



# Screening at BMI 23 for Asian Americans: Impact on San Francisco Health Network



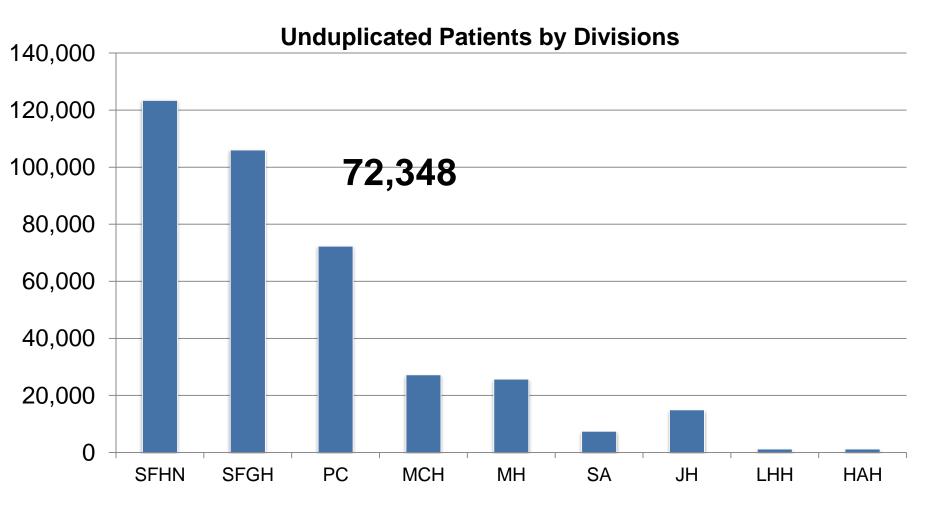
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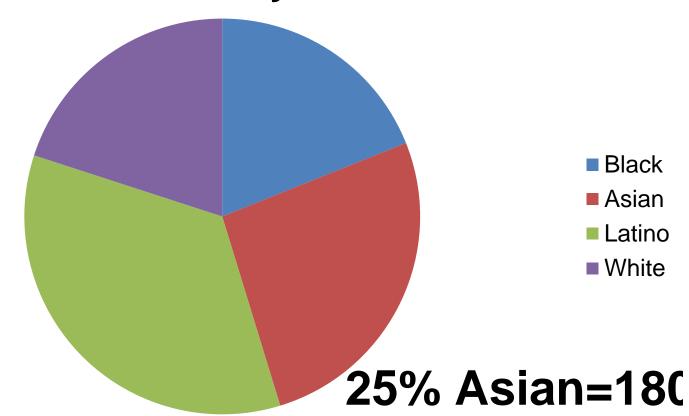


# SFHN by the Numbers





# SFHN PC: Numbers by Race Primary Care

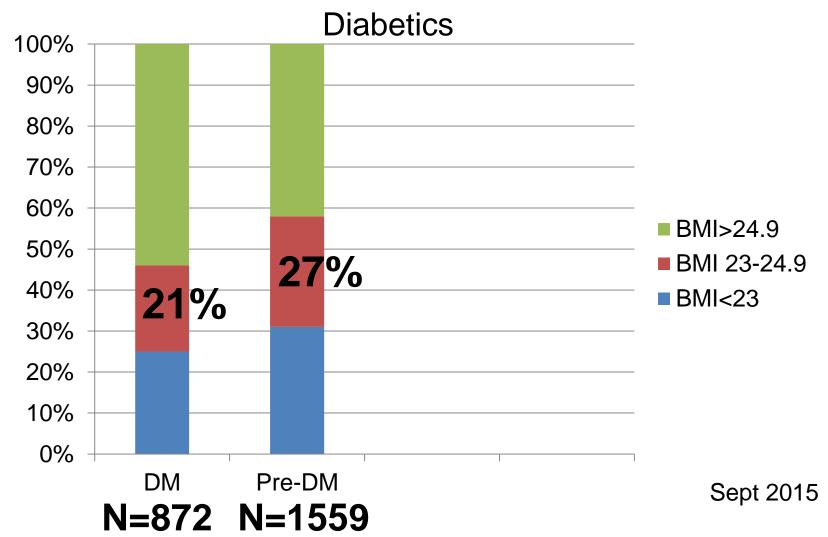


# Chinatown Public Health Center

- Community Primary Care
- ❖5446 active unduplicated patients
- ❖90% Asian Americans (27% of SFHN PC)
- ❖872 CPHC patients have diabetes = 16%
- ❖1559 CPHC patients have pre-diabetes = 29%
- **♦**BMI  $\geq$  23 = 3243 (59% CPHC patients)
- **♦**BMI ≥ 25 = 2033 (37% CPHC patients)
- ❖BMI 23-24.9 = 1210 (<u>22%</u> CPHC patients)



#### BMI Breakdown of Current CPHC Diabetics and Pre-





# Impact on SFHN

- ❖Additional Patients Screened = 4015 (#Asian Americans at BMI 23-24.9 = 18087 x 22%)
- ❖Additional Pre-Diabetics = 1148 (4015 x 29% pre-Diabetics)
- ❖Additional Diabetics = 642 (4015 x 16% Diabetics)



# Cost Benefit Analysis

#### **Benefits**

- Earlier detection and intervention
- ❖ Preventing costly complications (e.g. stroke, heart attack, kidney disease, loss of vision, loss of limb) and hospitalizations
- Lower loss of productivity

#### <u>Costs</u>

- Simple screening blood test (HgbA1c)
- Low cost treatment (e.g. generic metformin) and interventions (diet modification, exercise)



# On The Ground

- ❖CPHC began screening at 23 for Asian Americans in April 2015
- Minimal impact on operation
- Diabetes Prevention Program pilot with local YMCA: pre-diabetic patient referral
- Revamped diabetes class with emphasis on self-management



# SFHN and Population Health

- Tremendous opportunities exist for SFHN to effect positive health gains on a population level.
- SFHN developing more of a population health strategy

Enterprise EMR

Data warehouse and analytics

Registries

DPH Population Health Division collaboration

Building the infrastructure to execute this strategy