

Implement and Optimize Professional CGM using a Standardized Approach:

The Identify, Configure, Collaborate Framework

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AMGA



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Understanding, Integrating and Translating Technology in Diabetes Care

A Framework for Optimizing Technology-Enabled Diabetes and Cardiometabolic Care and Education

The Role of the Diabetes Care and Education Specialist

Purpose

The purpose of this article is to present a framework for optimizing technology-enabled diabetes and cardiometabolic care and education using a standardized approach. This approach leverages the expertise of the diabetes care and education specialist, the multiplicity of technologies, and integration with the care team. Technology can offer increased opportunity to improve health outcomes while also offering conveniences for people with diabetes and cardiometabolic conditions. The adoption and acceptance of technology is crucial to recognize the full potential for improving care. Understanding and incorporating the perceptions and behaviors associated with technology use can prevent a fragmented health care experience.

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Podcast can be found at: www.DiabetesEducator.org/technology/integration

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Greenwood et al

Technology-Enabled Care and Education: The Role of the DCES

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From the Association of Diabetes Care & Education Specialists

Technology Integration

The Role of the Diabetes Care and Education Specialist in Practice

Purpose

Technology is rapidly evolving and has become an integral component of diabetes care. People with diabetes and clinicians are harnessing a variety of technologies, including connected blood glucose meters, continuous glucose monitors, insulin pumps, automated insulin delivery systems, data-sharing platforms, telehealth, remote monitoring, and smartphone mobile applications to improve clinical outcomes and quality of life. Although diabetes technology use is associated with improved outcomes, this is enhanced when the person using it is knowledgeable and actively engaged, simply wearing the device or downloading an app may not automatically translate into health benefits. The diabetes care and education specialist (DCES) has a central role in defining and establishing a technology-enabled practice setting that is efficient and sustainable. The purpose of this article is to describe the role of the DCES in technology implementation and to demonstrate the value of diabetes technology in both the care of the individual and as a tool to support population-level health improvements.

Conclusion

By following the recommendations in this article, DCESs can serve as technology champions in their respective practices and work to reduce therapeutic inertia while improving health outcomes and providing patient-centered care for the populations they serve.

Appendix content can be found at: www.diabeteseducator.org/technology/integration

Podcast can be found at: www.DiabetesEducator.org/technology/integration

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Technology Integration: The Role of the Diabetes Care and Education Specialist

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From the Association of Diabetes Care & Education Specialists

A Framework for Optimizing Technology-Enabled Diabetes and Cardiometabolic Care and Education: The Role of the Diabetes Care and Education Specialist*

PURPOSE

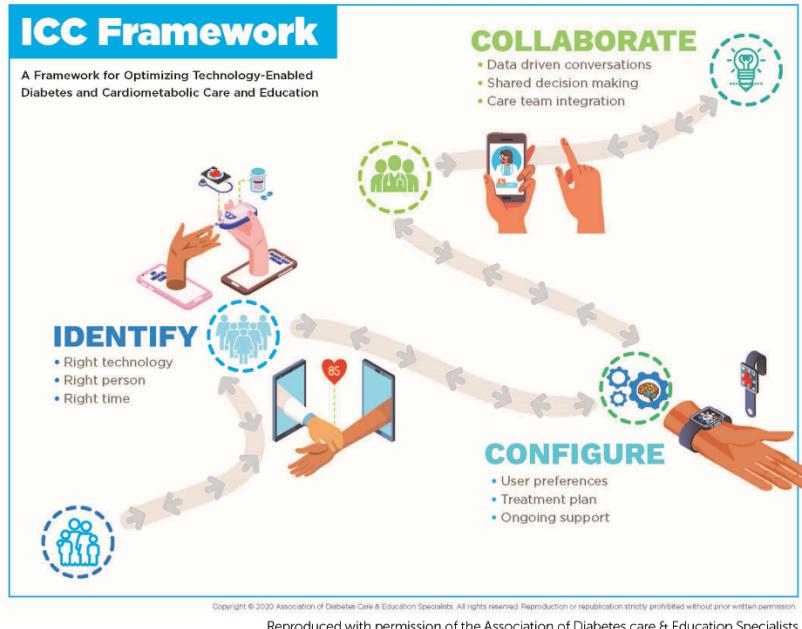
Present a framework for optimizing technology-enabled diabetes and cardiometabolic care and education using a standardized approach

Leverage the expertise of the diabetes care and education specialist, the multiplicity of technologies, and integration with the care team

GOALS

An overwhelming majority of self-management decisions occurs outside of the health care setting, and technology can be utilized to improve access, augment care between clinic visits, and prevent or reduce therapeutic inertia.

- 1 People with diabetes are offered access to technology-enabled care and education based on assessed needs, goals, preferences, and resources.
- 2 Technology-enabled solutions support quality care and education by improving health outcomes, quality of life, and satisfaction among people with diabetes (PWD) and healthcare professionals.
- 3 Technology-enabled care facilitates efficient and actionable use of patient-generated health data (PGHD) to support clinical and self-management decisions and care team collaboration.
- 4 Technology enables diabetes care and education specialists to utilize PGHD for effective population health management.



PRINCIPLES

Diabetes care and education specialists:

- Interface and advocate with relevant individuals, departments, and systems (ie, regulatory, compliance, security, contracts, payers) to identify and integrate appropriate technology into practice
- Define training, workflow, and data-integration needs for the use of technology to support each member of the care team with minimal impact
- Utilize a shared decision-making approach regarding technology choices and treatment goals for individuals
- Interpret PGHD on individual and population levels and collaborate with PWD and the care team for treatment plan changes as needed
- Provide evidence-based principles and real-world experience into the development of technology

