2017 Updated Clinical Practice Guidelines for Diabetes Care

From: Passport Health Plan
Sent: March 31, 2017
To: Passport Primary Care Providers, Pediatricians, OB / Gyn Providers

Background:
Passport Health Plan’s (Passport) mission is to improve the health and quality of life of our members. To support your efforts in the care and education of our members, and to reduce variations in diagnosis and treatment, Passport has adopted Clinical Practice Guidelines (CPGs) which are periodically reviewed and approved by our Quality Medical Management Committee (QMMC). Links to all approved CPGs are located on Passport’s website.

Provider Action Needed:
The American Diabetes Association’s new position statement on psychosocial care in the treatment of diabetes has been updated to address psychosocial issues in all aspects of care including self-management, behavioral health, communication, complications, comorbidities, and life-stage considerations.

A brief Summary of the new recommendations is outlined below:

- The list of comorbidities has been expanded to include autoimmune disease, HIV, anxiety disorders, depression, eating disorders, and serious mental illness.
- Delivering a baby weighing 9 lbs. or more is no longer listed as an independent risk factor for development of prediabetes and type 2 diabetes.
- Assessment of sleep pattern and duration is now recommended as part of the comprehensive medical evaluation.
- The recommendation for nutrition therapy in people prescribed flexible insulin therapy was updated to include fat and protein counting in addition to carbohydrate counting.
- A level of < 54 mg/dL should be defined as denoting serious clinically important hypoglycemia, whether that level is associated with symptoms or not.
- A recommendation was added to consider periodic measurement of B12 levels and supplementation, as needed, in patients with long term metformin use.
- A new insulin algorithm was included which offers more glucose management options for type 2 diabetics.
- Insulin was emphasized as the treatment of choice in pregnancy based on concerns about the concentration of metformin on the fetal side of the placenta and glyburide levels in cord blood.
- Based on results of two large clinical trials, a recommendation was added to consider empagliflozin or liraglutide in patients with established cardiovascular disease to reduce the risk of mortality. **NOTE**: Passport currently has Victoza as a preferred product, but does not prefer Jardiance in the SGLT2 category (Passport’s preferred agent is Invokana). The Pharmacy and Therapeutics Committee will meet in May to further discuss adding Jardiance as a preferred product with Passport.

To access Passport’s [drug search formulary](https://client.formularynavigator.com/Search.aspx?siteCode=6376518748&targetScreen=1&drugSearchText=I) on the website please click on the link below:

The complete summary of revisions and [Diabetes Standard of Care](http://care.diabetesjournals.org/content/40/Supplement_1) can be found at:

**Relevance:**

HEDIS Measure: Complete Diabetes Care (CDC)

Accreditation: Diabetes is also relevant to Passport’s NCQA accreditation.

The Diabetes Disease Management Program is a special program for Passport members with type 1 or 2 diabetes. The guideline is used by the disease managers as a reference for ensuring Passport members receive quality health care for their diabetes. To contact the Diabetes Disease Managers please call (502) 213-8925 or (502) 585-8248.

**Questions:**

For any questions about CPGs, please contact Provider Services, 800-578-0775 or your [provider relations specialist](mailto:providerrelations@passporthealthplan.com). If you would like a hard copy of a CPG, please call Passport’s Quality Review Nurse at (800) 578-0603, ext. 8259.