

CONFERENCE ABSTRACT

Patient-centered outcomes for GoStrong: A self-management diabetes program in Savannah, GA

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Background: To advance the goal of health improvement for diverse populations with diabetes, a patient-centered approach is foundational.

Methods: Innovative methods were used to initiate and advance an approach to diabetes engagement and self-management. We began with a strategy to understand how patients with diabetes view and interact with the disease via the medical community and moved to program development through patient-centered design and to the development of strategic partnerships and continuous learning from patients, stakeholders, and academic research partners.

Results: The mean age of the participants in the *GoStrong*TM program (n=106) was 51 ±9.2 (SD) years. There were significant differences in the HbA1c levels over time compared to the Control group (n=100). The mean HbA1c level from baseline to 36 months decreased from 7.49% to 6.89%, with the largest decline (to 6.28%, p<0.01) at 12 months. The mean HbA1c level for the control group increased from 8.38% to 8.49% from baseline to 36 months, with the largest increase (to 8.89%, p<0.01) at 18 months. There were significant differences for total medical costs at 12 months prior to and 12 months after starting the *GoStrong* program, a difference in total prescription drug costs at 12 months, and differences within the total group in number of emergency room (ER) visits. Claims information showed that *GoStrong* produced significantly lower total medical costs and ER visits. There was also an increase in total prescription drug costs that may be due to better medication adherence.

Conclusions: For diabetics, the *GoStrong* program results in reduced HbA1c levels, reduced costs, and reduced ER visits.