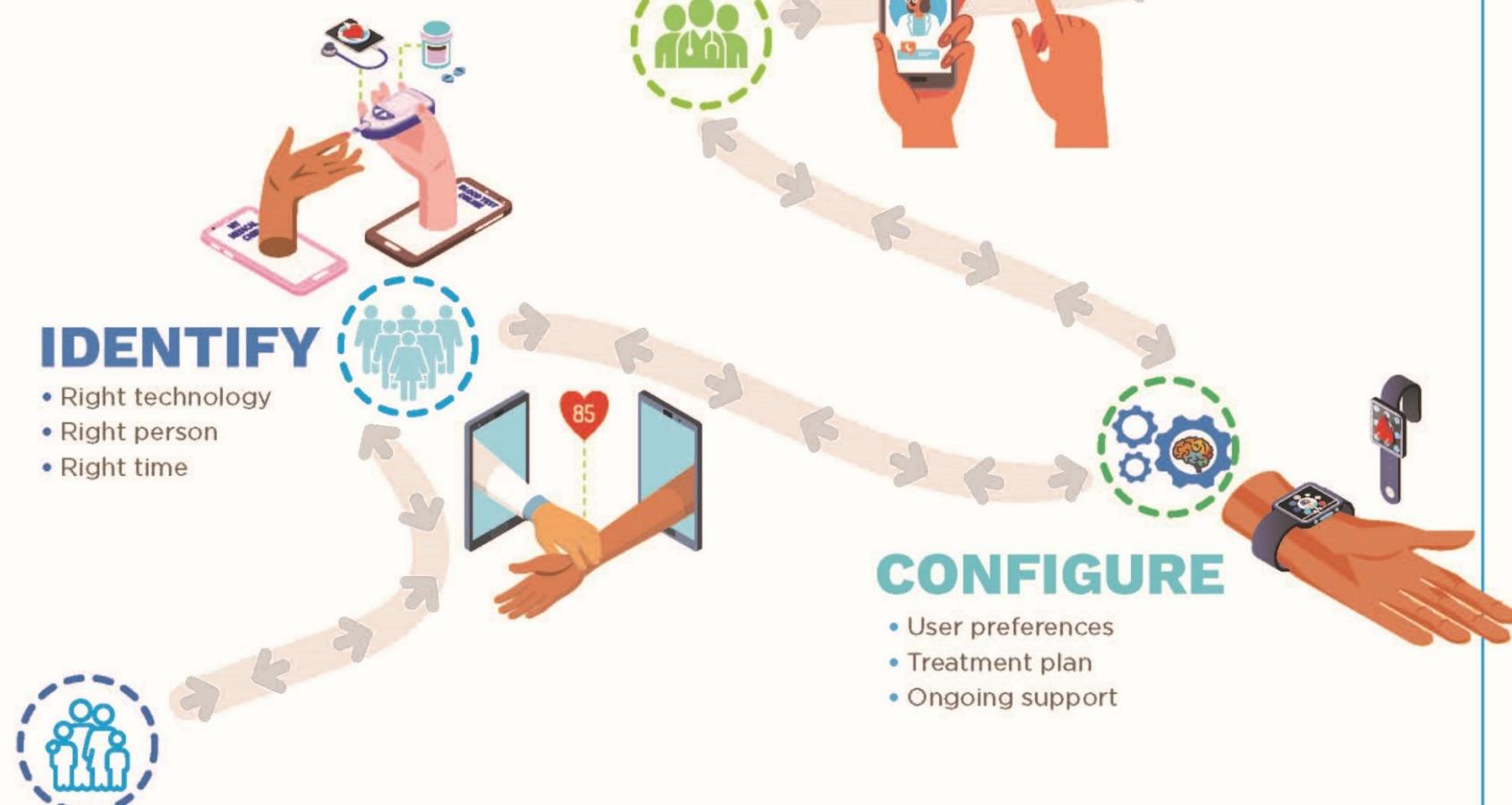
CONCLUSION

The Identify-Configure-Collaborate (ICC) framework guides the diabetes care and education specialist to implement and optimize technology-enabled services in a standardized way. The diabetes care and education specialist is positioned to advocate for technology integration, adoption, and use of the ICC framework in practice, within organizations, and for populations.

<https://danatech.org/media/fmvlcdug/icc-paper-framework.pdf>

ICC Framework

A Framework for Optimizing Technology-Enabled Diabetes and Cardiometabolic Care and Education

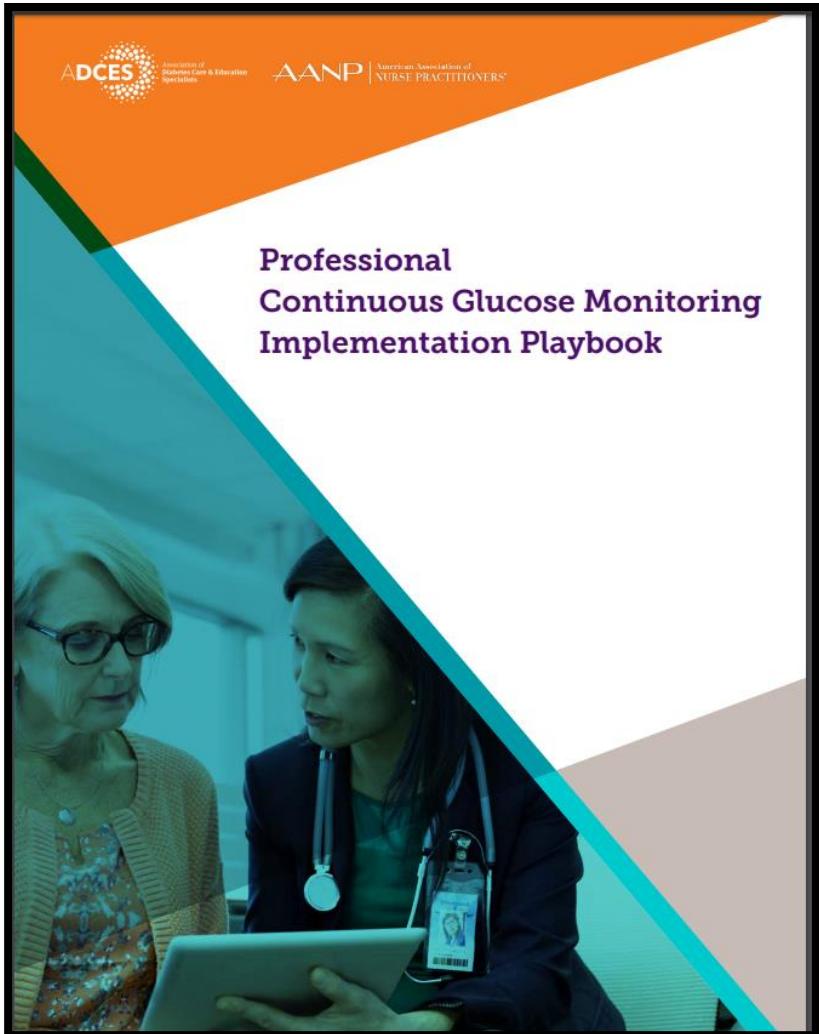


<https://journals.sagepub.com/doi/abs/10.1177/0145721720935125>

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CGM Resources



<https://www.diabeteseducator.org/practice/practice-tools/app-resources/professional-cgm-playbook> Assessed Nov 30, 2020



https://www.amga.org/getmedia/3129de76-0345-459c-9af4-f5f63d6c0078/AMGA_Webinar_Dexcom_Sutter_v3.pdf Assessed Nov 30, 2020

Introduction to Dexcom G6 Pro

Dexcom G6 Professional CGM: One Device Used Two Ways



ADA Position Statement

Blinded CGM when coupled with diabetes education and medication dose adjustment, can be helpful in identifying and correcting patterns of hyper- and hypoglycemia in people with T1D and T2D¹

Unblinded CGM can help patients:

- Alerting them to highs and lows²
- Understand how different foods affect glucose^{3,4}
- Understand how exercise affects diabetes control^{3,4}
- See the impact of diabetes medications⁵
- Make treatment decisions without pricking their fingers^{2*}
- Provide trend arrows for context to glucose levels⁶
- Must be used with a compatible smart device²

CGM = continuous glucose monitoring; T1D = type 1 diabetes; T2D = type 2 diabetes.

*If your glucose alerts and readings from the Dexcom G6 do not match symptoms or expectations, use a blood glucose meter to make diabetes treatment decisions.

¹American Diabetes Association. *Diabetes Care*. 2020;43(suppl. 1):S77-S88.

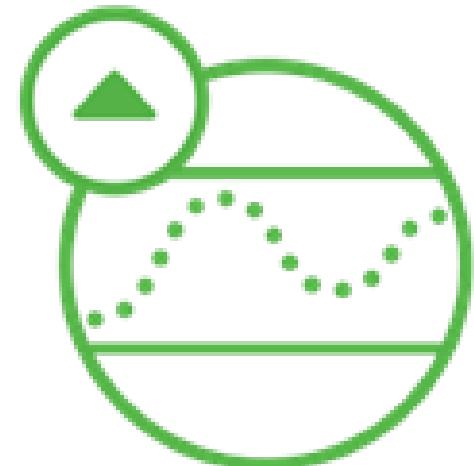
² Dexcom. Dexcom Products: Dexcom G6 Pro. <https://provider.dexcom.com/products/professional-cgm>. Accessed August 26, 2020. ³ Dexcom. How to Customize Alarm and Alerts. <https://www.dexcom.com/faqs/how-to-customize-alarm-and-alerts>. Accessed August 26, 2020. ⁴ Dexcom. FDA Authorized Dexcom G6 Pro. <https://provider.dexcom.com/industry-news/fda-authorizes-dexcom-g6-pro>. Accessed August 26, 2020.

⁵ Dexcom. Why CGM. <https://provider.dexcom.com/why-cgm>. Accessed August 26, 2020. ⁶ Dexcom. Trend Arrows and Treatment Decisions. https://s3-us-west-2.amazonaws.com/dexcompdf/HCP_Website/LBL015804+G6+Trend+Arrows+and+Treatment+Decisions.pdf, Accessed August 26, 2020.

What qualities does the ideal diabetes medication possess?

Clinical Benefits of Dexcom Real-Time CGM

- Reduction in A1c^{1,2,3,4}
- Reduction in time spent in hypoglycemia^{1,4,5} and severe hypoglycemic events⁶
- Reduction in time spent in hyperglycemia¹
- Increased time in target glucose range^{1,4,5}
- Improved overall quality of life and well-being^{7,8,9}



1. Beck RW, et al. JAMA. 2017;317(4):371-378.; 2. Beck RW, et al. Ann Intern Med. 2017;167(6):365-374; 3. Lind M, et al. JAMA. 2017;317(4):379-387; 4. Šoupal J, et al. Diabetes Care. 2019. doi: 10.2337/dci19-0888;

5. Reddy M, et al. Diabet Med. 2018;35(4):483-490; 6. Heinemann L, et al. Lancet. 2018;391(10128):1367-1377; 7. Polonsky WH, et al. Diabetes Care. 2017;40(6):736-741; 8. Olafsdottir AF, et al. Diabetes Technol Ther. 2018;20(4):274-284; 9. Ehrmann D, et al. Diabetes Technol Ther. 2019;21(2):86-93.

