

Introduction:

Continuous glucose monitoring (CGM) is associated with improved diabetes outcomes and is identified in clinical practice guidelines as a care standard for people with diabetes (PWD) who use insulin. Access to diabetes technology is widely variable and has led to disparities in CGM use. Illinois state-funded plans require that prescribers of CGM are endocrinology specialists or are in consult with endocrinology; however, primary care providers (PCPs) are more accessible.

Objectives:

To assess CGM utilization in primary care and identify CGM uptake barriers and the educational needs of Illinois-based PCPs.

Methods:

This cross-sectional study administered an anonymous web-based survey to family medicine clinicians in Illinois. The 26-item survey utilized a four-point Likert scale and multiple answer items to gather demographics and practice information, prescribing experiences, comfortability with providing patient training and utilizing CGM-generated data, barriers to CGM use, willingness to participate in CGM-related education, and desired educational topics. Descriptive statistics were used to report the characteristics and responses of participants.

Results:

Of the 30 study participants, half currently offer CGM to PWD on insulin and feel comfortable prescribing CGM supplies. The majority of primary care clinicians have prescribed CGM supplies in the past year, completed education on a general CGM overview, and feel uncomfortable training patients on CGM use and utilizing CGM-generated data. Common barriers to CGM use are cost, insurance coverage, lack of access to endocrinology care, and inadequate staff support or time to train patients. Most clinicians are willing to participate in additional education/training.

Conclusions:

The majority of PCPs have taken steps to enhance their CGM knowledge and have prescribed CGM supplies. Opportunities to increase adoption of diabetes technology include: advocating for the expansion of third-party payor coverage of CGM, including removal of restrictive prerequisites, and connecting providers and clinical staff in primary care settings with CGM-focused education and resources that comprise best prescribing practices, guidance with insurance processes, patient selection, clinical benefits, and CGM data interpretation.