



In the Literature

Highlights from Commonwealth Fund-Supported Studies in Professional Journals

German Diabetes Management Programs Improve Quality of Care and Curb Costs

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Authors: Stephanie Stock, M.D., Ph.D., Anna Drabik, Guido Büscher, Christian Graf, Ph.D., Walter Ullrich, Andreas Gerber, Ph.D., Karl W. Lauterbach, Prof. Dr. med., Dr. Sc., and Markus Lungen, Dr. rer. pol.

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Contact: Stephanie Stock, M.D., Ph.D., Assistant Professor, University Hospital Cologne, Stephanie.Stock@uk-koeln.de, or Mary Mahon, Senior Public Information Officer, The Commonwealth Fund, mm@cmwf.org

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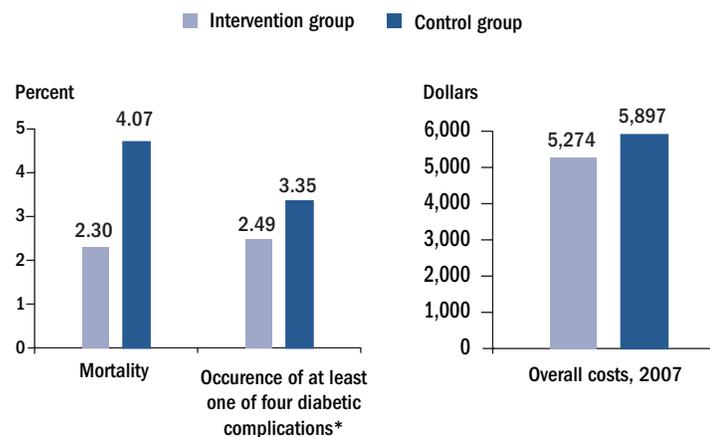
Synopsis

A study in Germany found that patients enrolled in a diabetes management program had significantly lower mortality rates than those receiving routine care for their condition. There were also fewer complications and hospitalizations and a significant difference in costs between baseline and intervention groups.

The Issue

In all countries, chronic health conditions pose major challenges to the health care system. Disease management programs have the potential to improve quality of care, increase patient satisfaction, and reduce costs, but their impact is still uncertain. For this study of nearly 20,000 enrollees in a diabetes management program in Germany—a country where more than 14 percent of total health spending is for diabetes care—researchers examined medical outcomes and costs over a four-year period (2003–2007) compared with control-group patients receiving routine care.

Lower Mortality Rates, Fewer Complications, and Reduced Costs for Patients with Diabetes in Disease Management Programs



*Includes myocardial infarction, stroke, chronic renal insufficiency, and amputation of lower leg or foot. Adapted from S. Stock, A. Drabik, G. Büscher et al., "German Diabetes Management Programs Improve Quality of Care and Curb Costs," *Health Affairs*, Dec. 2010 29(12):2197–2205.

Key Findings

- For patients enrolled in the disease management program, the overall mortality rate (2.30%) in 2007 was significantly lower than the rate for those in the control group (4.07%).
- There were fewer complications—including myocardial infarction, stroke, chronic renal insufficiency, and amputation of the lower leg or foot—among patients in the program, compared with those receiving routine care.
- Average overall drug and hospital costs in 2007 were more than \$600 lower in the intervention group, mainly a result of lower hospital costs.
- Patients receiving routine care were more likely to be hospitalized than patients in the intervention group, and their hospital stays were 1.44 days longer, on average.

Addressing the Problem

The researchers say that the success of the German disease management program is linked in part to the ability of officials to modify it in response to providers' concerns. For example, based on feedback, data collection was changed from a paper-based process to an electronic one. Another important factor is the program's reliance on physicians' firsthand knowledge of their patients in promoting adherence to treatment goals and self-management. While patients' participation is voluntary, they receive incentives to partake in the program, including an exemption from copayments and flexibility in appointment scheduling.

"Preliminary analyses of the German disease management programs show encouraging results regarding patient empowerment and satisfaction and a higher percentage of patients receiving medication for diabetes, high blood pressure, hypercholesterolemia, and coronary artery disease."

About the Study

The study assessed the effectiveness of a nationwide primary care disease management program for diabetes in the German health insurance system between 2003 and 2007. The sample included 19,882 patients with diabetes enrolled in the program and a control group of patients with diabetes receiving routine care.

The Bottom Line

A German disease management program reduced mortality, lowered costs, and improved health outcomes for patients with diabetes.

Citation

S. Stock, A. Drabik, G. Büscher et al., "German Diabetes Management Programs Improve Quality of Care and Curb Costs," *Health Affairs*, Dec. 2010 29(12):2197–2205.