



RGV ACO Health Provider, LLC Case Management Program, including Point-of-Care HbA1c and Lipid Testing, Significantly Improved Outcomes for Diabetes Patients, according to Data Presented at American Diabetes Association

Personalized disease management strategies reduced healthcare costs and raised diabetes management scores within top 1 percent of all U.S. ACOs

NEW ORLEANS, La., June 11, 2016 – Alere Inc., a global leader in rapid diagnostics, today announced results from an innovative type 2 diabetes mellitus (T2DM) care plan implemented by the Rio Grande Valley Accountable Care Organization Health Providers LLC (RGV ACO) demonstrating that point-of-care HbA1c and Lipid testing, home visits and other personalized strategies significantly improved patient outcomes and reduced healthcare costs. Results were presented during an oral presentation at the 76th Scientific Sessions of the American Diabetes Association (ADA) in New Orleans.

The RGV ACO is located in South Texas, in one of the poorest counties in the United States. The organization implemented this care plan among its T2DM patients, who comprise nearly one-third of the ACO's total case population and who are primarily Medicare beneficiaries. RGV ACO's comprehensive program was designed to address performance measures required as part of the Medicare Shared Savings Program (MSSP), and ultimately reduced per capita costs for its Medicare beneficiaries by 14 percent.

"The results of our program are especially gratifying because they show that T2DM can be successfully and cost-effectively managed among patients who are traditionally difficult – and expensive – to treat," said Jose F. Pena, MD, Chief Executive Officer and Chief Medical Director, Rio Grande Valley Accountable Care Organization Health Providers LLC. "We now know definitively that there is no 'silver bullet' when it comes to managing T2DM. Healthcare providers need to use a wide range of interventions and strategies, including rapid point-of-care testing, frequent phone calls by care coordinators and others that are culturally tailored to their patients."

The team's innovative program clearly demonstrates the critical role of point-of-care HbA1c and lipid testing, in combination with other disease management strategies, in improving health outcomes for people with T2DM," said Gillian Parker, Senior Director, Diabetes, Alere. "Improving monitoring test rates is one of the first steps in stemming the dangerous rise of complications from T2DM in the U.S., and this begins at providers' groups like Rio Grande Valley ACO that implement routine point-of-care testing in their practices."

Beginning in April 2012, physicians in all 24 practices of RGV ACO enrolled more than 6,000 patients with poorly controlled diabetes (HbA1c >8 percent) in the care plan, which included point-of-care HbA1c testing with the Alere Afinion™ HbA1c assay, point-of-care testing with the Alere LDX® assay, the use of care coordinators, a nutritionist who rotated through the physicians' offices, and frequent alerts of care gaps in the electronic health records. These interventions led to significant improvements in all quality measures (including HbA1c <8 percent, LDL <100mg/dL, blood pressure <140/90 mmHg, tobacco non-use). From 2012 to 2014, the number of patients with comprehensive T2DM control increased from 12 to 49 percent, and the number of patients with HbA1c > 9 percent decreased from 17.81 to 12.83 percent. For the composite score of T2DM metrics, RGV achieved the top 1 percent of all ACOs in the nation. RGV ACO also reduced the per capita costs for its Medicare beneficiaries by 14 percent through reducing hospital admissions, readmissions, and implementing a home visit program.

About Point-of-Care HbA1c Testing

Health organizations such as the American Diabetes Association, U.S. Centers for Disease Control and Prevention and the National Institutes of Health recommend regular testing for Hemoglobin A1c (HbA1c) – at least two times per year for patients with stable glycemic control, and at least quarterly for patients who are not meeting glycemic goals.¹ However, less than 7 percent of patients are tested at the recommended frequency.² Point-of-care HbA1c testing offers a convenient and efficient way to help improve testing rates, which can help lead to improved patient outcomes. Point-of-care testing has been shown to increase guideline-compliant testing, decrease HbA1c³ levels, and increase patient satisfaction,⁴ while improving operational efficiency and reducing costs.⁵

About Rio Grande Valley ACO

Rio Grande Valley Accountable Care Organization (RGV ACO) is committed to one main goal – improving the quality of life and health through the effective practice of patient-centered preventative care. They partner with their patients to achieve exceptional health care outcomes. RGV ACO is comprised of various healthcare clinics in locations throughout Central and South Texas and in New Jersey. RGV ACO and other ACOs are sponsored by the Centers for Medicare and Medicaid Services (CMS), and were established to provide enhanced care coordination for Medicare patients, particularly those living with chronic diseases.

About Alere

Alere believes that when diagnosing and monitoring health conditions, **Knowing now matters™**. Alere delivers reliable and actionable information through rapid diagnostic tests, resulting in better clinical and economic healthcare outcomes globally. Headquartered in Waltham, Mass., Alere focuses on rapid diagnostics for infectious disease, cardiometabolic disease and toxicology. For more information on Alere, please visit www.alere.com.

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¹ Standards of Medical Care in Diabetes. *Diabetes Care*. 2015;38:Supplement 1

² Lian J, Lang Y. *Curr Med Res Opin*. 2014;30(11):2233-40.

³ Eugbunike V, Gerard S. *Diabetes Educator*. 2013;39:66-73.

⁴ Laurence CO, Gialamas A, Bubner T. *Br J Gen Pract*. 2010;60(572): e98–e104.

⁵ Crocker JB, Lee-Lewandrowski E, Lewandroski N, et al. *Am J Clin Pathol*. 2014;142:640-6.