

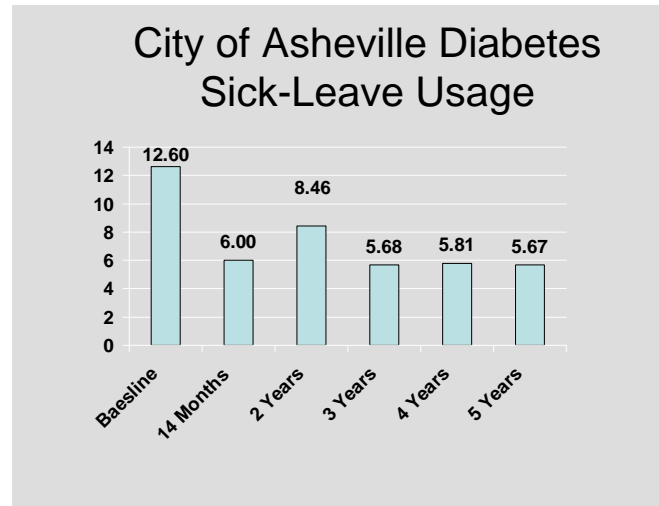
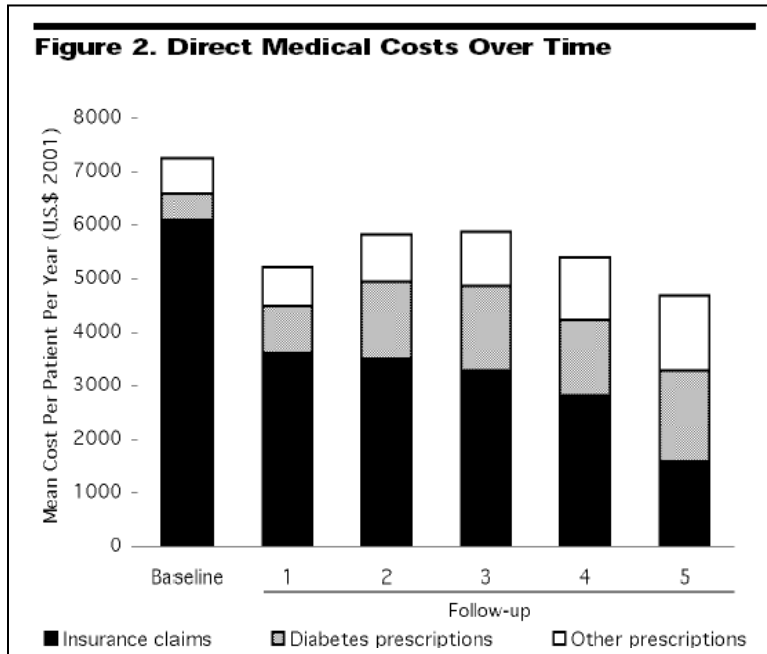


EMPOWER THE PATIENT. IMPROVE THE OUTCOMES. CONTROL THE COSTS.SM

The American Pharmacists Association (APhA) Foundation introduces *The Diabetes Ten City Challenge*, a program sponsored by GlaxoSmithKline that invites ten local private and/or public employer groups to participate in a proven healthcare model that improves the quality of care and reduces overall healthcare costs. The APhA Foundation is a non-profit organization whose mission is to improve the quality of patient health outcomes that can be affected by pharmacy. The APhA Foundation is affiliated with the American Pharmacists Association, the national professional society of pharmacists founded in 1852.

Replicated based upon the highly successful “Asheville Project¹,” the APhA Foundation will provide participating employers with the support and tools to link employees, retirees and their dependents with community pharmacists to help them actively manage their diabetes through regular visits and communicate with the participant’s physician and other health care providers to help assure good outcomes. A unique project component is a diabetes credential the patient can earn through program participation that acknowledges the participant is indeed capable of self-managing their condition².

