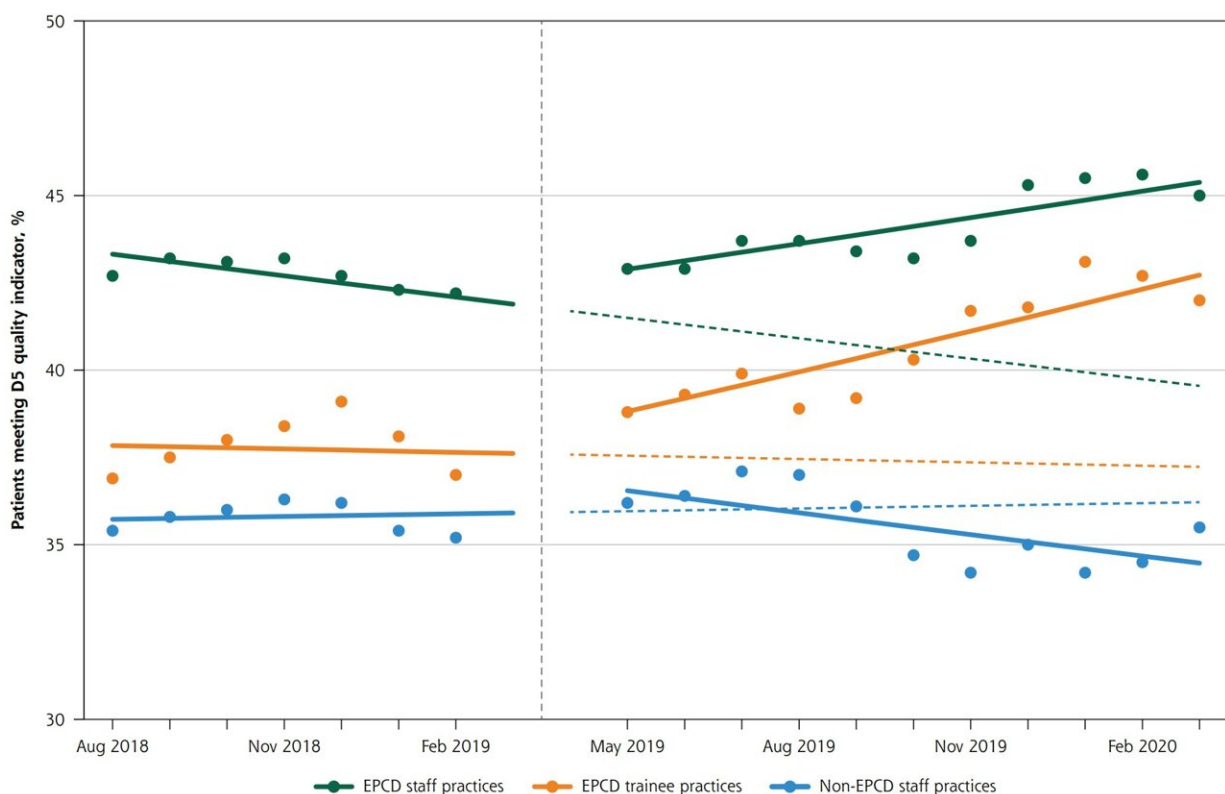


Enhanced primary care diabetes model helps doctors meet quality indicators in disease improvement

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Percentage of eligible patients meeting the D5 quality indicator during the study period, by group. D5=all 5 diabetes components (glycemic control, blood pressure control, low-density lipoprotein cholesterol control, aspirin use if indicated, and tobacco-free status); EPCD=Enhanced Primary Care Diabetes. Note: Dashed vertical line denotes transition from preimplementation period to postimplementation period. Solid colored lines show actual trends. Dashed colored lines show projection of preimplementation trends into

postimplementation period for comparison. Credit: *Ann Fam Med* (2022). DOI: 10.1370/afm.2884

Most patients with diabetes are treated in the primary care setting. However, the primary care sector faces significant operational, regulatory and reimbursement pressures to improve care quality among those with diabetes.

Researchers from the Mayo Clinic created and implemented an Enhanced Primary Care Diabetes (EPCD) [model](#), which leveraged care team nurses, pharmacists and [social workers](#) to improve diabetes care quality. They measured the model's impact on reported quality measures of diabetes care, including glycemic control, [blood pressure](#), cholesterol, abstinence from tobacco, and aspirin use (also known as the D5). After EPCD implementation, staff clinician practices saw a significant improvement in patients meeting the D5.

Trends in D5 achievement did not change among the resident physician practices with access to EPCD and worsened among staff clinician practices without access to EPCD. The authors concluded that implementation of the EPCD model was associated with improved diabetes care quality.

The research was published in the *Annals of Family Medicine*.

More information: Joseph R. Herges et al, Evaluation of an Enhanced Primary Care Team Model to Improve Diabetes Care, *Ann Fam Med* (2022). [DOI: 10.1370/afm.2884](#)

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