



To register for a webinar or express interest email HypoStudy@avalere.com

Informational Webinars (EST)	10/30	7-8AM
	11/15	6-7PM
	12/05	11AM-12PM
	01/09	12-1PM
	01/16	1-2PM
	01/24	1-2PM

Are You Interested in Advancing T2D Hypoglycemia Care at Your Organization? Join the Hypoglycemia Prevention Study!

The Endocrine Society and Avalere Health are enrolling participants for the Hypoglycemia Prevention Study (HypoPrevent) and invite you to join us in improving patient safety by reducing the risk and burden of hypoglycemia in patients with Type 2 diabetes (T2D). This quality improvement study provides progressive primary care practices the exciting opportunity to be among the first to implement and assess a patient-centered intervention to improve the quality of care for patients with T2D.

A Valuable Opportunity for Your Practice & Your Patients / Benefits of Participation at a Glance

For Patients...

- Patient-focused resources to help reduce and manage hypoglycemia
- Increased patient safety with individualized glycemic goals and medication modification
- Increased patient-provider engagement regarding hypoglycemia

For Practices...

- Opportunity to be recognized as a leader and early adopter in hypoglycemia quality improvement
- Opportunities to publish and present on your practice's experience and results
- Technical assistance with collection of performance data to track and monitor implementation progress
- Financial assistance to support successful implementation

For Providers...

- Access to screening strategies to identify individuals at risk of hypoglycemia and help them reduce their risk
- Improved ability to effectively engage patients on the topic of hypoglycemia through easy to use resources
- Access to provider focused resources to help facilitate shared-decision making and medication changes designed to maximize patient engagement
- Access to educational resources and training to implement guidelines into practice
- Opportunities for educational activities that may include CME, Part IV, and assistance meeting MIPS Improvement Activities reporting requirements
- Opportunity to have input on developing new quality measures for diabetes to improve patient safety

24 Events

per year among patients on insulin, ranging from mild to severeⁱ

300K

ER visits for T1D and T2D patients in 2009 due to severe hypoglycemiaⁱⁱ

3.4X

increased risk of death five years after self-reported hypoglycemiaⁱⁱⁱ

18%

30-day readmission rate following a hospitalization for hypoglycemia^{iv}

Is your practice looking for new tools to identify and care for patients at risk for hypoglycemia?

