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CARDI•OH
Ohio Cardiovascular and Diabetes Health Collaborative

Cardi-OH Update



The Ohio Cardiovascular & Diabetes Health Collaborative (Cardi-OH) is a statewide initiative of health care professionals who share knowledge to improve Medicaid patient outcomes and eliminate health disparities across Ohio.

Special Message from Mike and Shari

Dear Cardi-OH Community,

As Cardi-OH marks nine years, we want to extend our thanks to the many individuals and organizations who helped advance our mission to improve diabetes and cardiovascular health for Ohio's Medicaid population along the way. What began as a partnership among Ohio's seven medical schools grew into a statewide collaborative, uniting health care providers in pursuit of better cardiovascular and diabetes health and improved outcomes for all Ohioans.

Through its innovative online educational offerings - programs, podcasts, webinars, and evidence-based resource library — Cardi-OH has reached thousands of health care providers and made a lasting impact on patient care. Collectively, we can be very proud of the relationships we've forged and the progress we've made together.

We invite you to celebrate our shared journey by exploring our *Special Edition Podcast* and *Cheers to 9 Great Years! Special Webinar* in this newsletter — reflecting on nearly a decade of collaboration and innovation. As we enter our tenth year, rest assured [Cardi-OH.org](#), [our best practices library](#), and [web app](#) will remain available at no cost.

With enduring gratitude and appreciation,

Michael W. Konstan, MD, and Shari Bolen, MD, MPH

Tune in to Cardi-OH Radio

[Podcast 69 - Special Edition: Cheers to 9 Great Years!](#)



Cardi-OH
RADIO

In this Special Edition Podcast, Principal Investigators, Michael W. Konstan, MD, and Shari Bolen, MD, MPH, from Case Western Reserve University, reflect on Cardi-OH's remarkable growth and impact over the past nine years.



Joined by special guest, Jackson T. Wright, Jr., MD, PhD, they describe the vision behind Cardi-OH's formation, discuss the power of statewide collaboration, and celebrate the accomplishments leading to improved diabetes and cardiovascular health outcomes for all Ohioans.

Moderated by Colin Crowe, MD, from Case Western Reserve University.

Pearls for Clinical Practice

Capsule 68 - Reducing Provider Barriers to Continuous Glucose Monitoring Uptake and Use

Did You Know?

Provider hesitancy remains a key barrier to CGM prescribing, despite strong and growing evidence supporting its clinical benefits.

Capsules provide busy clinicians brief summaries of best practices that are ready to be implemented in clinical care.

Cardi-OH CAPSULE

DATE RELEASED: 10/20/2023
REDUCING PROVIDER BARRIERS TO CONTINUOUS GLUCOSE MONITORING UPTAKE AND USE

Continuous glucose monitoring (CGM) has been shown to enhance health outcomes for individuals with type 1 and type 2 diabetes and is recommended by the American Diabetes Association. However, provider hesitancy continues to be a barrier to prescribing CGM in primary care settings. The most common challenges include:

1. Inconsistent provider knowledge and confidence, including clinical and technical aspects of CGM (e.g., indications for CGM and how to act on specific CGM reports and device knowledge and interpretation of CGM data output, respectively).
2. Perceived complexity of CGM.
3. Administrative burden, including insurance and a lack of integration with electronic health records (EHR systems).
4. Time constraints.

Such barriers can result in underutilization and disparities in access to CGM across populations. Evidence-based approaches to address provider hesitancy and support CGM implementation are outlined in the table below.

Barrier	Strategies to Overcome Barrier
Provider and Staff Education/Training	• Aim to increase knowledge and confidence in prescribing, conceptualizing, and interpreting CGM data, making treatment decisions, and counseling patients on use.
Workflow Modification	• Include the interdisciplinary team (e.g., physicians/nurse practitioner providers, medical assistants, nurses, dietitians, pharmacists, diabetes care and education specialists). • Establish clear roles for device selection, ordering, CGM set-up/linking to the clinic, patient training, data downloading and interpretation, and communicating changes to the patient. • Integrate CGM ordering and data platforms into the EHR; offset costs by capturing CGM data in supplements or include EHR to value-based care, linking to set-up and interpretation, and using critical and remote patient monitoring.
Use of Standardized CGM Reports	• Standardize CGM metrics to facilitate glucose profile (GPR) to facilitate remote interpretation of data and setting/tracking of goals. • Use data management platform (e.g., device specific or agnostic, such as Glucose or Glimp) to facilitate CGM data sharing, simplify workflows, and enable customized reports.

