

Tower Health and Podimetrics Partnership to Prevent Diabetes Complications and Reduce Healthcare Costs

BACKGROUND

Tower Health is an integrated healthcare system that provides compassionate, high-quality, and innovative healthcare and wellness services to communities in Pennsylvania. The organization observed a higher incidence of complex diabetes among its Medicaid and dual-eligible populations, leading to an increase in complications, including costly amputations. These amputations not only elevate healthcare costs but also significantly diminish patients' quality of life and increase their risk of further health issues, such as circulatory diseases, congestive heart failure (CHF), and chronic obstructive pulmonary disease (COPD).

The primary cause of amputations is diabetic foot ulcers (DFUs), which are highly preventable when managed effectively. To prevent amputations, Tower Health partnered with Podimetrics for a study using its virtual care program aimed at preventing DFUs by monitoring foot health at home. At the center of the program is the SmartMat, a clinically proven device that patients use for just 20 seconds a day. It measures foot temperature to help detect early signs of inflammation that may lead to serious complications like ulcers—or even amputations.

PROGRAM

CRITERIA

Patients from two Podiatry facilities were reviewed and identified by their treating podiatrist based on specific criteria that categorized them as high-risk for developing a new or recurrent DFU. The criteria included a history of previous DFUs or partial foot amputation, as well as neuropathy accompanied by significant foot deformities, such as Charcot arthropathy.

OVERVIEW

A total of 135 patients were onboarded and 118 were enrolled in the program for twelve months. Each patient received a SmartMat to use in their home. The Podimetrics team conducted onboarding calls to educate participants about the program and collect their medical history. Patients were encouraged to scan their feet daily for 20 seconds on the mat.

Throughout the study, a standard protocol was followed to monitor inflammation, which is a well-known precursor to foot complications. If inflammation was detected, the Podimetrics team called the patient to gather additional information and to initiate an offloading protocol to reduce the risk of a wound forming. If necessary, escalations were communicated back to the Tower providers for follow-up.

PATIENT SUPPORT

Throughout the program, the Podimetrics team interacted with patients to provide personalized support, including training, wellness check-ups, re-engagement, inflammation check-ins, and offloading. As a result, patients demonstrated high adherence to recommended protocols, and many were able to maintain their foot health without progressing to more severe complications.

PATIENT INTERACTIONS

Wellness and training	1,252
Care support (re-engagement, offloading, inflammation)	2,252
Other (call back, resolution, Etc.)	247
Total Interactions	3,751

PROVIDER SUPPORT

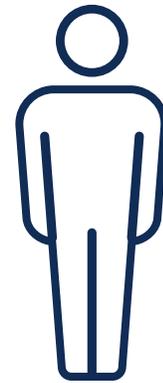
Care support calls with patients helped resolve issues early, with only 2% requiring escalation to the provider for intervention and follow-up. As a result of this proactive approach, patients experienced timely support and prevention of worsening symptoms, contributing to a reduced provider workload and improved patient outcomes through preventive care.

PATIENT PROFILE

Podimetrics collected patient data encompassing demographics, as well as medical and social histories, providing insight into the population served. Out of 135 patients onboarded, 118 were successfully activated, resulting in an activation rate of 87%.

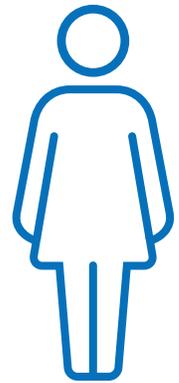
The demographic breakdown showed that 65% of patients were male and 35% female, with an average age of 64 years. Medically, the majority of patients faced significant chronic conditions: 84% had Type 2 diabetes, 79% experienced neuropathy, and 89% had vascular complications.

From a social standpoint, many patients required additional support in their daily lives. Approximately 65% reported having a caregiver, while 63% utilized a mobility aid. This combination of clinical and social factors highlights the complex needs of the patient population.



65%

Male Members



35%

Female Members

118 Participants Activated

64 Average Age

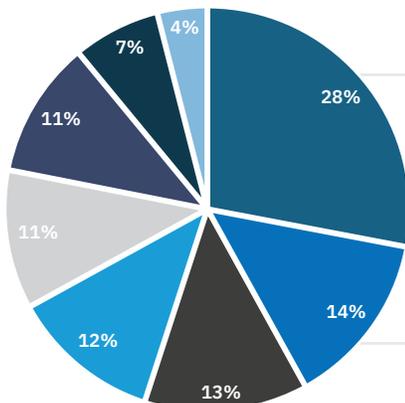
84% Type 2 Diabetes

79% Neuropathy

89% Vascular Complications

65% Has Caregiver

63% Uses Mobility Aid



INSURANCE COVERAGE DISTRIBUTION

28% Medicare

14% AmeriHealth

13% Aetna

12% Highmark

11% UHC

11% Other

7% No Insurance

4% UPMC

OUTCOMES

After one year, patients in the program were evaluated, and the results were compared to a pre-period with DFU-specific timing adjustments. The results achieved include:

SAVINGS AND REDUCTIONS

- **\$678 PMPM/\$8,130 PMPY savings**
- **50% reduction** in amputations
- **54% reduction** in hospital admissions
- **60% reduction** in skin grafts

ADHERENCE

- **71% Program Engagement**
Based on patients scanning 4x per month
- **Average Weekly Adherence:**
Patients scanned 3-4 times per week

“Your team is extremely caring; I only wish all healthcare was like yours.”

Tower Patient

CONCLUSION

This study highlights the importance of preventing DFUs and the costs associated with them to improve outcomes for individuals with complex diabetes. By implementing the Podimetrics virtual care program, Tower Health achieved significant reductions in both amputations and overall healthcare expenses within a highly complex and costly patient population. Tower Health is now working with payors to educate them of the success of the program, and ask for coverage for their members. For more information, please visit podimetrics.com or contact us at info@podimetrics.com.

