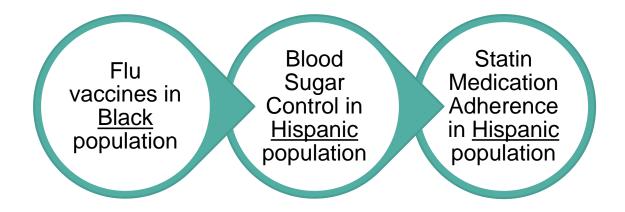
Health Equity Ifedayo Kuye, M.D. VP Medical Director of Clinical Operations



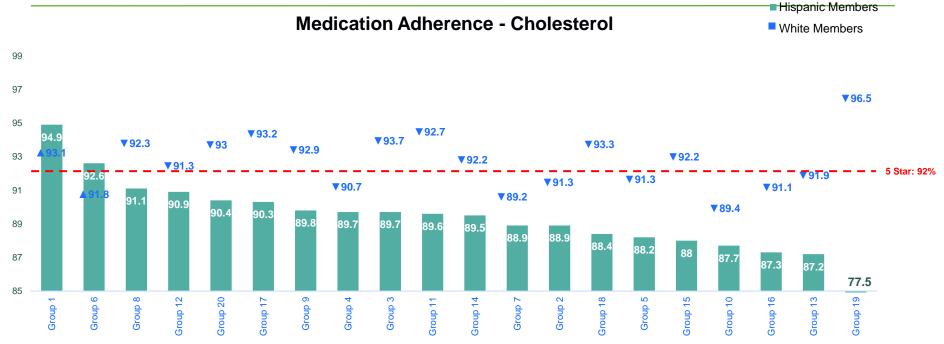
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SCAN has now made it an organizational priority to address the largest inequities in our member population beyond adherence



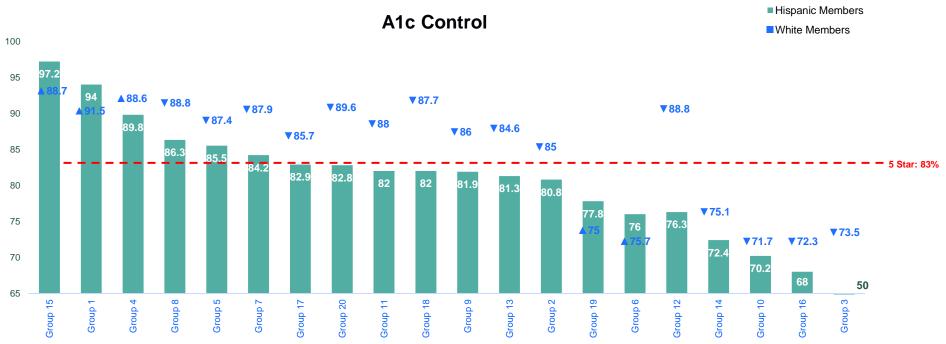
Our goal is to <u>eliminate</u> these health inequities in key populations with a focus on chronic condition management and prevention

2022 Performance Medication Adherence for Cholesterol for Hispanic vs. White Members



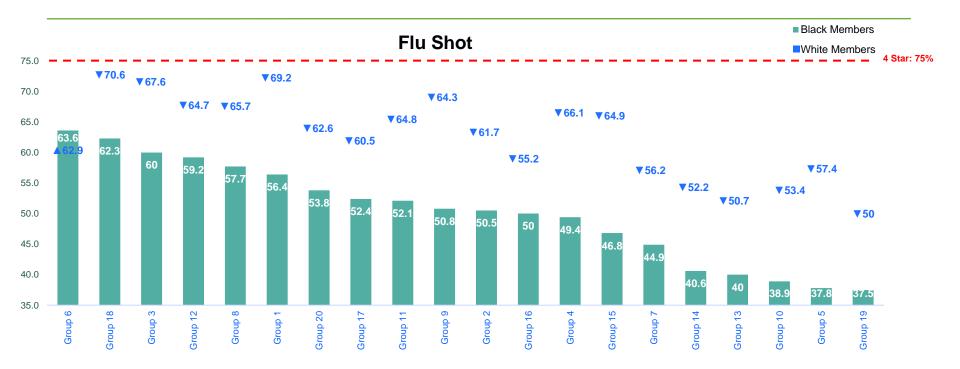


2022 Performance for A1c Control for Hispanic vs. White Members





2022 Performance for Flu Shot for Black vs. White Members





Why Managing these Measures Matters

Flu vaccination is associated with a lower mortality from all causes, stroke, chronic renal disease, DM, pneumonia, COPD, heart diseases and malignancy (Wang et al. 2007)

A 1% increase in A1c level among patients with type 2 diabetes is associated with an increase in allcause mortality, heart disease, heart failure, stroke and peripheral vascular disease (Zhang et al. 2012)

Higher levels of HbA1c is associated with an increased risk of stroke with a dose-dependent response when compared with patients with HbA1c <9%, even after adjusting for CHA2DS2-Vasc risk factors and use of oral anticoagulants. (Kerzele et al. 2022)

Poor statin adherence is associated with increased risk of cancer and cardiovascular mortality (Lee et al. 2020)

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What SCAN is doing

Health Equity Measures on Provider Incentive Program

- Blood Sugar Control– Hispanic
- Medication Adherence Statins – Hispanic
- o Flu Shot-African Americans

Health Equity Excellence Award

 Based on HE Provider Incentive Program (PIP) Performance

 Eligibility criteria announcement at the SCAN 2023 Quality Symposium

o Awarded in June 2024

Health Equity Provider Group Engagement

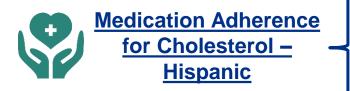
 Identify 5-Star Health Equity Champion

- Collaborating with mulple Provider Partner Groups on Diabetes Management referral programs
- HEDIS and Pharmacy reports include Race and Language
- Diabetes & cholesterol mgmt. webinar in July 2023

Reports/Tools for Each Metric Focus



	Report/Tool	Brief Description
5	Network Gap of Care Flat File	HEDIS measure gaps
	Monthly_Flu_Rpt	Lists current Flu gaps



Adherence Weekly Monitoring Report	Members in the gap for medication adherence measures
Refill Report	Members due or past due in the upcoming week for a medication refill.
Re- assessment of Chronic Meds (RCM) Report	Members that need to have their treatment plan reassessed



Topic: Focusing on Diabetes and Cholesterol Management in the Hispanic Population **When**: July 12, 2023, 12pm-1pm

Registration link coming soon!

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Brainstorm



Best Practices



- Diabetes self management education program led by diabetic educators
- Pharmacist led diabetic clinic with collaborative practice agreement
- Customized outreach and mailers
- Group classes led by health coaches/diabetic educators/nurses

Cholesterol Management Programs

- Weekly text messages and refill reminders
- 100-day supply conversion for member if possible
- · Education program led by a pharmacist
- Monthly cholesterol management classes
- Deprescribing

Flu Patient education on importance of getting vaccinated using the SHARF model

- Include messaging in the aftervisit summary
- Provide patients with educational materials to explain the benefits of the flu vaccine and the risk of complications for those at high risk

Ensure classes and educational material are offered in English and Spanish

Ensure providers are bilingual and culturally congruent with their patients

Ensure team members are trained on culturally sensitive care and communication skills

Collect data on language preference and Race

Stratify opportunities and outcomes by language preference and Race