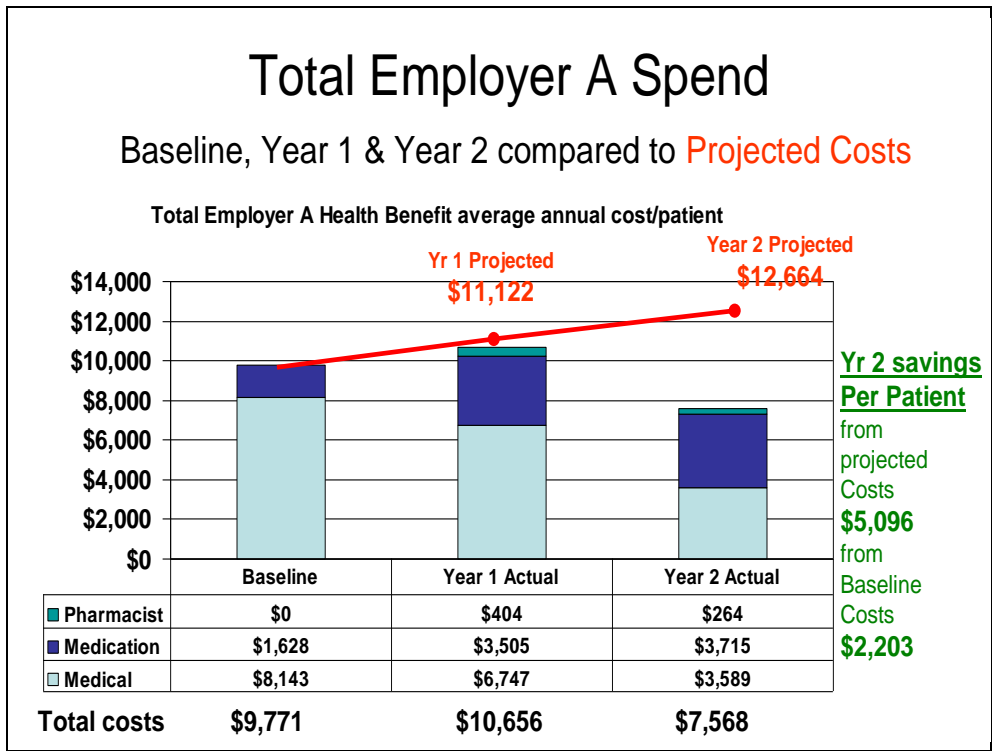
Results from the Asheville Project¹:



Total mean savings in overall direct medical care per patient per year in The Asheville Project

Minimum	\$1,622
Maximum	\$3,356

An Employer's Results Participating in the APhA Foundation's Patient Self-Management Program³:



Success of the Model

The model that will be utilized in this project aligns incentives that encourages collaboration among healthcare stakeholders to provide patients with a service that will teach them how to better self-manage their diabetes and improve their overall health, which in return reduces the employer's medical costs. Aligned economic incentives begin with the employer who provides an incentive to patients, such as waived co-payments for diabetes-related medications while active in the program; and provides payment to the certified diabetes educators and pharmacists for providing education and diabetes care management. The employer will receive a return on investment as a result of healthier workers, decreased absenteeism and a decrease in overall health care costs.

Care Management²:

- Healthcare providers are encouraged to treat patients to clinical goals using national treatment guidelines and are not asked or required to use any specific pharmaceutical product.
- Participating Pharmacists are required to complete a certificate training program in diabetes or have earned the Certified Diabetes Educator (CDE) credential.
- Patients enroll in this program as a voluntary health benefit offered by their employer's health plan.
- Clinical results in APhA Foundation Patient Self Management Program shows that the average A1c values have been reduced from to 7.1% for the entire enrolled population in the first year of the program. This reduction is significant as the goal for A1c set by the American Diabetes Association is 7.0%.

- There have also been dramatic improvements in other key indicators of diabetes care, such as influenza vaccinations, recorded blood pressure, lipid profiles and the percentage of patients receiving foot and eye exams.
- Over 95% of the patients have also reported that they are either very satisfied or satisfied with the pharmacists' care.

Employer Reports:

Participating employers in *The Diabetes Ten City Challenge* will receive clinical, economic and patient satisfaction reports throughout the program, tracking their own enrolled population's progress and economic effect the program has on total health care costs.

Baseline Criteria for Participation:

Based upon the Asheville Project and the APhA Foundation's program, participating employers should meet the following baseline criteria:

- Self-insured city, county or municipal government or private employer
- Minimum of 5,000 covered lives, may be in combination with other local self-insured employers
- Strong internal champion with decision making authority within employer administration
- *Ability to start the program between October 1, 2005 and March 31, 2006*
- Willingness to adopt and implement Asheville Project Model
- Willingness to speak about the program with local and national media.

The APhA Foundation would be pleased to provide your organization with detailed information about *The Diabetes Ten City Challenge* for the purpose of exploring a collaborative opportunity to improve the health of your beneficiaries. Please contact us for additional information to pursue implementation.

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¹ Cranor CW, Bunting BA, Christensen DB. The Asheville Project: Long-Term Clinical and Economic Outcomes of a Community Pharmacy Diabetes Care Program. *J Am Pharm Assoc.* 2003;43:173–84.

² Garrett DG, Bluml BM. Patient Self-Management Program for Diabetes: First-Year Clinical, Humanistic, and Economic Outcomes. *J Am Pharm Assoc.*2005;45:130-137

³ Data pending publication by the American Pharmacists Association Foundation