

# REDUCING COSTLY DIABETIC FOOT COMPLICATIONS

# A MEDICAID PLAN'S SUCCESS WITH PODIMETRICS' VIRTUAL CARE SOLUTION

### THE CHALLENGE

Diabetes can lead to serious complications, and one of the costliest — and least discussed — is foot amputations. Diabetic foot ulcers (DFUs) are a leading cause of preventable amputations and hospitalizations, significantly impacting both member health and healthcare costs.

Many high-risk individuals do not receive timely interventions, leading to severe complications and increased financial burdens for payors.

A Medicaid plan serving rural, urban, and remote populations in a southwest state had a significant number of members with diabetes. Many individuals had limited access to podiatry care and relied on their primary care providers (PCPs) for foot health management; however, this occasionally led to issues being overlooked. The plan aimed to assist in managing this complex, high-risk population, which included dual-eligible members with disabilities. The primary goal was to prevent complications from diabetic foot ulcers, minimize amputations, and shorten hospital stays.

## THE SOLUTION

The plan implemented Podimetrics' virtual care solution to manage diabetic foot health for a targeted group of high-risk members. Through remote monitoring with the SmartMat, personalized support, and direct member engagement, the program enabled timely interventions to help prevent complications before they escalated.



#### **SOLUTION HIGHLIGHTS**

- Clinical Support: 2,000+ care support calls helped resolve issues early, with only 9% of reported inflammation episodes requiring provider escalation—reducing workload while enabling timely, preventive care.
- Bilingual Member Support: All materials provided in English and Spanish.
- Care Management Support: Escalation reports to the plan's care management team for health status changes, falls, hospitalizations, and referrals for diabetic shoes/inserts.
- Collaboration and Early Intervention: Close partnership with the plan's care
  management team for timely interventions that extended beyond the primary
  focus of foot care.

#### **Member Population & Engagement**

- 792 participants with a 29% enrollment rate (within the typical 20-30% range across Podimetrics programs).
- **Demographics:** 51% male, 49% female, average age: 55.8 years.
- Engagement: Members scan an average of three times per week, reinforcing strong participation in the program.

## THE RESULTS

Over a 12-month period:

- 50%+ reduction in amputations through early intervention.
- 30%+ decrease in inpatient hospital stays, reducing healthcare costs.
- 10%+ reduction in ER visits, preventing costly avoidable emergencies.
- 20% savings at \$7,200 per member per year.
- 60%+ reduction in wound care material costs (skin substitutes).
- 92% of members report high satisfaction with the program.
- 93% of members believe it enhances their overall experience with the Health Plan.

"Our Podiatry group can perform up to 20 amputations a day. It's quite astute of the Health Plan to recognize the severity of preventable diabetic foot wounds and complications, and how they can rapidly develop and turn into amputations overnight. When a health plan really wants to address the Triple Aim, this is a very complex patient and high-cost area that they'll address and focus on. I think this solution will do just that for them."

- Provider working with Health Plan

# **CONCLUSION**

This program summary shows the impact of proactive diabetic foot care and advanced remote monitoring technology in complex diabetes management. Health plans can adopt these strategies to improve patient outcomes and reduce costs from preventable complications.

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