Evidence Supporting Professional CGM in T2D

- Uncovering hypoglycemia-multiple studies identified participants had mild or severe hypoglycemia and many episodes were asymptomatic.¹
- Improve A1C & incorporate with education for behavioral changes^{1,2,3}
- Economic benefits for participants who used pro CGM more than once in a 1-year period to change diabetes therapy.³

¹Vigersky, R. Role of continuous glucose monitoring for type 2 in diabetes management and research. *Journal of Diabetes and its Complications*. 2016

²Park, C. et al., The Effectiveness of Continuous Glucose Monitoring in Patients with Type 2 Diabetes: A Systematic Review of Literature and Meta-analysis. *DTT*. 2018

³Sierra, J. et al., Clinical and economic benefits of professional CGM among people with type 2 diabetes in the United States: analysis of claims and lab data. *J of Medical Economics*, 2018

Dexcom G6 Pro

- FDA authorized for ages ≥ 2 y
- 10-Day sensor wear
- Blinded and unblinded modes available
- Single-use, disposable sensor and transmitter
- Unblinded mode
 - No calibrations, no fingersticks*
 - Customizable alerts and alarms
 - Make treatment decisions
- Dexcom G6 sensor accuracy



FDA = US Food and Drug Administration.

*In blinded mode, if individual already checks glucose via fingerstick, they will need to continue to check to see their glucose data

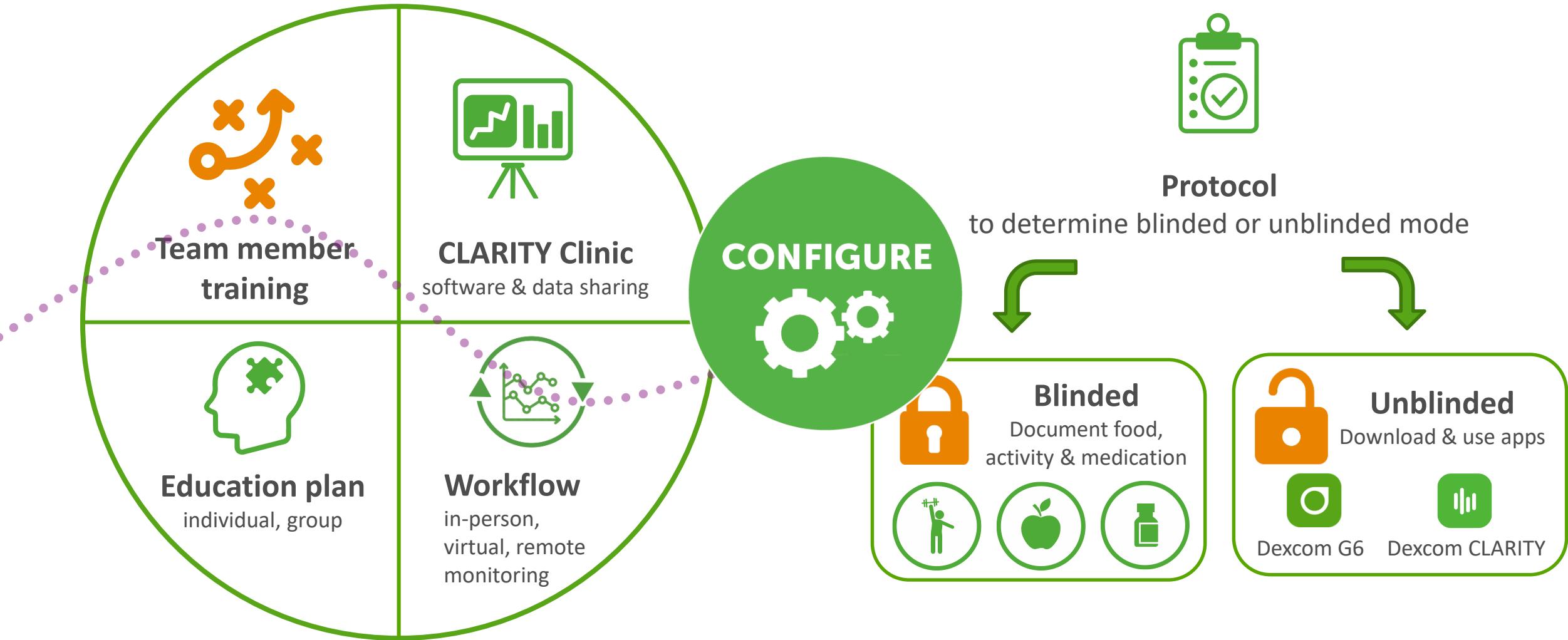
*If your glucose alerts and readings from Dexcom G6 do not match symptoms or expectations, use a blood glucose meter to make diabetes treatment decisions. Dexcom. Dexcom G6 Pro Instructions for Use. <https://dexcompdf.s3-us-west-2.amazonaws.com/Dexcom-G6-Pro-User-Guide.pdf>. Accessed September 22, 2020.

Applying the three-step ICC approach:

Identify, Configure, Collaborate

IDENTIFY





CONFIGURE



Education for Blinded Mode

- Does not provide real-time glucose data or alerts/alarms and patients are only able to view CGM data retrospectively
- May help capture information about what patients are doing without influencing their behavior

BG=blood glucose.

Dexcom. Dexcom G6 Pro Instructions for Use. <https://dexcompdf.s3-us-west-2.amazonaws.com/Dexcom-G6-Pro-User-Guide.pdf>. Accessed September 22, 2020.

Blinded CGM Patient Handout **dexcomG6 PRO**

Patient doesn't have any display device and doesn't see Dexcom G6 Pro Continuous Glucose Monitoring System (G6 Pro) readings. Don't give transmitter SN to blinded patient.

Healthcare professional: Insert sensor (Section A) and attach transmitter (Section B). Complete section C. Review this handout with patient, then give them to take home.

A. Insert Sensor

- 1 Gather materials: applicator, transmitter, and wipes.
- 2 Pick sensor site. Avoid bones, muscle, irritated skin, tattoos, areas that get bumped.
- 3 Clean sensor site with alcohol wipe.
- 4 Peel off adhesive backings.
- 5 Place adhesive on skin.
- 6 Fold and break off safety guard.
- 7 Press button to insert sensor.
- 8 Discard applicator. (follow local guidelines)

B. Attach Transmitter

- 1 Clean transmitter. Only use alcohol wipe.
- 2 Insert transmitter, tab first, into holder.
- 3 Click transmitter into place, flush with holder.
- 4 Rub around patch 3 times.

C. Transmitter removal date _____

Return transmitter

<input type="checkbox"/> In person	Date _____
<input type="checkbox"/> Other _____	Time _____

Sensor (Measures glucose below skin)
Transmitter (Saves sensor readings)

G6 Pro Overview
G6 Pro takes your glucose reading every 5 minutes for 10 days. After returning the system, your healthcare professional reviews your glucose history and may adjust your medication, diet, or exercise.

What's Next?
Once your 10-day sensor session ends, follow the instructions below to remove the patch from your body. Return to your healthcare professional (see Section C). Sensor must be returned within 30 days of starting session.

Patient

What do I do?

- Shower and swim as normal
- Return to your healthcare professional as instructed

What don't I do?

- No MRI's
- No full-body scanners
- No sunscreen or lotions on transmitter
- No system parts in mouth, it's a choking hazard
- Don't remove transmitter, it'll end your sensor session

Continued on reverse

Learn more about G6 Pro at dexcom.com/guides

CONFIGURE



Education for Unblinded Mode

- Patients receive real-time glucose data and alerts/alarms while wearing the device¹
- Customizable alerts for high and low glucose, so patients can take corrective action as needed^{2,3}
- Provides insights into how different foods and exercise affect glucose³
- Shows the impact of diabetes medications⁴
- Helps treatment decisions without pricking fingers^{1,*}
- Provides trend arrows for context in glucose levels⁵
- Must be used with compatible smart device¹

*If your glucose alerts and readings from the Dexcom G6 do not match symptoms or expectations, use a blood glucose meter to make diabetes treatment decisions.

