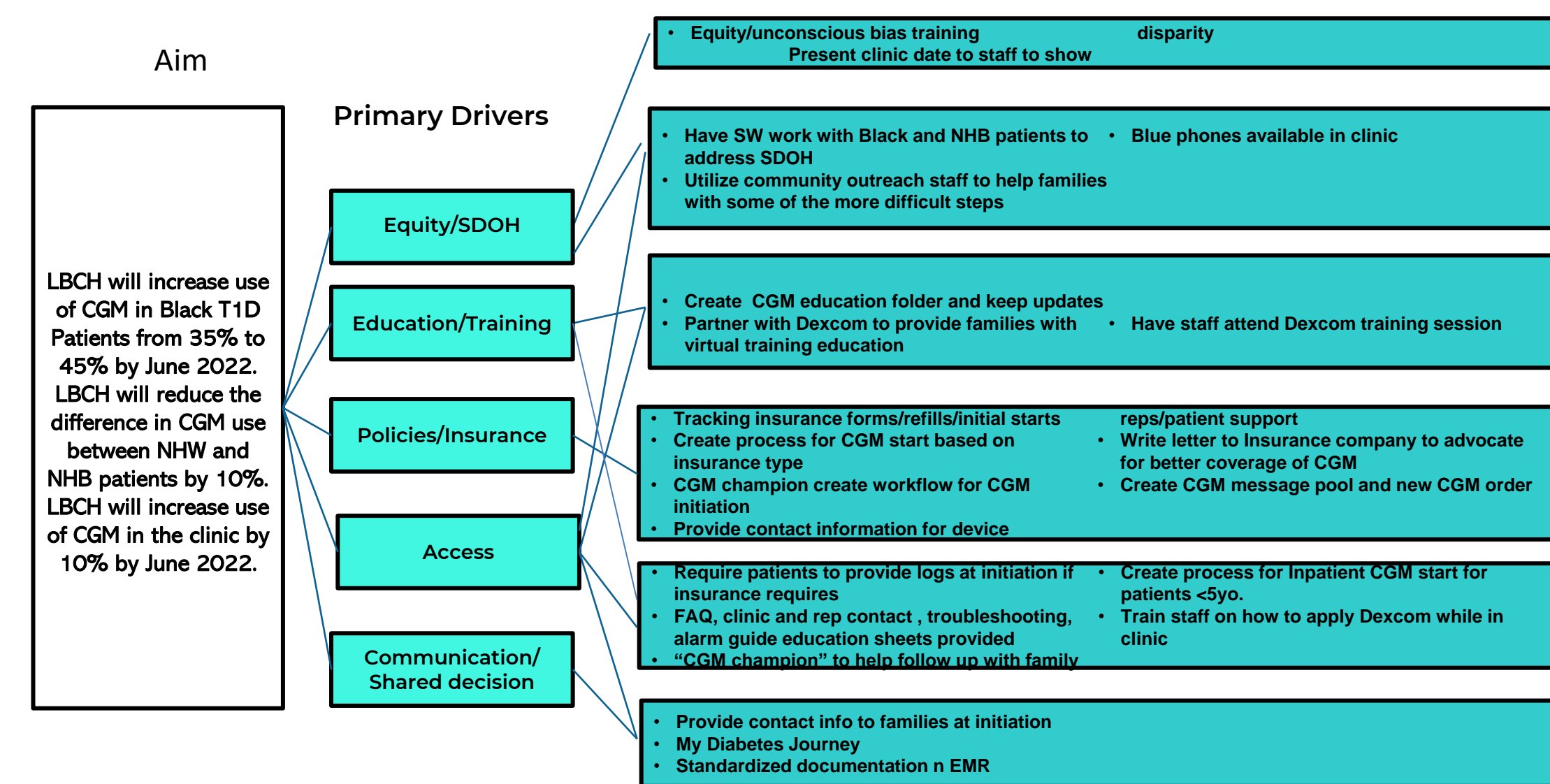
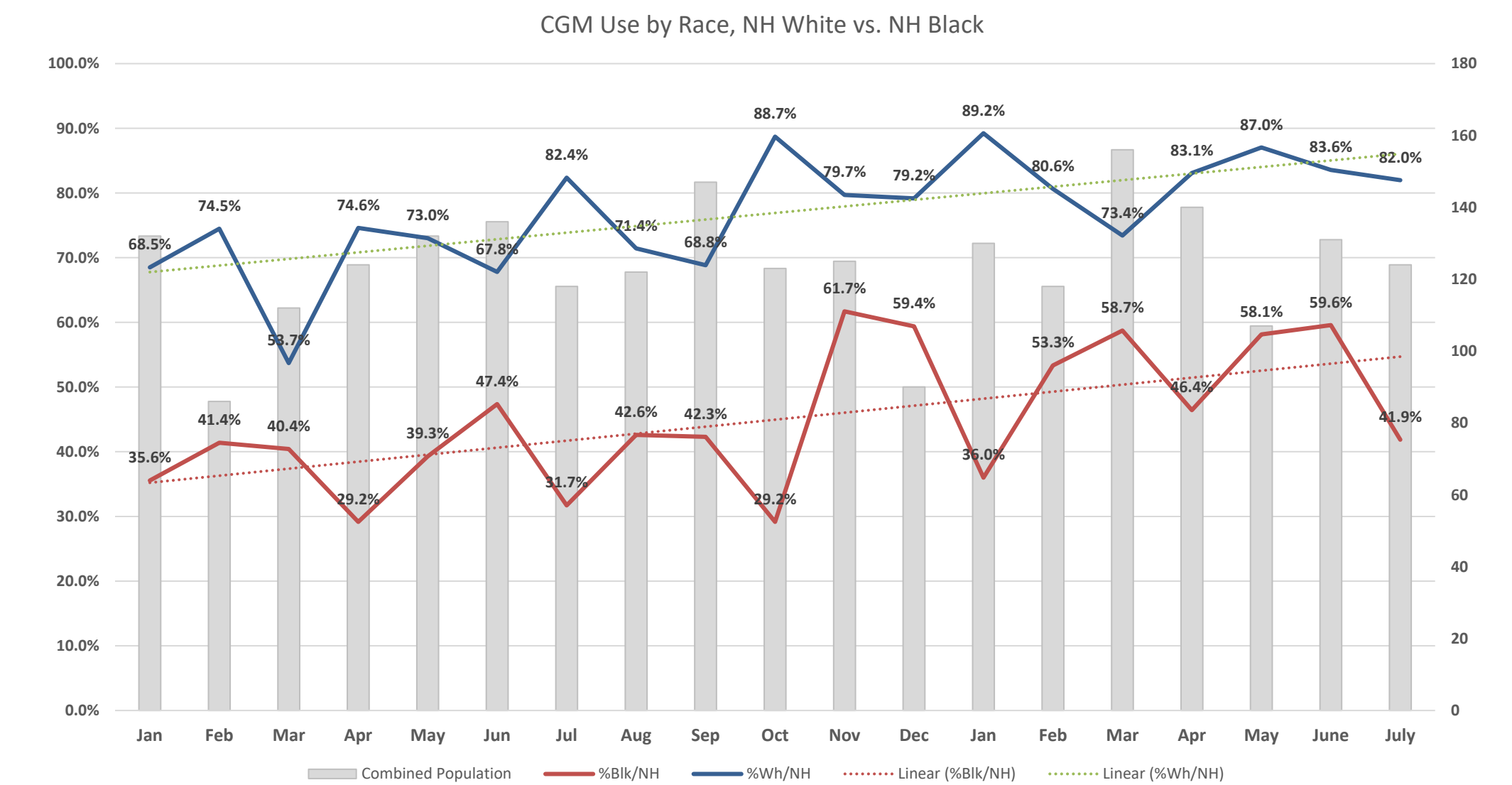


