The Diabetes Ten City Challenge (DTCC) is gaining momentum, with nearly 1,300 people with diabetes enrolled by 31 employers in 10 cities across the U.S. Participating employers and pharmacists are now focused on helping enrollees achieve the best possible outcomes and collecting accurate data.

Participants say they feel better and are more informed about their diabetes, and pharmacist coaches enjoy helping people manage their health in new ways. Employers shared their enthusiasm about the program’s progress at our first DTCC employer summit in Orlando earlier this year (see insert).

Building on the successes and learnings so far, and in an effort to help people better manage chronic health conditions, the APhA Foundation has established HealthMapRx™. This initiative is designed to reduce employer costs and improve the health of employees with diabetes, cardiovascular conditions, asthma, depression and other chronic diseases.

HealthMapRx offers interested employers access to the same online patient education and tracking tools used in the DTCC. More than 80 employers, including those in the DTCC, are using HealthMapRx to invest in their employees’ well-being.

As the word spreads about the potential rewards of the Diabetes Ten City Challenge and HealthMapRx, we grow more confident about the win-win opportunities of this approach. We look forward to sharing further developments with you later this year!

—William M. Ellis
Chief Executive Officer
APhA Foundation

Colorado Springs Finds Early Adopters

After years of questioning various doctors about why she didn’t feel “quite right,” Dee Brown finally got the answer two years ago: she had diabetes. So when the City of Colorado Springs offered her a chance to better understand and manage her condition through the Diabetes Ten City Challenge (DTCC), she jumped at it.

Brown, 46, works in the City’s Public Communications Department. She learned about the program in a letter from the City’s employee pharmacy, where she buys her medication and supplies.

“I wanted help,” Brown said, “I had spoken to a couple of doctors, but I felt more information and education would help me because I was struggling and not quite sure what to expect with diabetes.”

Meeting regularly with pharmacist coach Tammy Lopez, PharmD, Brown realized she needed to test her blood glucose levels more often – going from once every other day to three times per day. Tracking it closely has helped her to adjust her activities and habits to bring her condition under control.

“My morning readings were very high,” Brown explained. “Working with Tammy, my doctors increased the dosage of medicine I take at night, had me take it with my meals and have a snack before I go to bed. I’ve been able to bring down my numbers and work on losing some weight, which has been a major factor. I feel much better.”
Focus on Health

Brown is among nearly 100 people with diabetes who are participating in the DTCC through the City of Colorado Springs. Currently the sole participating employer in the region, the City saw the program as a way to further enhance its existing wellness and prevention efforts.

“Our main concern is to keep our employees healthy,” said Mark Cauthen, Risk Supervisor for the City.

“We are also trying to manage increasing health care costs and look at loss prevention — it has a lot to do with trying to increase health care outcomes, as well. It’s better to do things on the front end than on the back end, when you have a catastrophic claim that could have been prevented.”

The City encourages enrollment by communicating with employees during the annual benefits enrollment period and at new employee orientations. They cover 100% of costs for diabetes medication and supplies that are obtained through one of the two employee pharmacies the City operates in cooperation with El Paso County.

Though they actively promote the DTCC and its potential, it was very important to City employees to have their participation confidential. This was accomplished by managing the program through Pharmacy Benefits Manager Maxor, which also operates the employee pharmacies. The employer sees the overall program results, but not individual patient information.

“We stressed the confidentiality and basically told people that if they don’t call us we won’t know who they are,” Cauthen said. “We knew early on that the program needed to be confidential to succeed.”

He recently presented their DTCC accomplishments to the City Council as an example of excellence, and was asked the inevitable question: “What results will we see?”

“I told them we need time to show return on investment and over time we will see financial rewards,” Cauthen said. “I am constantly sharing participation rates with management so they can see we are making a difference. We just reviewed the first clinical data and I’m very pleased with the initial results after six months.”

Going forward, they also will evaluate overall decreased absenteeism and overall claims costs for the diabetes population.

Step-by-Step Success

Lopez, who works for Maxor and coordinates all DTCC activities for the City, also uses data to track the program’s progress and ensure all DTCC participants are making improvements. She personally coaches 58 people with diabetes, including Dee Brown, helping them to focus on how to better manage their condition. Like all pharmacists in the DTCC, Lopez follows the online Patient Self Management Program from the APhA Foundation to guide the patient care process and track key diabetes indicators.

“In the first three months of the program we ideally like to see the patient once a month to understand their health history, set goals, and go over basics like nutrition, exercise, and how to use a glucometer,” Lopez said. “We see what patients need in terms of education and make sure they understand what each medication does and how to take it.”

In the second series of visits, pharmacists meet with participants sometime during the fourth and sixth months to assess the skills learned in the first visit series and to check on progress toward their goals. Finally, in the last six months they meet every three months to be sure patients are on track with health care visits, eye exams, dental check-ups, and other important aspects of diabetes care.

“The condition is going to last the rest of their lives,” Lopez said. “Sometimes people may not be watching their sugars that much, so we talk about what to do to get back on track and give them a little motivation.”

Lopez sees the program as positive for all concerned.

“Some patients have improved so much. It’s rewarding to know that I can give patients the knowledge I have received as a diabetes specialist and help them improve their health,” Lopez said. “In the long run it is going to save the city money to help people manage their health and catch any health issues before they turn into something more serious.”