1. Dexcom. Dexcom Products: Dexcom G6 Pro. <https://provider.dexcom.com/products/professional-cgm>. Accessed August 26, 2020. 2. Dexcom. How to Customize Alarm and Alerts. <https://www.dexcom.com/faqs/how-to-customize-alarm-and-alerts>. Accessed August 26, 2020. 3. Dexcom. FDA Authorized Dexcom G6 Pro. <https://provider.dexcom.com/industry-news/fda-authorizes-dexcom-g6-pro>. Accessed August 26, 2020.

4. Dexcom. Why CGM. <https://provider.dexcom.com/why-cgm>. Accessed August 26, 2020. 5. Dexcom. Trend Arrows and Treatment Decisions. https://s3-us-west-2.amazonaws.com/dexcompdf/HCP_Website/LBL015804+G6+Trend+Arrows+and+Treatment+Decisions.pdf, Accessed August 26, 2020.

dexcomG6 PRO

Unblinded CGM Patient Handout

Patient downloads G6 app on their smart phone to view Dexcom G6 Pro Continuous Glucose Monitoring System (G6 Pro) readings.

Healthcare professional: Insert sensor (Section A) and attach transmitter (Section B). Complete sections C and D. Review this handout with patient, then give to them to take home.

A. Insert Sensor

1 Gather materials: applicator, transmitter, and wipes.
2 Pick sensor site. Avoid bones, muscle, irritated skin, tattoos, areas that get bumped.
3 Clean sensor site with alcohol wipe.
4 Peel off adhesive backings.
5 Place adhesive on skin.
6 Fold and break off safety guard.
7 Press button to insert sensor.
8 Discard applicator. (follow local guidelines)

B. Attach Transmitter

1 Clean transmitter. Only use alcohol wipe.
2 Insert transmitter, tab first, into holder.
3 Click transmitter into place, flush with holder.
4 Rub around patch 3 times.

C. Information patient needs for G6 app setup

1 Patient enters alerts settings in app
Low Alert _____ mg/dL
60 mg/dL–100 mg/dL
High Alert _____ mg/dL
120 mg/dL–400 mg/dL
2 Patient enters transmitter SN in app
PUT STICKER HERE
Don't give transmitter SN to blinded patient

D. Transmitter removal date **Return transmitter**

In person **Date** _____
 Other _____ **Time** _____

G6 Pro Overview

G6 Pro takes your glucose reading every 5 minutes for 10 days. After returning the system, your healthcare professional reviews your glucose history and may adjust your medication, diet, or exercise.

Sensor (Measures glucose below skin)
What do I do?

- Keep your smartphone within 20 ft
- Shower and swim as normal
- Return to your healthcare professional as instructed

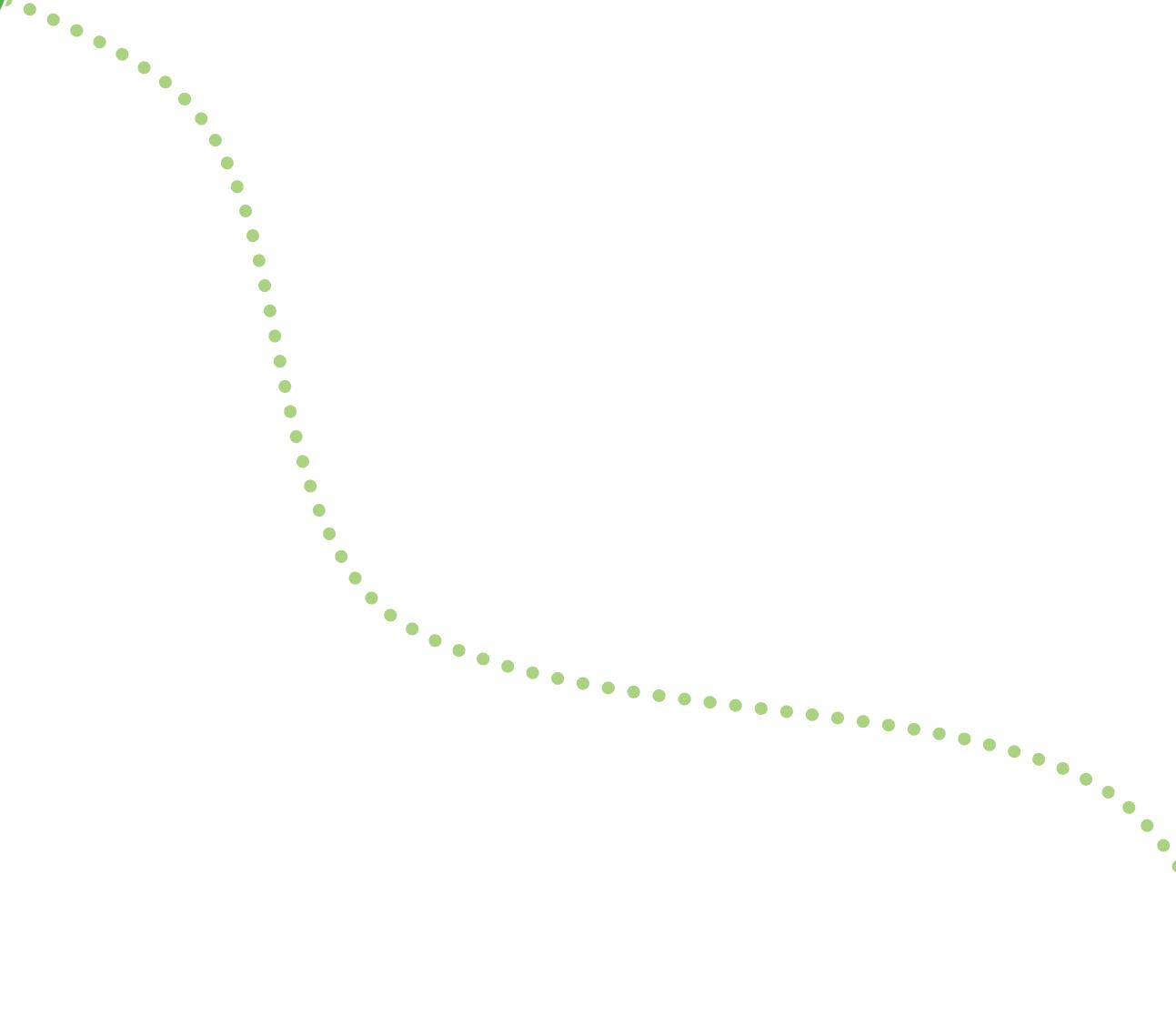
What don't I do?

- No MRI's
- No full-body scanners

Notes: *(Saves sensor readings)*
No system parts in mouth. It's a cracking hazard.
Discard applicator after your sensor session.

Continued on reverse

CONFIGURE



With Team

- Ongoing assessment of program to improve process and outcomes
- Billing, coding and reimbursement
- Marketing of the program
- Program evaluation and dissemination of outcomes

With Person with Diabetes

- 
- Tracking food, activity, medication etc in both blinded and unblinded modes.
 - Unblinded mode:
 - real-time alerts/alarms and trend arrows for treatment decisions
 - and entering events into the G6 App
 - or CLARITY App
 - Understanding glucose values, patterns, trends, time-in-range, and reports
 - Opportunities for health behavior changes
 - Potential need for change in medication
 - Desire for use of personal CGM
 - Next steps for follow up

Review of DATAA Model

COLLABORATE

D



DOWNLOAD DATA

- Ensure open communication to facilitate meaningful discussion
- Ask the person with diabetes what's going well for them
- Download with Reader and view data in CLARITY clinic
- Review glucose metrics and patterns with CLARITY PRO report

A



ASSESS SAFETY

- Ask the person with diabetes if they've experienced hypoglycemia
- If hypoglycemia is present, engage in interactive discussion around potential reasons and realistic solutions
- Review % time below range and glucose variability
- Discuss value of using personal Dexcom G6 with alarms and alerts
- Discuss the opportunity to share CGM data with family or friends when using personal CGM

T



TIME IN RANGE

- Start with the "Best Day" pattern in the CLARITY Pro report to discuss what's working well and how to do more of those activities
- Review progress towards time-in-range goals
- With personal CGM use CLARITY weekly push notifications or email summaries to track progress towards newly defined goals

A



AREAS TO IMPROVE

- Reinforce that all data provide information and CGM values are not "good" or "bad"
- Review time above range and identify possible causes, solutions and adjustments to self-management
- Tailor education based on data to provide person-centered care
- Review use of Trend Arrows in Dexcom G6 app and how to treat for hypoglycemia or adjust insulin for hyperglycemia

