### CHRONIC DISEASE SELF-MANAGEMENT EDUCATION (CDSME)

## **Supporting Physician Practices to Improve Health Outcomes for Patients Living with Chronic Disease**

Chronic disease is a public health issue affecting 35% of all Medicare beneficiaries who have at least one chronic condition

The Centers for Medicare & Medicaid Services has designated IPRO as the Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for your state, in order to help you with the following goals:

- Improving access to patient selfmanagement programs to improve health outcomes;
- Tracking performance of over 10 MIPS/Shared Savings Programs ACO quality measures in three areas: improving behavioral outcomes, patient safety, and chronic disease self-management;
- Impacting measures to improve cardiac health and reduce unplanned hospital admissions in persons with multiple chronic conditions and all-cause readmissions;
- Increasing identification of behavioral health comorbidities that impact physical health outcomes; and
- Focusing on four measures from the Million Hearts® Initiative, control of hemoglobin A1c, measures to reduce unplanned hospital admissions in persons with multiple chronic conditions, and all-cause readmissions.



# Support improvement in the MIPS Cost Performance Category driven by our clinical and quality improvement interventions.

### **Complimentary Technical Assistance**

- Training to build capacity and sustainability of evidence based CDSME programs;
- Access to the IPRO QIN-QIO network of over 50 CDSME T-Trainers, Master Trainers and Peer Leaders with more than a decade of experience running these programs;
- Support and promotion of best practices from the Million Hearts® Initiative;
- Increasing access and referrals to diabetes education programs in your community to target prevention of Medicare beneficiaries from developing diabetes; and

 Incorporating Trauma-Informed Care, depression and anxiety screening, substance use disorders screening, and social determinants of health screening into practice workflows.

#### **Patient Education Support**

- Improving diabetes care management for Medicare beneficiaries and patients at high risk for complications by supporting the creation of sustainable self-management programs in your community;
- Sharing expertise in CDSME care management workflows and community-based referral systems to improve access and referrals to CDSME programs;

continued







### CHRONIC DISEASE SELF-MANAGEMENT EDUCATION (CDSME) continued

- Improving access to non-pharmacological interventions to help decrease opioid use for Medicare beneficiaries living with chronic pain through sustainable self-management programs;
- Increasing early screening, timely diagnosis of CKD through sustainable self-management programs; and
- Increasing access to behavioral health services through training and technical assistance.

#### **Practice Education & Tools**

- Facilitating clinical decision making and patient education via IPRO QIN-QIO CKD Mobile apps;
- Benchmarking and comparative feedback data reports could include regional, state, county, community, healthcare network, practice, and individual provider levels for comparative analysis;
- Educational resources for clinicians, staff, patients, and residents to support CDSME activities; and
- Access to dashboards displaying your data for comparative and feedback within your service area.

### To begin this journey, the IPRO QIN-QIO team will assist you with

- Completing a CDSME needs assessment to establish priorities, baseline data, and training needs;
- Identifying key areas in which your practice would like assistance; and
- Updating data files on a monthly basis.

### **Highlighted Tools and Resources**

Here's a glimpse of the types of quality improvement tools and resources we'll share over the next five years.

Cardiovascular	Pre-diabetes and	Chronic Pain	Chronic Kidney
Health	Diabetes		Disease (CKD)
<ul> <li>IPRO QIN-QIO Self- Measured Blood Pressure Program (SMBP)</li> </ul>	<ul> <li>Web-based referral tool for the Diabetes Prevention Program (DPP) or Medicare Diabetes Prevention Program (MDPP).</li> <li>Community resources portal</li> </ul>	<ul> <li>Design, training, and implementation of non-pharmacological interventions and programs to reduce opioid misuse</li> </ul>	<ul> <li>CKD-Awareness and Prevention Program (CKD-APP) training</li> <li>Clinician mobile application</li> <li>Patient and Family mobile application</li> </ul>

#### For more information

This material was prepared by the IPRO QIN-QIO, a partnership of Healthcentric Advisors, Qlarant and IPRO, serving as the Medicare Quality Innovation Network-Quality Improvement Organization for the New England states, NY, NJ, OH, DE, MD, and the District of Columbia, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy.

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