

Guideline Adherence and Health Outcomes in Medicare FFS Patients with Diabetes

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Description

In older patients with diabetes, the short-term risks of tight adherence to diabetes treatment guidelines may outweigh the long-term benefits. Therefore, tailored treatment is recommended for this population. However, little evidence exists to support treatment decisions for older patients with diabetes, especially for those with co-occurring chronic conditions. This study examines the effect of tight adherence to diabetes treatment guidelines on short-term negative health outcomes in a group of Medicare fee-for-service patients with diabetes.

Specific Aims

1. Examine the relationship between patients' control levels of diabetes risk factors (hemoglobin A1c, low density cholesterol and blood pressure) and short-term negative health outcomes (ER visits, hospitalizations, and death).
2. Determine whether the presence of congestive heart failure or chronic kidney disease modifies the relationship between diabetes risk factors and short term harms.
3. Analyze how the relationship between diabetes risk factors and short term harms differs depending on the definition used to assign patients to providers.

Main Objective

To assess the short-term risks of adhering tightly to diabetes treatment guidelines in older patients.

Chronic Conditions Considered

Diabetes
Congestive heart failure
Chronic kidney disease

Preventive Services Considered

Screening for lipid disorders in adults
Screening for type 2 diabetes mellitus in adults

Study Design & Population

Longitudinal epidemiological study
3,559 Medicare fee-for-service patients cared for by a midwestern physician group 2003-2004.

Strategies Addressed from the National MCC Strategic Framework

- 4.C. Increase clinical health research