A



ACTION PLAN

- Collaboratively engage in feedback
- Encourage engaging in personal experiments choosing one small change at a time (healthy eating, being active etc.)
- Discuss potential changes in the treatment plan
- Identify ongoing support needs
- Plan for follow up

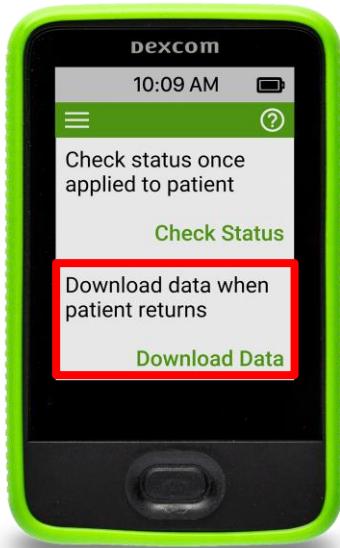
Patient Case Study

- TL is an 63 year old male with T2DM x 17 years
- Comorbid conditions: visual impairment, recent pancreatitis, CKD
- Current DM2 medications
 - Insulin glargine 65 units qpm
 - Glipizide 10mg bid a.c.
- Not checking glucose at home due to visual impairment
- A1C=9%
- Scr=1.8, eGFR=46, + albuminuria



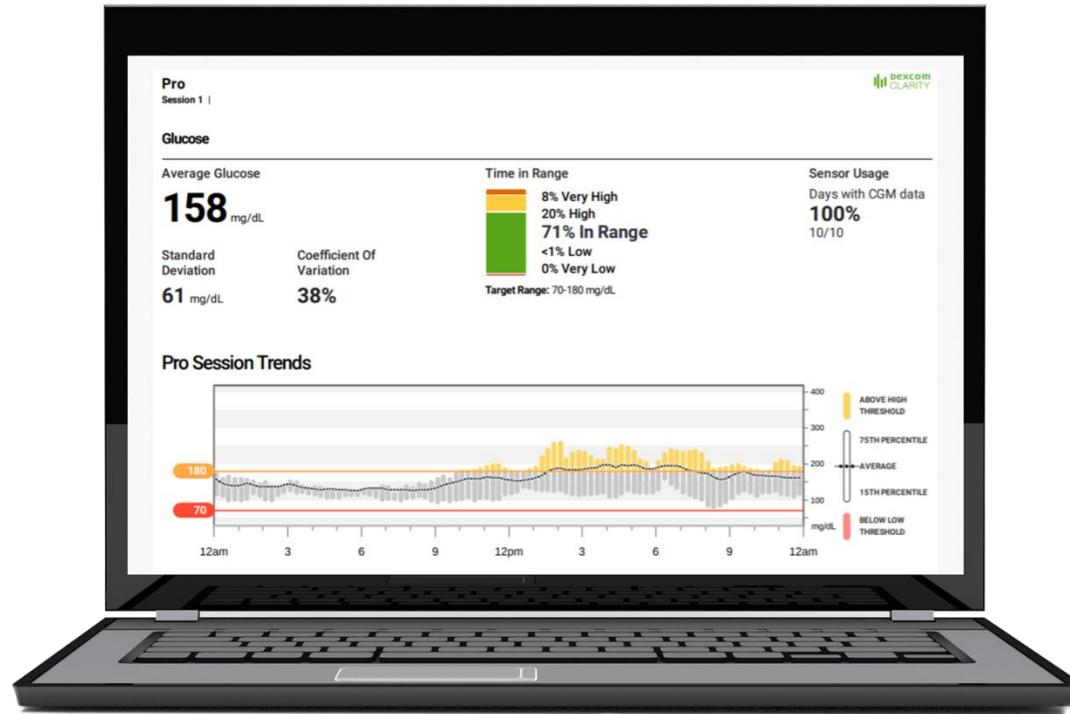


Download Data

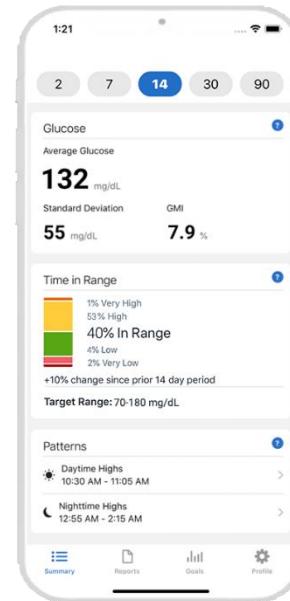


Dexcom G6 Pro Reader

- HCP enter transmitter SN number and downloads patient data to the reader
- Connect reader to the PC and log into CLARITY



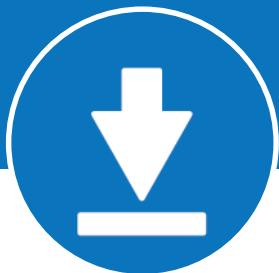
Case study provided by Dr. Diana Isaacs



Dexcom CLARITY app

- Unblinded/Smart device only:
- Patient downloads CLARITY app
- Accepts sharing invitation from clinic

