



## NATIONAL FACT SHEET

### Overview

Launched in October 2005, the Diabetes Ten City Challenge (DTCC) is an innovative program that employers and communities are using to fight diabetes and reduce health care costs. Through the DTCC, employer groups in 10 communities established a voluntary health benefit for employees and dependents, providing employee incentives and helping people take control of diabetes by working with pharmacist coaches, physicians and diabetes educators.

Conducted by the American Pharmacists Association (APhA) Foundation with support from GlaxoSmithKline, the Diabetes Ten City Challenge is modeled after two other highly successful programs: the Asheville Project (1997-present), a diabetes management program shown to improve overall health, reduce absenteeism, shorten hospital stays and reduce health care costs; and the APhA Foundation's cholesterol management program, Project ImPACT: Hyperlipidemia™ (1996-1999).

### What the Program Does

The Diabetes Ten City Challenge creates a collaborative team of employers, employees, pharmacists, physicians and diabetes educators — and aligns incentives — to focus on wellness, patient self-management and workplace cost savings:

- Educates and supports employees with information and guidance to become active participants in managing diabetes, based on a proven model and demonstrated research outcomes:
  - Employer waives co-pays on diabetes-related monitoring supplies and medication
  - Employee or dependent meets regularly with pharmacist “coach” to discuss their diabetes care and learn new ways to monitor and control diabetes
- Centers care around the patient and positions pharmacists as accessible, valuable resources in helping patients understand and control diabetes
- Reduces unscheduled absenteeism in the workplace and associated costs
- Improves health (by controlling diabetes)
- Saves health care dollars by investing in patient well-being — keeping people healthy rather than paying for care when they become seriously ill

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### Demonstrated Results

Results in organizations where the Asheville Project model has been implemented have shown:

- Employer saves estimated \$918 per participant in total health care costs in the first year (overall annual medical costs per patient decreased \$1,622-\$3,356 compared to baseline for each of the first five years in the Asheville Project)
- Absenteeism is cut by 50%; workers comp claims are reduced or eliminated
- Employee satisfaction is very high – 95% are satisfied with pharmacist care
- Patients save an average of \$400-\$600/year with incentives such as waived co-pays
- Employers indicate they achieve Return on Investment (ROI) of at least 4:1 beginning in the second year
- After nine years, Asheville employers pay less to insure program participants than they do for people without diabetes

### How the Program Works

1. Specially trained community pharmacists “coach” people on how to manage their diabetes, including setting goals, using medications properly, and tracking their condition consistently with indicators such as cholesterol tests, blood pressure checks, foot exams and eye exams.
2. Collaborative care teams – including pharmacists, diabetes educators and physicians – are assembled in the community, educated about the program and compensated for their involvement. Team members communicate regularly to optimize patient care.
3. Employers contract with APhA Foundation to establish the program in their community, and align employee benefit incentives to encourage success (co-payments for diabetes medications and related supplies typically are waived for patients who participate).
4. Employees choose to participate through a voluntary benefit offered by their employer.
5. Success is measured with clinical assessments including:
  - improvement in A1C concentrations (blood sugar control)
  - increased patient satisfaction with pharmacy services
  - decreased costs of medical care

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### Who Is Involved

- American Pharmacists Association (APhA) Foundation provides the resources and project management tools; supports employers in setting up their programs; and guides local pharmacists as they work with physicians, diabetes educators and other community resources to establish the program and necessary local relationships.
- GlaxoSmithKline is supporting the Diabetes Ten City Challenge to help bring the benefits of the program to more employers, employees and their dependents throughout the U.S. and to analyze the data analysis
- An Advisory Committee of industry leaders provided input and guidance to the project. The group includes:

**Lawrence Blonde, MD**

Chairman  
National Diabetes Education Program  
Ochsner Clinic  
New Orleans, LA

**John P. Miall, BA, ARM**

Retired Director of Risk Management for  
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