

## Pathways to Success: Utilizing Managed Care Models to Improve Clinical and Economic Outcomes in Diabetes

This supplement to *The American Journal of Managed Care* provides an overview of the etiology and pathophysiology of type 2 diabetes mellitus (T2DM), including factors that contribute to suboptimal glucose control; explores current clinical practice guidelines and algorithms; evaluates new and emerging treatment strategies; and addresses managed care aspects of managing T2DM, including the impact of disease management programs on clinical measures, healthcare expenditures, and inpatient utilization.

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*Employment/stock ownership:* Humana Inc

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**Release date:** June 15, 2013

**Expiration date:** June 15, 2014

**Estimated time to complete activity:** 2.5 hours

**Type of activity:** Knowledge

This activity is supported by an educational grant from Amylin Pharmaceuticals, Inc.

## Intended Audience

Medical directors, pharmacy directors, specialty pharmacists, and other managed care professionals who oversee the care of patients with T2DM in various clinical settings.

## Statement of Educational Need

Diabetes mellitus (DM) is a complex and progressive disease associated with significant morbidity and mortality. As a result of the rapid aging of the baby boomer population, both the prevalence and economic burden associated with DM have been steadily increasing and are projected to continue to increase. A series of cost reports published by the American Diabetes Association (ADA) between 1997 and 2012 have suggested that direct medical costs are the primary cost driver in DM. Direct costs have increased more than 5-fold during this time frame, from \$44 billion to \$176 billion annually, likely due to both the increased prevalence of DM and increased costs of providing DM-related care.

The development of new classes of blood glucose-lowering medications to supplement older therapies has certainly broadened the palette of available treatment strategies. However, the growing number of available treatments and the number of reviews and guidelines published in recent years have heightened the uncertainty that accompanies selection of appropriate therapeutic regimens for the heterogeneous population of patients with diabetes. Moreover, despite evidence of the clear benefits of achieving and maintaining glycemic goals and the availability of newer and potentially more efficacious drugs, the number of patients with poor glycemic control has not substantially decreased over the past 10 years.

A comprehensive assessment of unmet needs for the population with DM is essential for more effective population management. An approach that strives to identify and reduce barriers to patients receiving optimal care and being active participants in their DM management will facilitate systemwide efforts to improve DM outcomes. Managed care organizations are particularly positioned to attempt to make the changes necessary to reduce the burdens associated with type 2 DM (T2DM) by developing policies that align with evidence-based DM management guidelines and other resources.

This activity provides an overview of the etiology and pathophysiology of T2DM, including factors that contribute to suboptimal glucose control. The activity also explores current clinical practice guidelines and algorithms, evaluates new and emerging treatment strategies, and addresses managed care aspects of managing T2DM, including the impact of disease management programs on clinical measures, healthcare expenditures, and inpatient utilization.

## Educational Objectives

*Upon completion of the educational activity, the participants should be able to:*

- Discuss the incidence and pathophysiology of type 2 diabetes mellitus (T2DM)
- Explore the etiology of progressing T2DM, including factors that contribute to suboptimal control of glucose and other clinical metrics
- Review current clinical practice guidelines and algorithms that focus on the management of treatment-experienced patients with poorly controlled DM
- Evaluate new and emerging treatment strategies for T2DM, including various combination regimens
- Explore managed care aspects of managing T2DM, including the impact of disease management programs on clinical measures, healthcare expenditures, and inpatient utilization
- Discuss how treatment guidelines and other evidence are used to develop and implement medical policies relative to the management of diabetes

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