Wyoming Medicaid: opportunities for management of diabetes and cardiovascular disease

Paul Johnson, MD, MPH Medicaid Medical Director April 12, 2024



1

Disclosures to Participants

Notice of Requirements for Successful Completion:

Learners must participate in the full activity and complete the eva to claim continuing education credit/hours.

Presenter has No - Conflicts of Interest/Financial Relationship:
Disclosures:

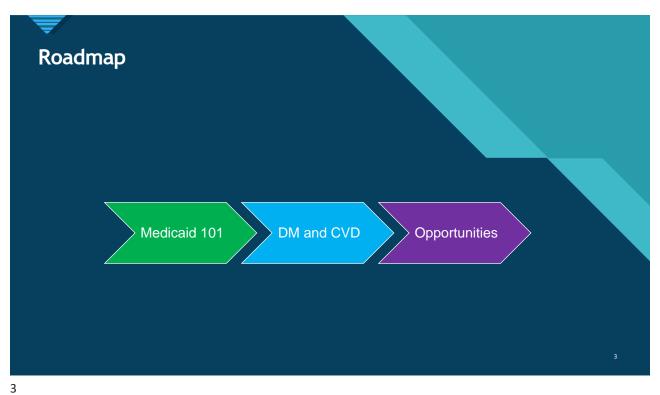
Paul Johnson

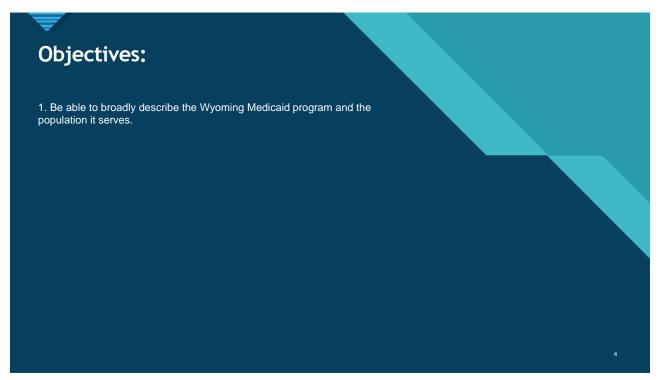
Disclosure of Relevant Financial Relationships and Mechanism to Identify and Mitigate

Conflicts of Interest: No conflicts of interest

Non-Endorsement of Products: Accredited status does not imply endorsement by ADCES or Joint Accreditation of any commercial products displayed in conjunction with this educational activity

Off-label Use: None







Objectives:

- 1. Be able to broadly describe the Wyoming Medicaid program and the population it serves.
- 2. Be able to discuss the prevalence of diabetes and cardiovascular disease in Wyoming and the Wyoming Medicaid population.

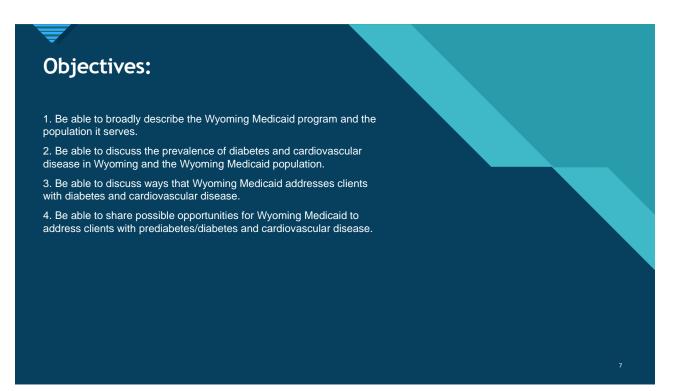
5

5

T

Objectives:

- 1. Be able to broadly describe the Wyoming Medicaid program and the population it serves.
- 2. Be able to discuss the prevalence of diabetes and cardiovascular disease in Wyoming and the Wyoming Medicaid population.
- 3. Be able to discuss ways that Wyoming Medicaid addresses clients with diabetes and cardiovascular disease.



/





Medicaid 101

- Established by adding title XIX to Social Security Act in 1965
 - · All states participate since 1982
 - Federal State program
 - FMAP (50-77%)
- · Covers 85 million people in the US
 - Pays for half of all births in US
 - 45% of recipients are children
 - Largest payer LTC
 - 80% MCOs
- ACA (2010) Medicaid expansion to those up to 138% FPL
 - National Federation of Independent Business v. Sebelius (2012)
 - 41 Medicaid programs expanded to date
- COVID-19 and "Unwind" (2020-24)

9

9

Medicaid 101

Medicaid

- Joint federal/state program
- · Healthcare entitlement for low-income people
- · Covers long-term care
- Waiver programs

Medicare

- · Federal program
- Healthcare program for seniors* paid for through earmarked taxes
- Does not cover long-term care





