

# POLICY PRINCIPLES

## Access



**People with diabetes should have timely and equitable access to evidence-supported medical tools, technologies, and services to prevent avoidable amputations.**

### **Suggested strategies to increase access to care:**

- Diabetes self-management education and support (DSMES) services
- Establish appropriate reimbursement for medical interventions
  - Foot screenings
  - Diabetic foot ulcer (DFU) treatments
  - Revascularization
  - Peripheral artery disease (PAD) screening
- Ensure coverage for PAD screening for targeted populations
- Ensure coverage and adequate reimbursement for specialist visits
- Provide coverage for technology to prevent and treat DFU
- Remove unnecessary prior authorization for DFU and PAD patients
- Ensure access to follow-up services and all appropriate sites of care
- Support quality medical training to address workforce disparities
- Streamline the waiver and referral process for the diabetic shoe program

## Quality



**Quality care means avoiding amputations whenever possible. Major amputations should occur only as a last resort.**

### **Ways to improve and incentivize quality care:**

- Ensure appropriate access to DFU and PAD assessment at relevant provider visits
- Require measurement and reporting of the number of patients who get a limb amputation without prior evaluation for revascularization
- Provide administrative and financial support for multi-disciplinary limb preservation teams
- Facilitate additional research on amputation prevention with the National Institutes of Health (NIH)
- Improve provider education on DFU, PAD risks, and simple assessments
- Implement quality metrics, such as:
  - Incentive structure for providers & facilities
  - Patient-reported outcome metrics (e.g. wound healing time, wound free time, wound recurrence rates, low to high amputation ratios)
  - Facility Amputation Prevention Review Board
  - Social determinants of health (SDOH) screenings and referrals

## Collaboration



**Preventing amputations requires a team-based collaborative approach.**

### **Approaches to promote collaboration:**

- Utilize nurse navigators & community health workers in the community
- Work with the Centers for Medicare & Medicaid Services (CMS) on a public service announcement (PSA) for patient awareness and education
- Ensure the ability to refer patients to a specialist (podiatrist, endocrinologist, vascular surgeon, interventional radiologist, etc.)
- Coordinate with the Patient-Centered Outcome Research Institute (PCORI) to enable cross-provider collaboration
- Incentivize communication between care teams
  - Pilot program or grant
  - Electronic health records and interoperability
  - Encourage memorandums of understanding, especially for SDOH