

Diabetic Services Most Likely to be Utilized by Patients in a Concierge Practice: A Quality Improvement Initiative

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Purpose

- The purpose of this scholarly project was to conduct a quality improvement initiative to identify the type of diabetic concierge services desired by patients with prediabetes or type 2 diabetes for disease management and control.

Background

Problem

- 30.3 million Americans have been diagnosed with diabetes in 2015.
- There are 1.5 million Americans diagnosed with diabetes every year.
- Diabetes is one of the top seven chronic diseases causing death and disability in America.
- The estimated total cost for medical care for diabetes in 2017 rose to \$327 billion up from \$245 billion in 2012.
- Programs and services to manage prediabetes and type 2 diabetes are costly for those without insurance and high deductibles prevent access to these services.

Potential Solution

- Access to more affordable education and wellness services to manage diabetes can assist in keeping the cost of diabetic care low though a variety of program plans.
- If the costs of diabetic care can be kept sufficiently low and tailored to the individual, patients can more easily access services resulting in improved outcomes.
- Concierge care can provide patients with pre-diabetes and type 2 diabetes personalized, affordable care to manage/control the disease regardless of insurance coverage.

Methods

Design

- A project-director developed questionnaire using a Likert scale concerning diabetic wellness and disease management concierge services that patients would be willing to pay for. The survey was scored as 1 = not likely to be paid for to 5 = highly likely to be paid for.
- A focus group with a chiropractic healthcare provider and office staff was held to determine how likely they would be to implement a variety of wellness and diabetic management concierge services into their practice.

Sample

- 15 patients with prediabetes and 15 patients with type 2 diabetes completed the questionnaires.
- Focus Group consisted of 1 healthcare provider and 2 office staff members.

Setting

- A private, for profit chiropractic clinic focused on wellness services.

Results

Table 1: Sample Demographics (n=30)

Gender	Age Group	Diagnosis	Insurance Status
14 Females (46.7%)	3 18-30 year old (10%)	15 Prediabetes (50%)	28 Have Insurance (93.3%)
16 Males (53.3%)	8 31-45 year old (26%)	15 Type 2 Diabetes (50%)	2 Did not have Insurance (6.7%)
	19 46-65 year old (63.3%)		

Table 2: Descriptive Statistics

	Mean	Standard Deviation
likelihood of paying for wellness coaching	2.97	1.464
likelihood of paying for diabetes education	3.07	1.461
likelihood of paying for medication counseling	2.83	1.341
likelihood of paying for diabetes office testing	3.63	1.497
likelihood of paying for nutrition/wt loss counseling	4.07	3.483

Frequency Tables of Paying for Specific Services

Table 1: likelihood of paying for wellness coaching (n=30)

	Frequency	Percent
not likely	7	23.3
somewhat likely	5	16.7
likely	6	20.0
very likely	6	20.0
highly likely	6	20.0
Total	30	100.0

Table 2: likelihood of paying for diabetes education (n=30)

	Frequency	Percent
not likely	6	20.0
somewhat likely	5	16.7
likely	7	23.3
very likely	5	16.7
highly likely	7	23.3
Total	30	100.0

Table 5: likelihood of paying for nutrition/weight loss counseling (n=30)

	Frequency	Percent
not likely	4	13.3
somewhat likely	3	10.0
likely	9	30.0
very likely	4	13.3
highly likely	10	33.3
Total	30	100.0

