



Checklist for Running Patient Lists to Identify Patients Eligible for Healthy Together



List A: Patients with a diagnosis of Diabetes

- Patient identifying information:
 - First name
 - Last name
 - Date of birth
 - Medical record number
 - Address
 - Primary language
 - Primary care provider
 - Health center site name
- 18 years of age and older
- Diagnosis of type II diabetes
- Most recent A1c result
- One additional chronic condition diagnosis: obesity, hypertension, depression
- Exclude patients who are currently pregnant
- Date of upcoming medical appointment
- Date of last telehealth (audio and visual) appt
- Date of last no show



List B: Patients at risk for Diabetes

- Patient identifying information:
 - First name
 - Last name
 - Date of birth
 - Medical record number
 - Address
 - Primary language
 - Primary care provider
 - Health center site name
- 18 years of age and older
- NOT diagnosed with type II diabetes
- Two or more of the following chronic condition diagnoses: obesity, HTN, depression
- ONE OR MORE** of the following:
 - BMI ≥ 25 kg/m² (or ≥ 23 kg/m², if Asian American)
 - Fasting glucose 100-125 mg/dl
 - Plasma glucose 140-199 mg/dl 2 hrs after a 75 mg glucose load
 - A1c of 5.7-6.4
 - Clinically diagnosed gestational diabetes mellitus (GDM) during a previous pregnancy (may be self-reported)
 - Positive screen for prediabetes based on CDC Prediabetes Risk Assessment (optional-include if data is available)
- Exclude patients who are currently pregnant
- Date of upcoming medical appointment
- Date of last telehealth (audio and visual) appt
- Date of last no show



Checklist for Analyzing Patient Lists to Identify Patients Eligible for Healthy Together

Identify Provider Champions

- Combine Lists A & B
- Sort by health center site and primary care provider
- Identify 2-3 provider champions. Consider the following:
 - Number of eligible patients
 - Commitment to the project
 - Providers within the same site or “pod”
 - Ensure the provider has agreed to participate before moving forward with the analysis

Identify 40-50 Patients for First Invites

- Filter your combined list to **only display patients of the selected provider champions**

Identify Multiple Family Members on One/Both Lists or Significant Others (e.g., same address)

- Sort by patient last name. Consider the following:
 - Are there any family members on this list? (Note, patients having the same last name does not necessarily mean the patients are related. If unsure, consult with other members of the care team who may know (e.g., provider, nurse, MA, CHW, care manager, etc.).
 - Mark patients to consider for first invites (e.g., add a spreadsheet column and place an X in the patient’s row)
- Sort by address. Consider the following:
 - Are there any patients who have the same household address?
 - Mark patients to consider for first invites

Identify Patient’s Technological Capabilities

- Filter to display patients who have had at least one telehealth visit (audio and visual) since June 2020
 - Mark patients to consider for first invites



Other Consideration Criteria

- Filter to display patients who have not had any no shows since June 2020
 - Mark patients to consider for first invites

- For patients diagnosed with diabetes, sort by A1c value
 - Mark patients with A1C > 9 to consider for first invites

- Sort by upcoming appointment date
 - Patients with an appointment coming up soon may be a good opportunity to invite to participate via a warm handoff process.
 - Mark patients to consider for first invites.

Consult with members of the care team (e.g., provider, nurse, MA, CHW, care manager, etc.)

- Review patients marked through the steps above:
 - Are these patients likely to participate?
 - Will these patients be able to meet the technological requirements?
 - Are these patients able to understand enough spoken English to benefit from the national expert lifestyle coaching?

Finalize your list

- Increase or decrease the number of patients marked for first invites until you have between 40 and 50.
 - Goal of 20-30 total participants (10-15 patients with diabetes and 10-15 patients at risk for diabetes)