



COMMUNITY FACT SHEET

Balls Food Stores and Deffenbaugh Industries

Kansas City, KS

Program Overview

Balls Food Stores has a strong history of being committed to providing innovative programs that focus on health and wellness. Pharmacists at all Balls Food Stores locations participate in many patient care services, such as the provision of medication therapy management (MTM) and immunization services. In addition, a team of 8 pharmacists provide care through one-on-one visits for diabetes and cardiovascular conditions to employees and their families as part of the Start Now employee wellness program. Balls Food Stores has experienced success in improving clinical outcomes through their Start Now employee wellness program. Through Project IMPACT: Diabetes, Balls Food Stores had an opportunity to expand their services and partner with Deffenbaugh Industries. Through this partnership, pharmacists at Balls Food Stores worked with Deffenbaugh Industries' employees and provided one-on-one diabetes care in the workplace or at pharmacies close to where the employees live.

Program Partners

Balls Food Stores, established in 1923, is a family-owned supermarket chain that operates 28 grocery stores with 20 pharmacies in the Kansas City metropolitan area.

Deffenbaugh Industries is the largest privately owned waste management company in the Midwest. They are headquartered in suburban Kansas City and operate from locations in Kansas, Missouri, Arkansas, Nebraska, and Iowa.

Community Champions: John Witt and Nikki Schwartze

Patient Profile

Patients are waste management employees of Deffenbaugh Industries. At baseline, many patients had low health literacy and were not fully aware of how to manage their chronic conditions.

Pharmacists' Role on the Collaborative Care Team

Patients are initially engaged to enroll in the diabetes program at an employer-hosted benefits fair. Once enrolled in the program, a pharmacist meets with the patient 6 to 8 times per year. Pharmacists provide one-on-one diabetes care in the workplace or at pharmacies close to where the employee lives to improve access to care for the patients. At the initial visit, the pharmacist provides the patient with an overview of the program and administers a pre-test to obtain baseline data about the patient's pre-project ability to manage his or her condition. During each follow up visit, the pharmacist conducts an interview to identify any changes from the previous visit, collects social history, discusses self-monitoring strategies, and monitors medication adherence. In addition, the pharmacist conducts a Patient Self-Management knowledge, skills, or performance assessment to gather additional information about the patient's ability to self-manage his or her disease. Based on the results of the assessments, the pharmacist will provide necessary verbal and written education to ensure the patient learns how to self-manage his or her diabetes. Vitals and labs are collected to monitor patient outcomes and the results are discussed with the patient. Short- and long-term goals are set for the patient to work on for the next visit. Pharmacists communicate with the patient's primary care provider via fax and phone following each patient visit to discuss patient care. This approach to diabetes care has achieved both clinical and financial benefits for Balls Food Stores and Deffenbaugh Industries and should be considered a model of care for others.

Relevant Statistics – Community Level

According to the Kansas Diabetes Prevention and Control Program:¹

- ❑ It is estimated that 8.5% of adults in Kansas have been diagnosed with diabetes
- ❑ It is estimated that an additional 120,000 adults in Kansas have undiagnosed diabetes, meaning they are unaware they have diabetes
- ❑ In Kansas, diabetes disproportionately affects black adults, people over the age of 65, those with an yearly income of less than \$50,000, and those who do not have a college degree

Diabetes Epidemic at the National Level

Impact of Diabetes^{2,3}

- ❑ 25.8 million people, which is 8.3% of the U.S. population, are estimated to have diabetes
 - 18.8 million people have been diagnosed with diabetes
 - 7 million people are undiagnosed; in other words, are unaware they have diabetes
- ❑ 1.9 million people aged 20 years and older are newly diagnosed with diabetes each year
- ❑ The prevalence of diabetes in the United States increased by 128% from 1988 to 2008
- ❑ If present trends continue, 1 in 3 adults in America will have diabetes in 2050
- ❑ 79 million adults have prediabetes, which increases their risk of developing Type 2 diabetes later in life
- ❑ Diabetes is a major cause of heart disease and stroke
- ❑ Diabetes is the leading cause of kidney failure, nontraumatic lower-limb amputations, and new cases of blindness among adults in the United States
- ❑ Diabetes contributes to the death of 231,404 Americans each year

Cost of Diabetes³

- ❑ Total cost of diagnosed diabetes in the United States = \$245 billion per year
 - Direct medical costs = \$176 billion per year
 - Indirect costs (e.g., disability, reduced productivity) = \$69 billion per year
- ❑ Health care costs for a person with diabetes are 2.3 times higher than a person without diabetes
- ❑ 1 out of every 10 health care dollars is spent treating diabetes and its complications

References

1. Source: Kansas Diabetes Prevention and Control Program. The Burden of Diabetes in Kansas. Available at: http://www.kdheks.gov/diabetes/download/Kansas_Diabetes_Facts.pdf. Accessed June 17, 2013.
2. Centers for Disease Control and Prevention. National diabetes fact sheet: national estimates and general information on diabetes and prediabetes in the United States, 2011. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2011.
3. American Diabetes Association. Fast Facts Data and Statistics About Diabetes. Available at: <http://professional.diabetes.org/admin/UserFiles/0%20-%20Sean/FastFacts%20March%202013.pdf>. Accessed June 12, 2013.