



## Target: Type 2 Diabetes<sup>SM</sup> Inpatient Honor Roll FAQ

### What is Target: Type 2 Diabetes<sup>SM</sup> Honor Roll?

This targeted award is a distinguished honor for hospitals engaging in advanced care for patients with heart failure and/or stroke and type 2 diabetes. This award allows Get with the Guidelines® participating hospitals to be acknowledged for their compliance with Get with the Guidelines measures tailored to patients with type 2 diabetes. This is an optional award that a hospital may choose to pursue if they are collecting the required data elements.

### What criteria need to be met to be eligible?

- Your hospital must qualify for a Silver level or higher Achievement Award in the related Get with the Guidelines module.
- Your hospital must be able to demonstrate at least 90% compliance for 12 consecutive months (Calendar Year) for the “Overall Diabetes Cardiovascular Initiative Composite Score” measure in the selected module.
  - The individual measures that make up each “Overall Diabetes Cardiovascular Initiative Composite Score” are listed below.
- Your hospital must have at least 10 patients with a new onset or previous history of diabetes within the patient population.
- The award reporting period must be the same Calendar Year as your eligible Achievement Award.
- The award reporting period must include the same patient population as is included in the eligible Achievement Award.

### **Target: Type 2 Diabetes - Heart Failure “Overall Diabetes Cardiovascular Initiative Composite Score” component measures:**

Achieve 90% compliance for 12 consecutive months for a composite of the below measures:

- ACEI/ARBs or ARNI at Discharge for Patients with Diabetes - Percent of heart failure patients with diabetes and left ventricular systolic dysfunction (LVSD) and without angiotensin converting enzyme inhibitor (ACEI) and angiotensin receptor blocker (ARB) or angiotensin-receptor/neprilysin inhibitor (ARNI) contraindications who are prescribed an ACEI, ARB, or ARNI at hospital discharge.
- Evidence-Based Specific Beta Blockers for Patients with Diabetes - Percent of heart failure patients with diabetes who were prescribed an evidence-based specific beta blocker (Bisoprolol, Carvedilol, Metoprolol Succinate CR/XL) at discharge.



- Measure LV Function (Patients with Diabetes) - Percent of patients with heart failure and diabetes who have documentation in the hospital record that left ventricular function (LVF) was assessed before arrival, during hospitalization, or is planned for after discharge.
- Post Discharge Appointment for Heart Failure Patients with Diabetes - Percent of eligible patients with heart failure and diabetes for whom a follow-up appointment was scheduled and documented including location, date, and time for follow up visits, or location and date for home health visit.
- Diabetes Treatment - Percent of diabetic patients or newly-diagnosed diabetics receiving diabetes treatment in the form of glycemic control (diet or anti-hyperglycemic medication) or follow up appointment for diabetes management scheduled at discharge.
- Lipid Lowering Medications at Discharge for Patients with Diabetes - Percent of heart failure patients with diabetes who were prescribed lipid lowering medications at discharge.
- Smoking Cessation for Patients with Diabetes - Percent of heart failure patients with diabetes and a history of smoking cigarettes, who are given smoking cessation advice or counseling during hospital stay.

**Target: Type 2 Diabetes - Stroke "Overall Diabetes Cardiovascular Initiative Composite Score" component measures:**

Achieve 90% compliance for 12 consecutive months for a composite of the below measures:

- IV Alteplase Arrive by 2 Hour, Treat by 3 Hour (Patients with Diabetes) - Percent of acute ischemic stroke patients with diabetes who arrive at the hospital within 120 minutes (2 hours) of time last known well and for whom IV alteplase was initiated at this hospital within 180 minutes (3 hours) of time last known well
- Early Antithrombotics for Patients with Diabetes - Percent of patients with ischemic stroke or TIA and diabetes who receive antithrombotic therapy by the end of hospital day two
- VTE Prophylaxis for Patients with Diabetes - Percent of patients with diabetes and an ischemic stroke, or a hemorrhagic stroke, or stroke not otherwise specified who receive VTE prophylaxis the day of or the day after hospital admission
- Antithrombotics for Patients with Diabetes - Percent of patients with an ischemic stroke or TIA and diabetes prescribed antithrombotic therapy at discharge.
- Anticoagulant for AFib/AFlutter for Patients with Diabetes - Percent of patients with an ischemic stroke or TIA with atrial fibrillation/flutter and diabetes discharged on anticoagulation therapy.
- Smoking Cessation for Patients with Diabetes - Percent of patients with ischemic or hemorrhagic stroke or TIA and diabetes and a history of smoking cigarettes, who are, or whose caregivers are, given smoking cessation advice or counseling during hospital stay