Figure 2: Key Driver Diagram for CGM prescribing process.

Results

- Baseline data (Jan2021) showed that ~35% of our NH black patients used CGM regularly as of July 2022 we now have ~55% of NH-black patients using CGM. Our overall clinic CGM use has increased from ~50% to ~70% in this same timeframe.



Conclusion

- Overall, we have seen improvement in our percentage of Non-Hispanic Black patients and overall patient population that are utilizing the CGM. We haven't reached our goal of reducing the use differences between black and white populations but continue to improve our processes and work towards our goal.
- The most useful change was creating a CGM champion that is able to track all patients to be sure of success

References :

Mathias P, Mahali LP, Agarwal S. Targeting Technology in Underserved Adults With Type 1 Diabetes: Effect of Diabetes Practice Transformations on Improving Equity in CGM Prescribing Behaviors. *Diabetes Care*. 2022 Oct 1;45(10):2231-2237. doi: 10.2337/6c22-0555. PMID: 36054022.

Bailey R, Donthi S, Markt S, Drummond C, Cullen J. Evaluating Factors Associated With Continuous Glucose Monitoring Utilization With the Type 1 Diabetes Exchange Registry. *J Diabetes Sci Technol*. 2022 May 3;19(3):2968221091299. doi: 10.1177/19322968221091299. Epub ahead of print. PMID: 35506181.