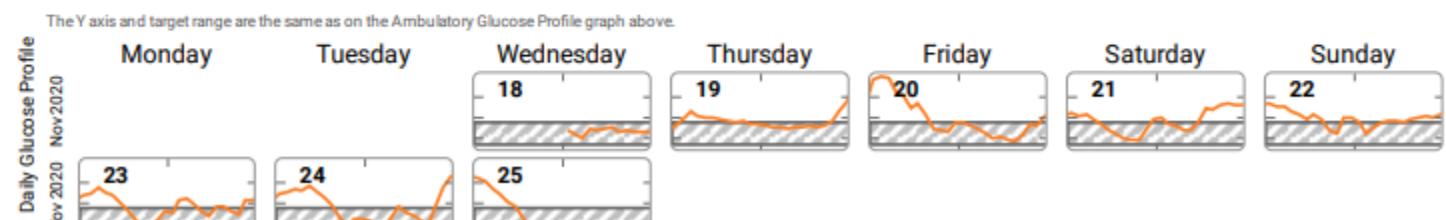
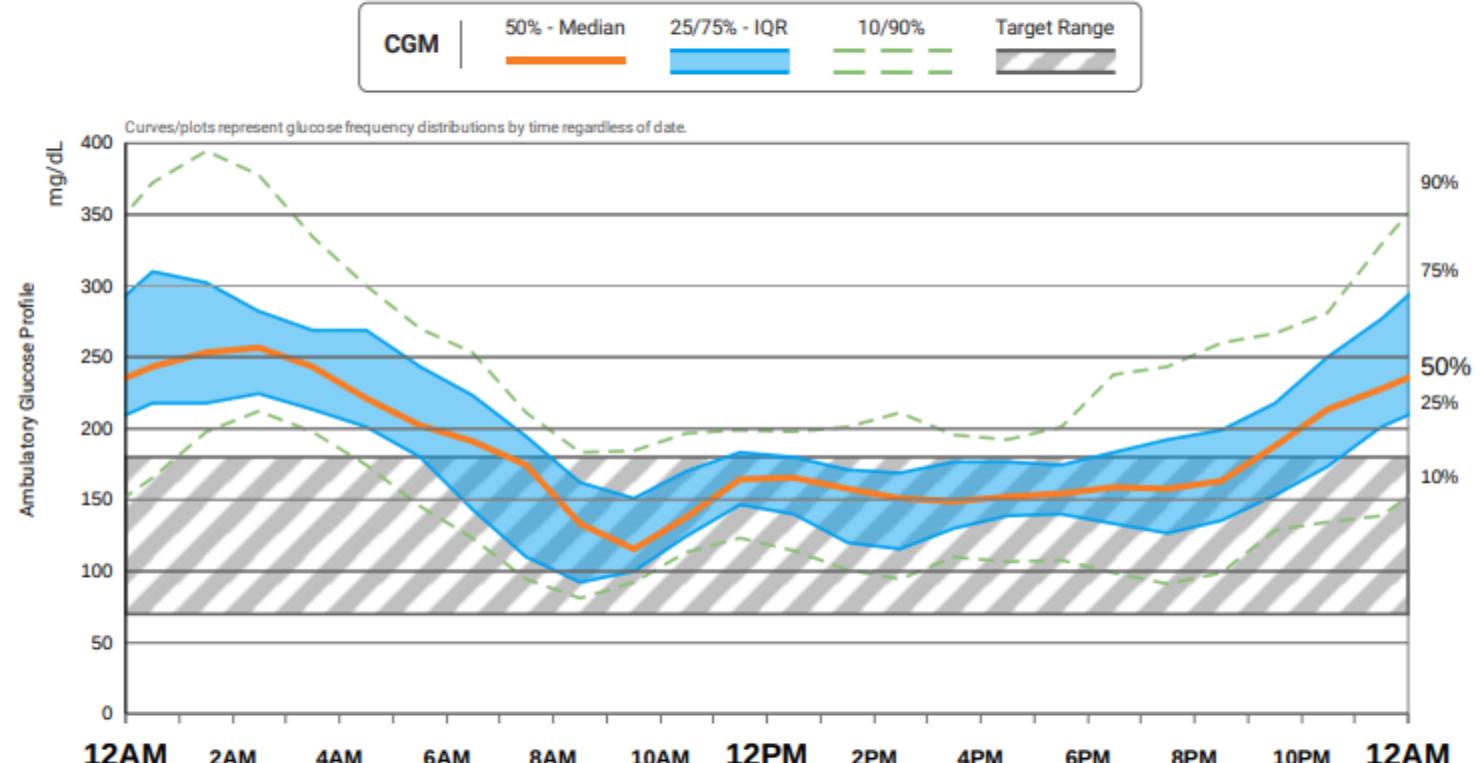
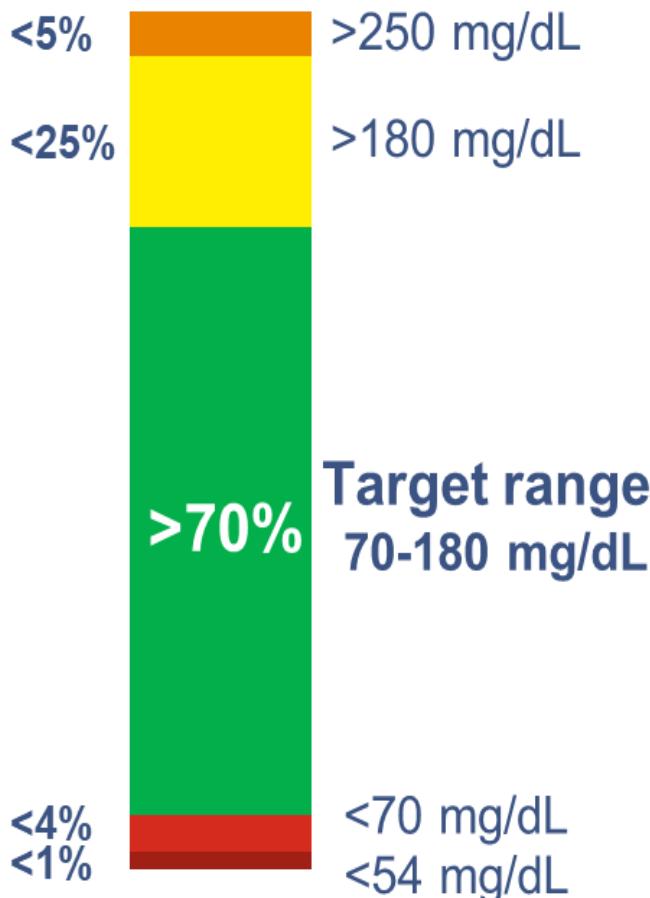
*Patients using Dexcom G6 Pro in unblinded mode can choose to share their glucose data with their HCP via Dexcom CLARITY provided that they download the Dexcom CLARITY app on a compatible smart device and successfully use the share code provided by their HCP before starting their Dexcom G6 Pro session.