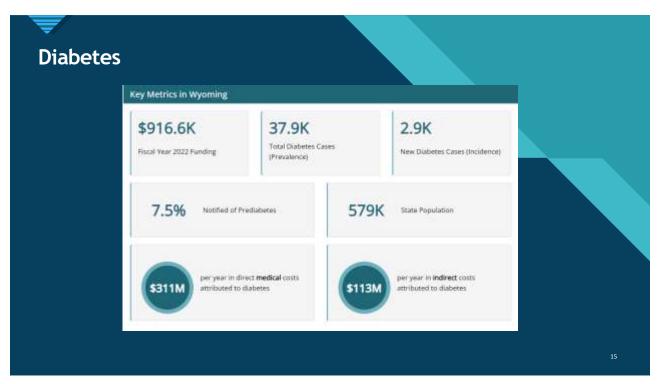




Diabetes

- Diabetes is the eighth leading cause of death in the U.S.
- People with diabetes face serious disease-related complications — such as kidney disease, lower limb amputations, and heart and vascular issues.
- Diabetes disproportionately impacts Medicaid beneficiaries when compared to the general public
- Medicaid beneficiaries experience higher rates of poor diabetes management, worse glycemic outcomes, more barriers to care, and more condition-related complications









Cardiovascular disease

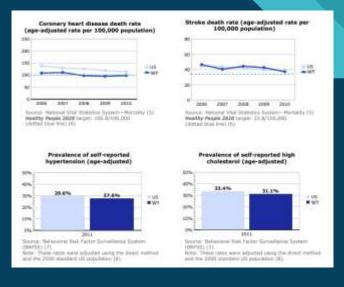
- Λ
- Cardiovascular disease—including heart disease, stroke, and other vascular diseases—is the leading cause of death in the United States. Each year, nearly 800,000 people die from cardiovascular disease, accounting for one in every three deaths (1).
- 惊
 - An estimated 67 million American adults have high blood pressure and 71 million American adults have high levels of low-density lipoprotein (LDL) cholesterol. These are two leading risk factors for heart disease and stroke (2,3).
- ()

About one of every six healthcare dollars in the United States is spent on treating cardiovascular disease. Annual US cardiovascular disease costs exceed \$192.1 billion in direct medical expenses and \$312.6 billion when indirect expenses are included (4).

17

17

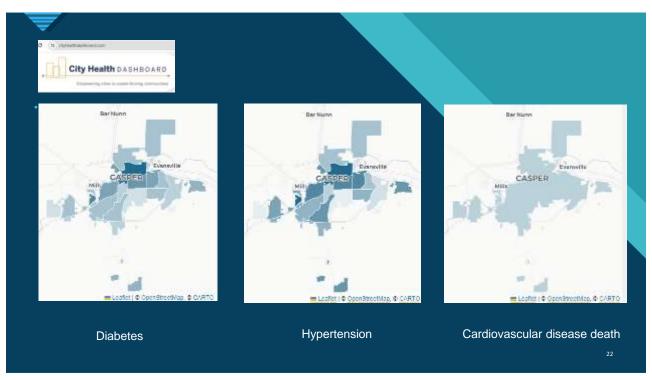
Cardiovascular disease











DM and CVD in Medicaid population

- In CY 2023 there were 3,747
 unique Medicaid Members with a
 Diagnosis of type II diabetes on a
 paid claim
- In CY 2023 there were 7,503
 unique Medicaid Members with a
 Diagnosis of hypertension on a
 paid claim

23

23





Wyoming Medicaid Opportunites

In addition to diabetes care, medications/supplies and nutrition services, Wyoming Medicaid offers:

- Continuous glucose monitoring
- WYhealth HCM/Outsmart Diabetes Program
- Diabetes Prevention Program*
- Quit Wyoming*

25

25

Continuous Glucose Monitors (GCM)



- standard of care for people with type 1 diabetes
- recommended for people with type 2 diabetes on insulin
- GCM have been shown to:
 - · Improve health outcomes
 - Reduce healthcare costs
- Wyoming Medicaid covers GCM for people with type II DM on insulin since 2023
- Wyoming Medicaid also covers remote patient monitoring (RPM)

26



WYhealth

- Wyoming Medicaid's FREE Care Management Program
- · Goals of the WYhealth program:
 - Increase patient's understanding of their health condition
 - · Goal setting
 - Support compliance with treatment plan
 - · Better utilization of health resources



27

27

T

WYhealth

- Candidates are identified internally or by referral
 - Make a secure web referral
 - Call WYhealth @ 888-545-1710
- Member will receive a letter and phone call.
- Primary care provider receive a letter.
- Enrolled members placed in targeted program and assigned nurse manager





WY Health

- Care Transitions assist from discharge from inpatient stay to home
- · Behavioral Health Management
- Intensive Care Management provide short term support and identify psychiatric residential treatment facility (PRTF) placements
- Maternity Management
- Wellness Program targets women age 50+ with no preventive mammogram in the last year (began July 2023)
- Focused Care Referrals from eligibility based upon answers to survey regarding social determinants of health.
- Threshold Program >12 outpatient office visits