DTCC FACTS

31 employers

Sample of Employer Industries

Health Care Systems

Public Sector

• County government
• Municipal government
• Utilities

Universities

Private sector

• Corporate entities
• Supermarkets

City

Cumberland, MD
Colorado Springs, CO
Charleston/Spartanburg, SC
Chicago, IL
Honolulu, HI
Los Angeles, CA
Milwaukee, WI
Dalton, GA
Pittsburgh, PA
Tampa Bay, FL

Participating Employers/Groups

Western Maryland Health System
City of Colorado Springs
City of Charleston, Charleston Water System,
Piggly Wiggly Carolina Co., Roper St. Francis Healthcare,
Town of Mt. Pleasant, Spartanburg Water & Sewer
Midwest Business Group on Health
Hawaii Business Health Council
University of Southern California
City of Milwaukee
Northwest Georgia Healthcare Partnership
Pittsburgh Business Group on Health,
Giant Eagle Supermarkets
Manatee County Government, Pinellas County Sheriff’s Office
Ten Diabetes Interventions

Managing diabetes requires consistent attention to nutrition, medication and a healthy lifestyle. Stuart Haines, PharmD, BCPS, CDE, FASHP, Professor and Vice Chair for Education, University of Maryland School of Pharmacy, a member of the DTCC Advisory Committee and expert in diabetes medication management, has reviewed guidelines for diabetes care from the American Diabetes Association and the American Association of Clinical Endocrinologists. Based on this review, Dr. Haines offered his list of the ten most important interventions to improve the health and well-being of people with diabetes.

1. Aggressive blood pressure control
   • Target <130/80

2. Aggressive lipid management
   • Target LDL<100 mg/dL and/or 30% reduction regardless of starting level; triglycerides <150 mg/dL; HDL>40 mg/dL

3. Aggressive glycemic control
   • Target HbgA1C <7.0%

4. Antiplatelet and ACE inhibitor therapy
   • Aspirin or clopidogrel for every patient over age 30 unless contraindicated
   • ACE inhibitor for everyone with type 2 diabetes and at least one other cardiovascular risk factor (smoking, obesity, etc.)

5. Self-management education/coaching

6. Preventive screening exams (eyes, feet, kidney disease)

7. Weight management

8. Vaccinations (influenza, pneumococcal, tetanus)

9. Smoking cessation

10. Dental care

Because medication is so important to diabetes management, Dr. Haines recommends that DTCC employers waive co-pays for all medications that are used to reach the goals he outlined.

DTCC Exceeds Enrollment Goal

Nearly 1,300 people with diabetes are now enrolled in the DTCC, surpassing the program’s goal of 1,250 participants. Several Chicago-area employers are still in the enrollment process, and final numbers could reach 1,400 participants. Here are some highlights:

Gender Distribution

- Female 49%
- Male 51%

Ethnicity Distribution

- African-American 15%
- Asian 4%
- Caucasian 71%
- Hispanic 4%
- Native-American 2%
- Not Available 1%
- Other 1%
- Pacific-Islander 2%

Age Distribution

- 39 yrs and under 11%
- 40 - 49 years 20%
- 50 - 59 years 40%
- 60 - 64 years 19%
- 65 yrs and over 10%

Education Distribution

- 8th Grade or Less 4%
- Some High School 4%
- High School Graduate 32%
- Some College 30%
- College Graduate 21%
- Post-Graduate Education 7%
- Not Available 2%
Mark Cauthen  
Risk Supervisor  
City of Colorado Springs

Role in DTCC:  
Mark worked with all of the City’s DTCC efforts, including approval and implementation of the program.

Why the City chose to participate:  
“We wanted to enhance our employee health management program and try to manage increasing health care costs. We are looking at loss-prevention type programs and this was a more proactive approach for managing diabetes.”

Most rewarding part of the experience:  
“Just seeing the participation in the program is rewarding – 98 participants represent almost 41 percent of our 236 diabetes patients identified through our pharmacy claims data.”

Lesson learned:  
“Confidentiality was very important so we asked Maxor to administer the program and demonstrate it was being handled separately from the City, but there was still some reluctance to join. After a lot of communication, employees now understand that we only know about participants if they self-disclose by calling us or asking about an issue related to the program.”

Tammy Lopez, PharmD  
Pharmacy Manager, Maxor  
El Paso County Pharmacy

Role in DTCC:  
Pharmacist network coordinator for the City of Colorado Springs and pharmacist coach to 58 DTCC participants.

Why your pharmacy chose to participate:  
“Maxor is the prescription benefits manager for the two pharmacies jointly operated by El Paso County and the City of Colorado Springs. When the City decided to implement the DTCC, they wanted a pharmacist to run the program and I volunteered to take on that role.”

Most rewarding part of the experience:  
“Hearing my patients tell me they are feeling healthy, good, and proud to have improved their health through working with me on specific measures such as their A1C levels. It’s also rewarding career-wise to be able to apply the clinical knowledge I learned at school in patient counseling.”

Lesson learned:  
“Diabetes affects people differently – it’s not the same condition for every person. I’ve learned how to accommodate each person and their needs and stay on top of new information on diabetes.”