D AGP Report



T1 and T2 Diabetes

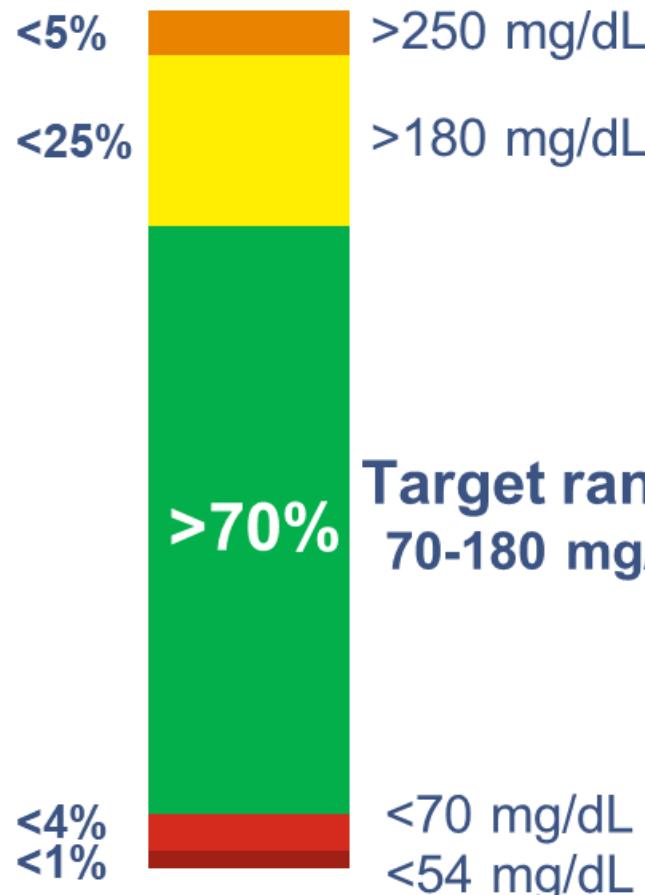


Case study provided by Dr. Diana Isaacs

Assess for Safety



T1 and T2 Diabetes



Glucose

Average Glucose

186 mg/dL

Time in Range

15% Very High
33% High
52% In Range
0% Low
0% Very Low

Sensor Usage

Days with CGM data
70%
7/10

Target Range:
70-180 mg/dL

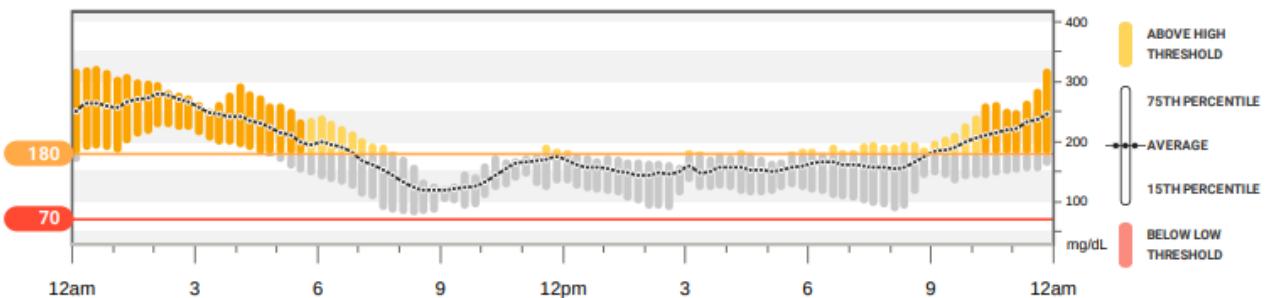
Standard Deviation

63 mg/dL

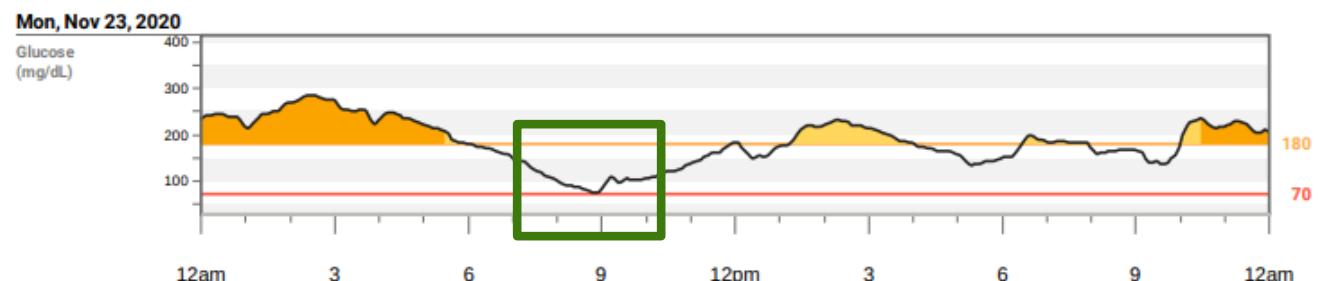
Coefficient Of Variation

34%

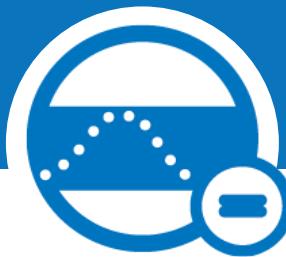
Pro Session Trends



Target range:
70-180 mg/dL

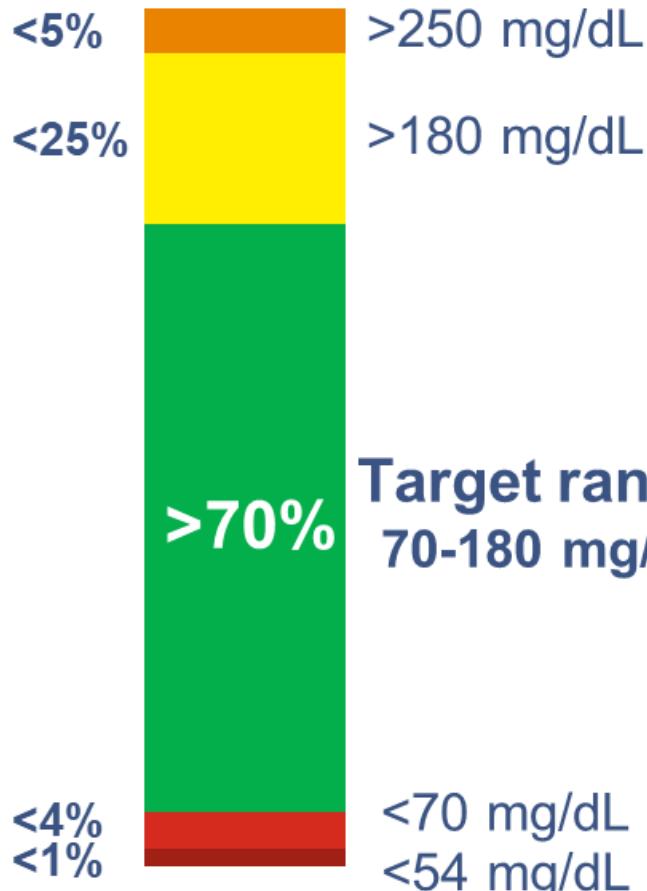


CGM = continuous glucose monitoring; CV = coefficient of variation; GMI = glucose management indicator.
Battelino T et al. *Diabetes Care*. 2019;42(8):1593-1603.



Time in Range

T1 and T2 Diabetes



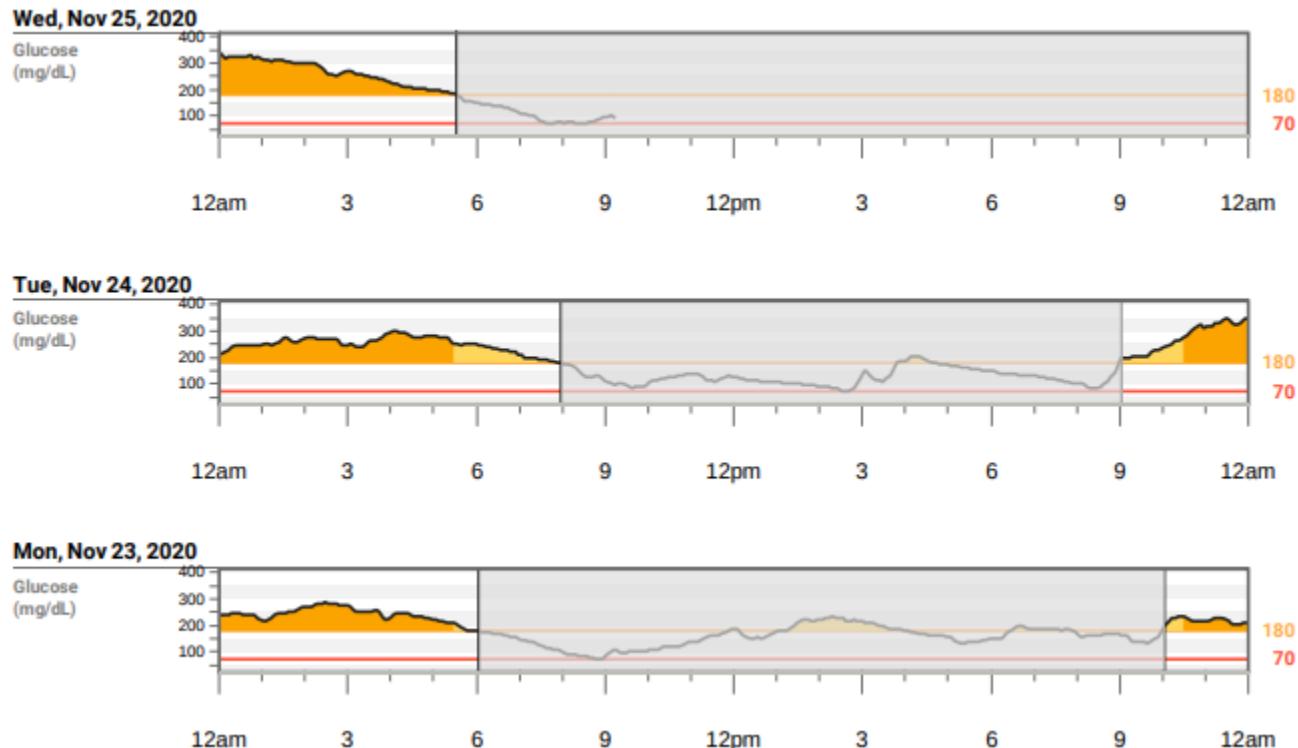
A 5% ↑ TIR is clinically meaningful; A 10% ↑ TIR = .5% ↓A1C

CGM = continuous glucose monitoring; CV = coefficient of variation; GMI = glucose management indicator.
Battelino T et al. *Diabetes Care*. 2019;42(8):1593-1603.



Areas to Improve

- Pattern of nighttime highs between 10:25pm-5:30am
- TL snacks in the evening but noticed he was eating “better” during the day while wearing the CGM
- Reports taking 2nd dose of glipizide right at bedtime (instead of before dinner)
- Denies missing any insulin glargine doses





Action Plan

- Decrease insulin glargine to 60 units daily
- Continue glipizide 10mg BID a.c.
- Counseled on the importance of taking glipizide BEFORE meals
- Advised lower carbohydrate snacks in the evening (ex. nuts instead of popcorn)
- Follow-up with the diabetes care and education specialist
- TL wants a personal CGM (send Rx to pharmacy)





Follow up

D



DOWNLOAD DATA

A



ASSESS SAFETY

T



TIME IN RANGE

A



AREAS TO IMPROVE

A



ACTION PLAN

Average Glucose

173 mg/dL

Standard Deviation

52 mg/dL

GMI

7.4%

Time in Range



Target Range:
70-180 mg/dL

Reimbursement

CPT Code	Services	Who Can Perform Services	Reimbursement
95250	Ambulatory CGM >72 hours; equipment provided, sensor placement, hookup, calibration of monitor, patient training, removal of sensor, and printout of recording	RN/LPN, PharmD/RPh, RD, CDE, MA, Physician, NP, PA: billed by the supervising physician, advanced practitioner or hospital outpatient department	Medicare: \$152.66/patient Private: \$304/patient
95251	Ambulatory CGM >72 hours; analysis, interpretation and report (Face to face not required)	Physician, NP, PA	Medicare: \$36.81/patient Private: \$96/patient

For more information on reimbursement visit: <https://provider.dexcom.com/products/professional-cgm/reimbursement>

The reimbursement information provided is intended to assist you with billing for your services related to continuous glucose monitoring (CGM). It is intended for informational purposes only and is not a guarantee of coverage and payment. Providers are encouraged to contact their local payers with questions related to coverage, coding and payment.

START A PROFESSIONAL CONTINUOUS GLUCOSE MONITORING (CGM) PROGRAM WITH THE IDENTIFY, CONFIGURE, COLLABORATE (ICC)¹ FRAMEWORK

A three-step approach to guide healthcare professionals (HCP) to implement and optimize Dexcom G6 Professional CGM in a standardized way in your clinic or organization.

Identify key assessments, plans and processes you may need to start a professional CGM program in your practice.

WHY



The NEED for services and the clinical and business case.