Disease Management

Asthma

Cardiac

Diabetes

Hypertension

Complex Care Management - for those with multiple coexisting health conditions

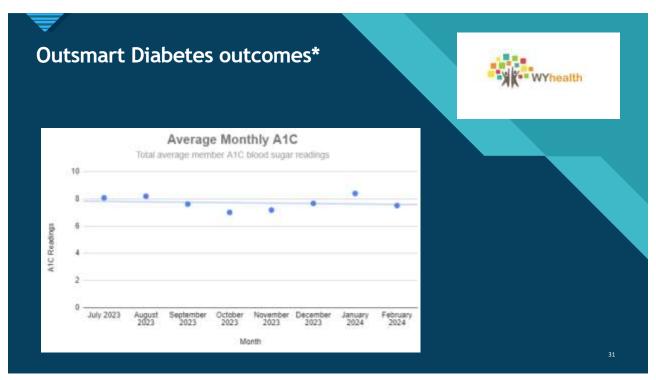
29

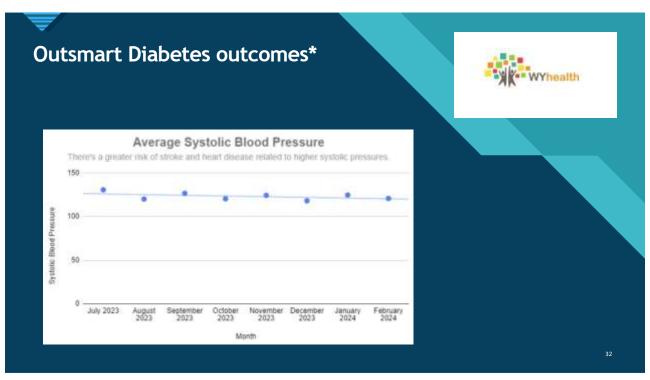
29

Outsmart Diabetes!

- New in 2023!
- Incentive program for adult Medicaid patients with diagnosis of diabetes
- Participants receive \$50 quarterly gas/food certificate
- · Items to track monthly:
 - blood sugar
 - blood pressure
 - weight
 - · check-in with your Nurse Care Manager
- · Items to track quarterly:
 - A1C
 - Physician visits as indicated (PCP, foot check, vision check)
- Endpoints weight, SBP, A1c









Diabetes Prevention Program

Records Pros

- 12 month long evidence-based program developed by the CDC
 - · Initial 6 months: one session every week
 - Next 6 months: one session every month
- Follows a curriculum focusing on healthy eating, increasing physical activity, and managing stress
- Weekly support from peers and a lifestyle coach in a group setting
- Reduces the risk of developing diabetes by 58%

33

33

Diabetes Prevention Program





- BMI of 25+ (23+ if Asian American)
- · Not have a diagnosis of diabetes
- Not pregnant
- A1C 5.7 6.4 OR a positive risk assessment score
- CDC Risk Test: https://www.cdc.gov/prediabetes/takethetest OR https://www.findoutwy.org/
- · Patients can self refer to a program OR be referred by their provider



Diabetes Prevention Program - Medicaid Clients

- · Minimum of 1 year plan of care
- DPP services may be used only one time per member
- Services are comprised of 2 components:
 - First 6 months of initial core sessions
 - Second 6 months of maintenance
- Subsequent services as medically necessary up to 24 months
- Documentation requirements
- Eligible enrolled providers: MD, DO, NP, PA, PharmD, RD

35

35



Wyoming Quit Tobacco

- Smoking is the leading preventable cause of premature death in the United States, resulting in about 480,000 deaths each year.
- More than 16 million Americans have a smoking related illness
- Adults enrolled in Medicaid smoke cigarettes at a rate more than twice as high as that of privately insured adults (23.9% vs. 10.5%).
- Nationally, Medicaid spends about \$40 billion (more than 15%) on health care for smoking-related diseases annually.
- Smoking cessation can add as much as a decade to life expectancy.

CDC







Wyoming Quit Tobacco

- FREE program to Wyoming residents regardless of insurance
- WDH contracts with National Jewish
- Funded with federal and tobacco settlement funds
- Program components:
 - Quit counseling
 - 12 weeks of nicotine replacement sent to home
 - Varenicline or bupropion (after insurance)
 - · Targeted programs for ANAI, pregnant, BH
- Patients are up to 11x more likely to enroll in a program with provider referral

1-800-QUIT NOW

www.QUITWYO.org

37





Future directions/opportunities

- Ongoing programmatic analysis and improvement
- Weight management program
- Evaluation of coverage GLP-1 medications for obesity and cardiovascular disease
- Targeting and outreach for health management
- Provider and client feedback