- Statin Prescribed at Discharge for Patients with Diabetes - Percent of ischemic stroke or TIA patients with diabetes who are discharged on statin medication
- Diabetes Treatment - Percent of diabetic patients or newly-diagnosed diabetics receiving diabetes treatment in the form of glycemic control (diet or medication) or follow up appointment for diabetes management scheduled at discharge.
- Therapeutic Lifestyle Recommendation for Patients with Diabetes\* - Percent of ischemic stroke or TIA patients with diabetes who receive therapeutic lifestyle recommendations at discharge
  - \*Therapeutic Lifestyle Recommendation for Patients with Diabetes is both a Quality Measure and part of the Overall Diabetes Cardiovascular Initiative Composite Score.

**Are these new measures or existing measures in the PMT?**

- These measures are based on existing PMT measures, however some measures have been narrowed to only include patients with a new onset or previous history of diabetes, as applicable.

**Are all of the data elements for these diabetes specific measures currently in the PMT?**

- Yes, as of September 2019 all elements required to meet Target: Type 2 Diabetes Honor Roll for Heart Failure or Stroke are available for use.

**Since this initiative was announced mid-year, will I have to re-abstract my patients to be eligible in 2020?**

- In some cases, it's possible. Some diabetes diagnosis related elements before September 2019 were not required data elements for completing a patient record. If your organization is not completing these optional data elements related to diabetes, then you may have to update some patient records for award eligibility. Going forward in 2020, this will be resolved and any re-abstracting will not be required.

**What is the hospital responsibility under the new automated award process for Target: Type 2 Diabetes Honor Roll?**

- Hospitals must have all prior year (calendar year) data entered into the PMT by March 31.
- Complete [Quality Improvement Programs Permission Form \(document\)](#) and return to your local QSI director (Only necessary to complete if not done so in past or you have name change request) .
- Hospital will be notified by local QSI staff in May if they qualify for award.

**Will my hospital receive any additional promotional benefits for my Target: Type 2 Diabetes Honor Roll award? (e.g., icons, press releases, special acknowledgement in USN&WR and at International Stroke Conference and Scientific Sessions)?**



Yes, as a Target: Type 2 Diabetes hospital you will receive new Target: Type 2 Diabetes icon, press releases, special acknowledgement in USNWR and will be recognized at ISC and Sessions. These benefits will be similar to those of Target: Stroke and Target: Heart Failure.

### **What is the difference between the Achievement Awards and Target: Type 2 Diabetes Awards?**

Target: Type 2 Diabetes is an additional level of recognition above and beyond the Achievement Awards noting a hospital's targeted approach to providing quality care for patients with type 2 diabetes.

### **Will I have an opportunity to know if my hospital met the 90% compliance? Who would I contact?**

Hospitals can run their own reports for any of the measures to identify if they qualify. You can reach out to your Get with the Guidelines director for assistance in interpreting your data and if your hospital meets the requirements set forth.

### **Does each measure have to be at least 90% every month or an average over the 12 month?**

No. Each measure does not have to meet 90%. Honor Roll is based on a composite of each modules measure set. Additionally, like our other award programs, Honor roll is based on average of the composite over 12 months.

### **With your updates, will our abstraction vendors be able to upload to your database?**

That is a vendor decision. Many of them choose to only upload the Performance Measures. You may contact your vendor to request that they consider this additional functionality. Otherwise, you are free to back fill the PMT with the necessary elements to allow measures to be run.

### **What is the Target: Type 2 Diabetes Ambulatory Award?**

Target: Type 2 Diabetes Ambulatory Recognition is for outpatient clinics and specialty practices focused on CVD risk reduction regarding hemoglobin A1c control, blood pressure control, and lipid management. More information can be found at [www.knowdiabetesbyheart.org/quality](http://www.knowdiabetesbyheart.org/quality).

### **Who do I contact if I have further questions?**

For more information contact your Get with the Guidelines Quality and Systems director.