POPULATION that will benefit from G6 Pro. (Any person with diabetes can benefit from Dexcom G6 Pro. In unblinded mode they can see their glucose data in real-time with the G6 app).

OUTCOMES you are going to measure to evaluate program success. (i.e. change in A1C, reduction in Emergency Department visits, and patient satisfaction).

IDENTIFY



Set up an ACCOUNT to purchase G6 Pro. (Visit provider.dexcom.com for more information).

A PLAN to develop a clinic schedule for CGM including: initiation, download, and report interpretation.



STAKEHOLDERS AND TEAM MEMBERS, including clinical and support staff.

A Technology CHAMPION that understands the value of a professional CGM. (A champion can be a medical assistant, HCP, pharmacist, diabetes care and education specialist, etc.).

IT SUPPORT may be needed to download Dexcom CLARITY if firewalls exist.

WHAT



RECRUITMENT AND MARKETING needed. (Reach out to referring clinicians or practices to let them know they can refer their patients with diabetes. Consider direct to consumer messages).

The process for REIMBURSEMENT including billing codes and prior authorizations. (Codes 95250 and 95251 can be billed for professional CGM training and data interpretation. Go to provider.dexcom.com for more information).

DOCUMENTATION required for reimbursement. (Consider creating a template for the EHR. 72 hours of CGM data are needed to bill for code 95251).

HOW

CONFIGURE

Configure the elements you need to start a Dexcom G6 Pro program.

Define and document workflow and protocols that may assist the team in training, implementation and evaluation. There are resources and training tools available at provider.dexcom.com.¹

PROTOCOL

The process or PROTOCOL for determining if the CGM session will be used in blinded or unblinded mode. Consider unblinded mode for all patients with diabetes with a compatible smart phone so they can have a real-time CGM experience.¹ Consider using in blinded mode for people without diabetes (pre-diabetes, weight loss etc.).¹

Configure different experiences for maximum benefit for both the patient and the clinician.

UNBLINDED MODE*

- Intended for people with diabetes
- Users see their data in real time using the G6 app
- Users see patterns and trends in the CLARITY app
- HCP reviews retrospective data in CLARITY clinic using the G6 Pro report
- Enable remote monitoring and view data in real-time for telehealth follow up



BLINDED MODE

- Users will not see data in real time
- Consider asking patients to record activity, food and medication during session
- Download data with the READER
- Upload to CLARITY clinic
- HCP and patient review retrospective data together using the G6 Pro report after the Dexcom G6 Pro session



TEAM MEMBER TRAINING

- Train on workflow and protocols
- Have a plan in place for training when new staff are hired

WORKFLOW

- How are you going to organize the Dexcom G6 Pro program?
- Develop Smart Phrases for EHR documentation to be consistent

CLARITY SOFTWARE

- Configure the CLARITY Clinic software to ensure data sharing
- Go to provider.dexcom.com/support for help with setting up CLARITY clinic account

EDUCATION PLAN

- Individual or group; virtual or in person education and training
- Consider a shared medical appointment, to place sensor and educate about CGM, and a follow up to review data trends and patterns where people learn from each other

Collaborate with the CGM team to review: process and outcomes; billing, coding and reimbursement; marketing; and program evaluation.

Collaborate with patients on tracking food, activity and medication. In Unblinded mode, educate patients on trend arrows, alerts and how to enter events. Use the DATAA model² for data driven discussions when reviewing and interpreting CGM data.

COLLABORATE

- Ensure open communication to facilitate meaningful discussion
- Ask the person with diabetes what's going well for them
- Download with Reader and view data in CLARITY clinic
- Review glucose metrics and patterns with CLARITY PRO report

- Ask the person with diabetes if they've experienced hypoglycemia
- If hypoglycemia is present, engage in interactive discussion around potential reasons and realistic solutions
- Review % time below range and glucose variability
- Discuss value of using personal Dexcom G6 with alarms and alerts
- Discuss the opportunity to share CGM data with family or friends when using personal CGM

- Start with the 'Best Day' pattern in the CLARITY PRO report to discuss what's working well and how to do more of those activities
- Review progress towards time-in-range goals
- With personal CGM use CLARITY weekly push notifications or email summaries to track progress towards newly defined goals

- Reinforce that all data provide information and CGM values are not "good" or "bad"
- Review time above range and identify possible causes, solutions and adjustments to self-management
- Tailor education based on data to provide person-centered care
- Review use of Trend Arrows in Dexcom G6 app and how to treat for hypoglycemia or adjust insulin for hyperglycemia

- Collaboratively engage in feedback
- Encourage engaging in personal experiments choosing one small change at a time (healthy eating, being active etc.)
- Discuss potential changes in the treatment plan
- Identify ongoing support needs
- Plan for follow up

¹Levin, D. et al. Technology Integration: The Role of the Diabetes Care and Education Specialist. *TDR*. 2020; 34(2): 323-334.

²REDFORD, D.A. et al. A Framework for Continuous Glucose Monitoring System (CGM) and its Applications according to the Instructions for Use provided with your device and available at <https://www.dexcom.com/safety-information/> and to properly consider all indications, contraindications, warnings, precautions, and cautions in these instructions for use may result in injury. If your patient's glucose levels and readings from the G6 Pro device match symptoms or reports before or prior to taking some of the recommended medications, please wait 30 minutes or longer. If a measurement shows 80 hours, use a blood glucose meter to monitor diabetes. Your patient will not receive alerts and alarms during the G6 Pro in blinded mode. See medical advice and alternate advice for use by any medical emergency.

The sole issued Dexcom CLARITY software is intended for use by both home users and healthcare professionals to assist people with diabetes and their healthcare professionals in the review, analysis, and modification of historical CGM data to support effective diabetes management. It is intended for use as an auxiliary to Dexcom G6 Pro device with data interface capabilities. Caution: The software does not provide any medical advice and should not be used for that purpose. Home users must consult a healthcare professional before making any medical interpretation and therapy adjustments from the information in the software. Caution: Healthcare professionals should use information in the software in conjunction with other clinical information available to them. Caution: Actual Dexcom CGM uses sensors that do not use or are not a part of a licensed healthcare professional.

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dexcom

What is Hello Dexcom? Who is a Candidate?

The Hello Dexcom Sample experience may be provided to any of your patients with diabetes, but it may be more applicable to some of your patients than to others.

Here are a few patient considerations to keep in mind:

Needs insulin therapy optimization



Has type 1 or type 2 diabetes on mealtime insulin



Using or considering an insulin pump



May be missing insulin doses or not taking insulin as prescribed



Struggles to meet glycemic targets



New to CGM or hesitant to use CGM



Performs fingersticks less frequently than recommended



Frustrated with trying to improve glycemic management



Has hypoglycemia or fear of hypoglycemia



SIGMA

Study of Improved
Glucose Monitoring
and Assessment

Visit SIGMA to learn about:

- Expert Presentations
- Clinical Evidence
- Diabetes Technology Resources
- Coverage and Reimbursement
- Latest News

If you are not already a member, we invite you to learn more about SIGMA or request membership at www.cgmonitoring.net

Questions?



Brief Safety Statement

Failure to use the Dexcom G6 Pro Continuous Glucose Monitoring System (G6 Pro) and its components according to the instructions for use provided with your device and available at <https://www.dexcom.com/safety-information> and to properly consider all indications, contraindications, warnings, precautions, and cautions in those instructions for use may result in your patient missing a severe hypoglycemia (low blood glucose) or hyperglycemia (high blood glucose) occurrence and/or making a treatment decision that may result in injury. If your patient's glucose alerts and readings from the G6 Pro do not match symptoms or expectations or your patient is taking over the recommended maximum dosage amount of 1000mg of acetaminophen every 6 hours, use a blood glucose meter to make diabetes treatment decisions. Your patient will not receive alerts and alarms when the G6 Pro is on blinded mode. Seek medical advice and attention when appropriate, including for any medical emergency.

The web-based Dexcom CLARITY software is intended for use by both home users and healthcare professionals to assist people with diabetes and their healthcare professionals in the review, analysis, and evaluation of historical CGM data to support effective diabetes management. It is intended for use as an accessory to Dexcom CGM devices with data interface capabilities. Caution: The software does not provide any medical advice and should not be used for that purpose. Home users must consult a healthcare professional before making any medical interpretation and therapy adjustments from the information in the software. Caution: Healthcare professionals should use information in the software in conjunction with other clinical information available to them. Caution: Federal (US) law restricts this device to sale by or on the order of a licensed healthcare professional.

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