Quality of medical care for chronically ill participants in disease management programs

Scientists from seven countries are working on the new EU project DISMEVAL in order to develop reliable methods to answer the question whether chronically ill patients enrolled in Disease Management Programs receive better medical care than others. DISMEVAL stands for “Developing and validating disease management evaluation methods for European healthcare systems”. Along with research groups from the UK, the Netherlands, Spain, Austria, France and Denmark, the Institute for General Practice at the Goethe University in Frankfurt is studying various ways of evaluating Disease Management Programs (DMP). The European Commission is sponsoring the project with a total of €2.65 million.

Since 2003, DMPs have been provided by all statutory health insurance companies for the treatment of patients with diabetes mellitus, coronary heart failure, asthma/COPD and breast cancer. In Germany, the programs currently provide around 5.8 million patients with a structured and evidence-based therapy that personally involves them in their treatment to a greater degree. To achieve this, DMPs specify regular intervals at which patients should visit their GPs and specialists, obtain transfers in case of disease complications and take part in training measures. The aim of the implementation of the programs is to achieve systematic improvement in the quality of treatment and a reduction in follow-up diseases, complications and costs in case of chronic diseases. Whether this is actually the case is unknown.

An accompanying evaluation of the benefits of DMPs is mandatory but the method used only allows the comparison of the various DMPs provided by health insurers with each other. It is currently not possible to provide scientific evidence as to whether patients in DMPs actually receive improved medical care or not on the basis of this statutory evaluation. To do this it would be necessary to gather details on the health situation of patients before the introduction of the programs (baseline values) and to compare these with patients that are not being treated in DMPs (control group).

A scientifically meaningful assessment of the use of new medical care models is absolutely essential but generally requires substantial time and money. Therefore, insight into which evaluation methods can achieve sufficiently reliable results under these conditions and that eat up as few resources as possible would be very helpful. To this end, the EU-project DISMEVAL compared the evaluation methods used in the participating European countries and compared them with one another. The aim of the research project is to develop a handbook of methods for the evaluation of DMPs that decision makers can use to select an evaluation method which is as accurate but at the same time as simple and cost effective as possible (best practice) when taking into account the organizational and conditions of the health system in the country concerned.

The project is being coordinated by the European branch of the renowned U.S. research organization RAND. It commenced in January 2009 and will run for a total of 36 months. The project comprises three steps:

Preparation of an overview that compares the prevailing conditions governing the execution and current evaluation of DMPs in the participating countries
Selection of the most practicable and valid statistical models for the evaluation of DMPs
Statistical study of the validity of the chosen models using existing datasets taken from DMP-evaluations in the participating countries
An analysis of German DMP-datasets is taking place in close cooperation with the AQUA Institute for Applied Quality Promotion and Research in Healthcare in Göttingen as project partner. The results of the project are expected to provide the basis for the assessment of the actual effectiveness of existing, broadly established treatment programs. This appraisal is essential if targeted changes and improvements in the care of the chronically ill are to be made possible.

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