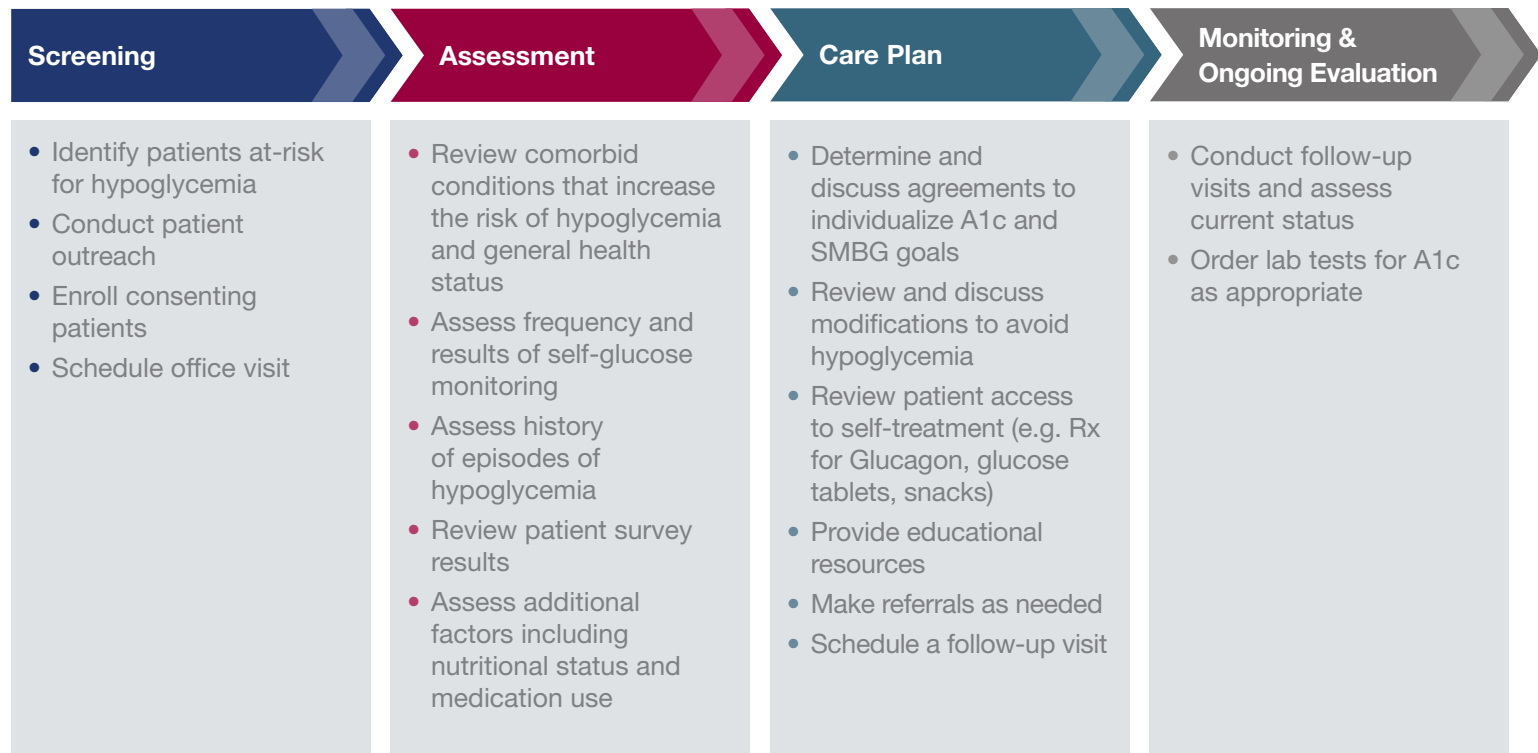
Are you interested in better identifying patients at risk of hypoglycemia and better engaging patients on the topic?

Then **HypoPrevent** may be right for you!

Tools for Success Incorporated Throughout Your Clinical Workflow

HypoPrevent includes an intervention designed to impact the care of patients with T2D at risk of hypoglycemia. By implementing all the intervention components and taking advantage of available resources, participants will be well positioned for success!

Hypoglycemia Prevention Study Workflow



Instruments Used in Each Phase

1. Enrollment Log
2. Screening Algorithm
3. Patient Panel Report

Validated tools to assess and address hypoglycemia (including an innovative clinical decision support tool).

1. Clinical Decision Support Tool
2. Toolkit
3. Patient & Provider Education Materials

i Edridge, C. L., Dunkley, A. J., Bodicoat, D. H., Rose, T. C., Gray, L. J., Davies, M. J., & Khunti, K. (2015). Prevalence and Incidence of Hypoglycaemia in 532,542 People with Type 2 Diabetes on Oral Therapies and Insulin: A Systematic Review and Meta-Analysis of Population Based Studies. *PLoS One*, 10(6), e0126427. doi:10.1371/journal.pone.0126427.

ii Number of emergency department visits (in thousands) with hypoglycemia as first-listed diagnosis and diabetes as secondary diagnosis, adults aged 18 years or older, United States, 2006-2009. (October 15, 2014). Retrieved from <https://www.cdc.gov/diabetes/statistics/hypoglycemia/fig1.htm>

iii McCoy, R. G., Van Houten, H. K., Ziegenfuss, J. Y., Shah, N. D., Wermers, R. A., & Smith, S. A. (2012). Increased Mortality of Patients With Diabetes Reporting Severe Hypoglycemia. *Diabetes Care*, 35(9), 1897-1901. doi:10.2337/dc11-2054

iv Lipska, K. J., Ross, J. S., Wang, Y., Inzucchi, S. E., Minges, K., Karter, A. J., . . . Krumholz, H. M. (2014). National trends in US hospital admissions for hyperglycemia and hypoglycemia among Medicare beneficiaries, 1999 to 2011. *JAMA Intern Med*, 174(7), 1116-1124. doi:10.1001/jamainternmed.2014.1824

Learn more about the Hypoglycemia Prevention Study at

<https://www.endocrine.org/hypoprevent>