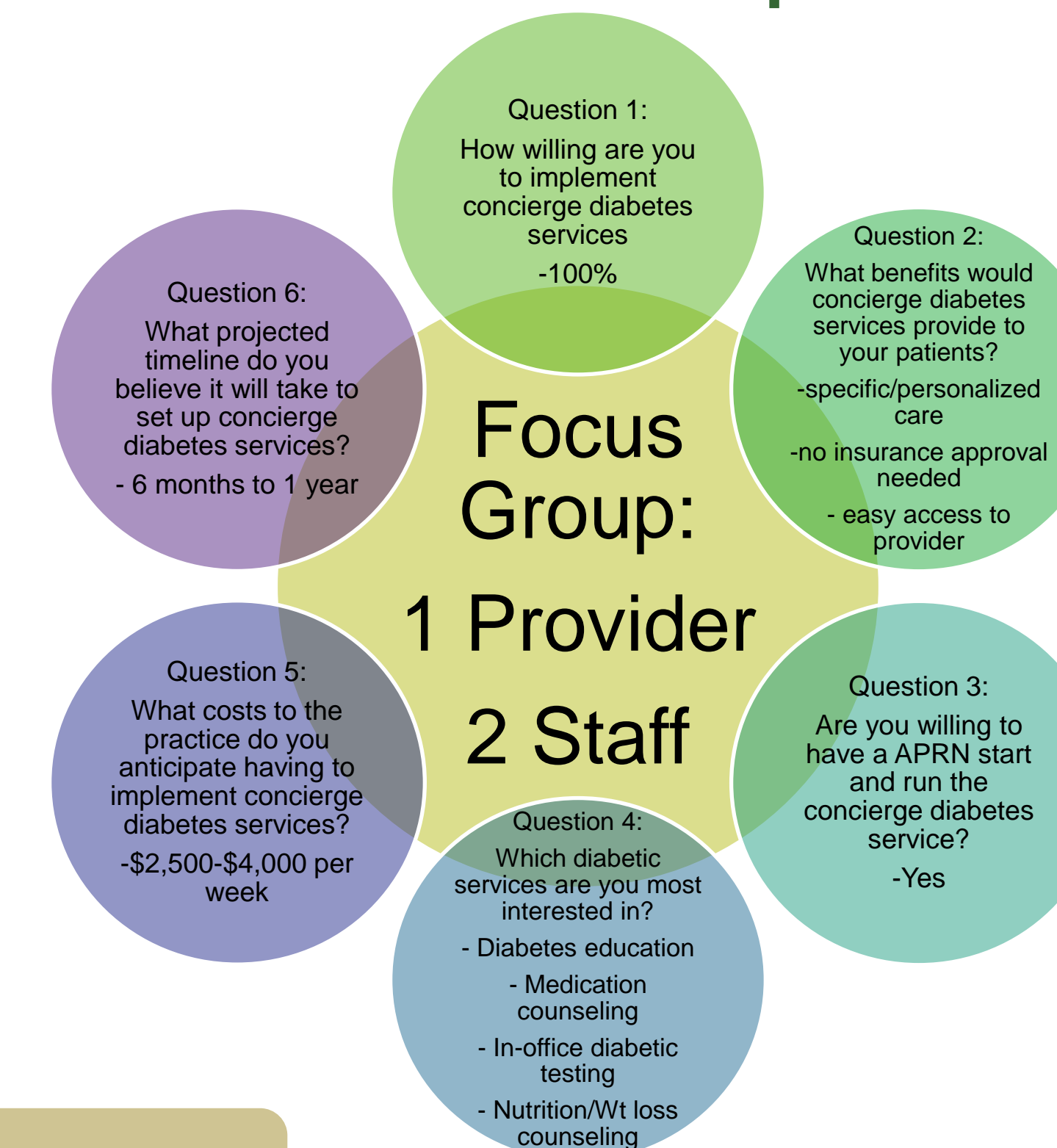
Table 3: likelihood of paying for medication counseling (n=30)

	Frequency	Percent
not likely	7	23.3
somewhat likely	4	13.3
likely	10	33.3
very likely	5	16.7
highly likely	4	13.3
Total	30	100.0

Table 4: likelihood of paying for in-office diabetic testing (n=30)

	Frequency	Percent
not likely	5	16.7
somewhat likely	2	6.7
likely	4	13.3
very likely	7	23.3
highly likely	12	40.0
Total	30	100.0

Table 3: Focus Group Questions



References

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Limitations

- The small sample size did not yield enough data between insured and noninsured patients
- The assessment did not include ethnicity as a factor

Conclusion

- The prevalence of type 2 diabetes is expected to double or triple by 2050. APRNs are uniquely poised to implement cost effective alternative care.
- Prediabetic and type 2 diabetic patients are interested in and willing to pay for concierge diabetic services whether they have insurance or not.
- The patient survey results demonstrated that concierge diabetic services would be utilized by prediabetic and type 2 diabetic patients.
- In-office diabetes testing was the most likely service to be utilized (40%) and wellness coaching was the least likely service to be utilized (23.3%).
- The results of the focus group demonstrated that the provider and staff were willing to implement a concierge-type service for prediabetic and type 2 diabetic patients in their practice.
- Linking concierge care to improving outcomes in diabetes is feasible and affordable for patients and providers.

Recommendations

- Concierge care provides enhanced service, greater access to care, and better care co-ordination.
- The chiropractic wellness clinic is willing to implement concierge diabetic services to the practice to provide the patients with the benefits of personalized affordable care.
- The concierge services most likely to be implemented were diabetes education, medication counseling, in-office diabetic testing and nutrition/weight loss counseling.
- Doctor of Nursing Practice APRNs are effective providers in improving clinical outcomes with programs such as concierge-type healthcare services. They are leaders prepared to create, initiate and implement policies and programs to improve healthcare outcomes.
- The provider and office staff preferred a board-certified advanced practice registered nurse (APRN) to start and run the concierge diabetic services due to their holistic patient centered care.



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