Cape Cod Municipal Health Group

PROVIDER CONFIRMATION FORM

Please enter the dates your patient last had the following pre-diabetes/diabetes exams and/or laboratory work completed. It is not necessary for all items to be completed on this form at the same time, but we would appreciate your providing whatever information you can based on your contact with the patient and available medical records. Physicians are encouraged to complete all items, including lab dates.

By completing all recommended exams and lab-work annually (semi-annually for HbA1c), your patient will be eligible to receive diabetes medications and supplies for $0 copays. If you do not feel your patient needs one of the exams/labs below, simply check not needed by the exam/lab, and they will receive credit for the activity. The information you are providing will be retained by the ***Good Health Gateway***® Program administrators on behalf of your patient's health plan sponsor, Cape Cod Municipal Health Group. HIPAA privacy and security standards are used to ensure the security of your patient's health care information.

Patient Name ______________________

DOB ____/____/____ **Health Plan ID No** ______________________

Telephone (   )   - ______________________

DIABETES CARE ACTIVITY		DATE LAST COMPLETED		
	NOT NEEDED	MONTH	DAY	YEAR
Diabetes Eye Exam	☐			
Diabetes Foot Exam	☐			
Laboratory Work-up of Fasting Blood Lipid	☐			
Laboratory Work-up of Urine/Protein Levels	☐			
Laboratory Work-up of Hemoglobin A1c levels	☐			

Most Recent Hemoglobin A1c Value ☐ *Most Recent Blood Pressure Value* ☐

Practice Name (Please print):

Provider Telephone Number:

Provider Name (Please print):

Provider Signature:

Date:

Please complete all the information you can, sign, date, and fax to Abacus.
Toll-free (877) 378-4480

Thank you for your assistance!

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Questions? Call toll-free (800) 643-8028

Managing your health has its own Rewards.
Plus, we'll give you a few more.

Dear Dr./Healthcare Provider:

Your patient is participating in a voluntary incentive program offered through his or her employer and/or health plan sponsor.

The program is designed to encourage your patient's adherence to pre-diabetes/diabetes care guidelines - including regular tracking of their pre-diabetes/diabetes as well as adherence to any prescribed medication regimens – and thereby achieve better health outcomes and reduced health care costs.

If your patient demonstrates (through your certification on the attached fax-back form) that they are up-to-date with all of the following elements of their care, they will be able to get their DIABETES MEDICATIONS AND SUPPLIES FOR $0 COPAYS, including brand as well as generic diabetes medications and supplies including insulin needles, syringes, test strips, lancets, and glucometers:

- Annual foot exam (last exam within the past 12 months)
- Annual eye exam (last exam within the past 12 months)
- Annual fasting blood lipid levels (last lab within the past 12 months)
- Annual urine protein levels (last lab within the past 12 months)
- Semiannual HbA1c levels (last lab within the past 6 months)

If all items are not up-to-date at this office visit, you can order the missing items, and fax the form upon their completion, so that your patient can qualify as soon as possible for $0 copays on diabetes medications and supplies. If you do not feel that your patient needs a particular lab/exam, simply check not needed, and they will receive credit for this activity. If your patient is seeing multiple health care providers for their pre-diabetes/diabetes and you can only complete some items, that is OK – please complete those items you can.

We acknowledge, and communicate to the patient, that these care activities are minimum requirements that need to be completed on an ongoing basis, and that you may recommend more frequent or additional examinations, testing, and other procedures or treatments as needed.

Thank you very much for your assistance on behalf of your patient, and if you have questions feel free to contact us at (800) 643-8028.

Sincerely,

Linda Loiselle
Program Director