

The Greater Flint Health Coalition (GFHC) is the lead agency for the Diabetes Group Visit Project. This initiative started in 2008 with the goal of improving diabetes care and expanding the Diabetes Group Visit model of care to

providers throughout Genesee County. To ensure project support and success, the efforts of the project are collaboratively guided by the Diabetes Group Visit Project Workgroup, made up of a broad representation of local stakeholders. Workgroup members represent the organizations listed below:

McLaren Family Practice Residency Program

**Genesee County Medical Society** 

Genesys Health System

**Hurley Medical Center** 

**Greater Flint Health Coalition** 

Blue Cross Blue Shield of Michigan

**HealthPlus of Michigan** 

Genesee Health Plan

Hamilton Community Health Network

United Auto Workers Community Health Initiatives

The Greater Flint Health Coalition is a 501(c)3 designated non-profit healthcare coalition – a true partnership between healthcare providers and purchasers, consumers and committed citizens, government leaders, insurers, educators and all those concerned about the well-being of our community and its residents.

Diabetes Group Visits (also known as shared medical appointments) are an innovative care model which presents the opportunity to improve your practice in the following ways:

- Improved Physician Productivity by seeing multiple patients in single setting;
- Improved Physician Satisfaction;
- Improved Patient Care & Outcomes;
- Improved Patient Engagement & Satisfaction.

To support these improvements in efficiency and patient care, multiple resources have been developed by the Greater Flint Health Coalition to support you and your practice in the implementation of Diabetes Group Visits.



For additional information regarding Diabetes Group Visits and the resources available to Genesee County physicians, visit us on the web at www.qfhc.org or please contact:

> Greater Flint Health Coalition 519 S. Saginaw Street, Suite 306 Email: gfhc@flint.org Phone: (810) 232-2228 Fax: (810) 232-3332

# DIABETES GROUP VISITS



An opportunity for physicians and providers to improve practice efficiency, productivity, and patient outcomes via shared medical appointments.



### **What are Diabetes Group Visits?**

Diabetes Group Visits are an innovative clinical model of care which improve treatment, knowledge, and outcomes for diabetic patients. This is accomplished by utilizing patient interaction in the group setting to improve disease management; normal group visits consist of 7-10 patients meeting for two-hour medical appointments with a physician and rotating experts such as diabetes educators, dieticians, nurses, and behaviorists. Physicians answer questions and facilitate "best practice" sharing by patients on topics of nutrition, diet, exercise, hypertension, and foot care.



## Patient Outcomes & Benefits of Diabetes Group Visits

#### *Improved Care and Outcomes*

 Compared to traditional one-on-one physician care, diabetes group visits improve patient outcomes regarding HbA1c, blood pressure, BMI, and microalbumin testing

#### Improved patient satisfaction

- Vastly improved patient satisfaction when comparing group visits to traditional one-on-one physician care
- Group visits maximize patient interaction while also allowing the patient to visit with their physician for two hours

Enhanced engagement of patients as partners in the management of their diabetes

• Improve patient self-management and selfefficacy related to diabetes

## Physician Advantages & Outcomes of Performing Diabetes Group Visits

#### Increased Productivity and Practice Efficiency

- Group Visits allow physicians to address diabetes care for their most hard to manage patients in a single setting with 7-10 patients rather than addressing that care multiple times
- Group Visits are appropriate for patients who are non-responsive to traditional care, often the patient population that is most challenging for physicians to interact with, treat, and address diabetes management

#### Increased physician satisfaction

 Primarily due to decreased physician burden, improved patient management of diabetes, and improved patient care

## Support and Completion of Multiple Patient-Centered Medical Home (PCMH) Standards

 Diabetes Group Visits support various aspects of the PCMH model, specifically those aimed at engaging patients in self-management of their disease

## **How to Begin Planning to Implement Diabetes Group Visits in Your Practice**

Planning for the implementation of Diabetes Group Visits into your practice is a simple process involving the following three steps:

# Begin to identify patients who are appropriate candidates for Diabetes Group Visits

• The "right" patients are those non-responsive to traditional one-on-one physician care

Identify two-hour time slot availability for physician and medical assistant

## Identify location/space/conference room to hold Diabetes Group Visits

 Group Visits require a setting for 7-10 people to meet; physicians in smaller practices may use office waiting rooms

## **Resources Available to Assist Physicians in Implementing Diabetes Group Visits**

The Greater Flint Health Coalition's Diabetes Group Visit Project Workgroup has developed resources to specifically support the planning and implementation of Diabetes Group Visits. These resources are available free of charge to all Genesee County physicians and providers to help you get started with Group Visits. Please contact the GFHC using the information provided in this brochure for additional information.

## Diabetes Group Visit Project Replication Manual

- Comprehensive document which includes necessary information, documents, and tools to implement Diabetes Group Visits
- Includes information for specific billing documentation and coding (supported by Centers for Medicare & Medicaid Services, Blue Cross Blue Shield of Michigan, HealthPlus of Michigan, and Genesee Health Plan)
- Includes detailed literature review documenting the improved outcomes for both physicians and patients
- Available online at www.gfhc.org

### Paul Dake, M.D., Diabetes Group Visit Project Workgroup Chair, and Greater Flint Health Coalition

- Dr. Dake has regularly conducted Diabetes Group Visits at McLaren Family Medicine Residency Program since 2007
- Physicians and office staff are welcome to attend and observe a Diabetes Group Visit
- The Diabetes Group Visit Project Workgroup, which includes representatives from hospitals, physicians, and insurers, meets regularly to support and engage physicians in the Diabetes Group Visit concept
- GFHC staff available to provide support

## Financial Assistance for Services to Support Implementation of Diabetes Group Visits

 The GFHC can provide financial assistance for diabetes experts (behaviorists, dieticians) to present to your patient group as well as support if renting space to hold the Diabetes Group Visits is required