For more information, access Cardi-OH's expanded resources on [supporting patient success with CGM](#) and [addressing barriers to CGM use](#).

Prepared by: Jackson T. Wright, Jr., MD, PhD, and Shari Bolen, MD, MPH, from Case Western Reserve University, and Michael W. Konstan, MD, from Case Western Reserve University.

Reviewed by: Colin Crowe, MD, from Case Western Reserve University.

Approved by: Cardi-OH Steering Committee.

Version: 1.0

What You Need to Know

Effective Diabetes Prevention for Adults: Medical and Surgical Treatment of Obesity, Part 2

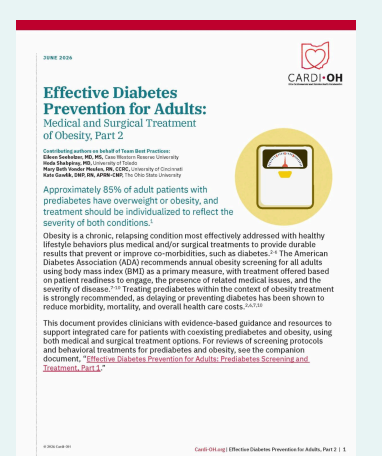
Prediabetes and obesity often occur together and should be managed using an integrated, individualized approach. This document focuses on evidence-based pharmacologic and bariatric surgery options in combination with lifestyle modifications to help prevent progression to type 2 diabetes and improve long-term health outcomes. The document is the second of a two-



Cardi-OH ARTICLES

part series. See [Effective Diabetes Prevention for Adults: Prediabetes Screening and Treatment, Part 1.](#)

[Articles](#) focus on high priority topics in cardiovascular and diabetes care designed for primary care clinicians.



News You Can Use

[Current 63 - Cognitive Speed Training Linked to Delayed Dementia Diagnosis Over 20 Years](#)

[Currents](#) provide brief summaries of the latest advances in medicine or clinical practice related to diabetes or hypertension and include links to additional resources.



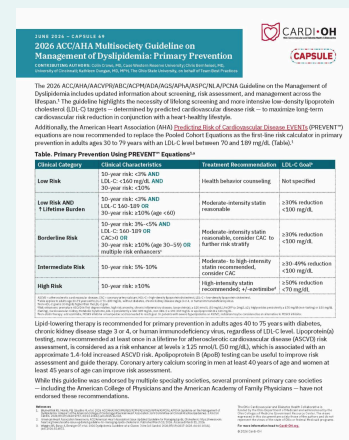
Pearls for Clinical Practice

[Capsule 69 - 2026 ACC/AHA Multisociety Guideline on Management of Dyslipidemia: Primary Prevention](#)

Did You Know?

The 2026 ACC/AHA multisociety dyslipidemia guideline recommends the PREVENT™ equations as the first-line tool for cardiovascular risk assessment.

[Capsules](#) provide busy clinicians brief summaries of best practices that are ready to be implemented in clinical care.



What You Need to Know

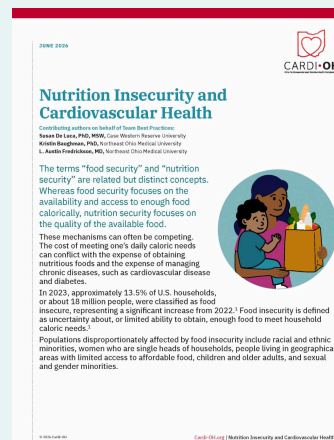
[Nutrition Insecurity and Cardiovascular Health](#)

Food and nutrition insecurity have significant implications for cardiovascular health. Learn about the relationship between access to nutritious foods and health outcomes as well as practical strategies for screening and intervening at the primary care visit.

[Articles](#) focus on high priority topics in cardiovascular and diabetes care designed for primary care clinicians.



Cardi-OH
ARTICLES



Cardi-OH Special Webinar

Cheers to 9 Great Years!

Watch a Special Cardi-OH Webinar featuring Principal Investigators, Michael W. Konstan, MD, and Shari Bolen, MD, MPH, as they reflect on the Cardi-OH Collaborative's 9 years of impact, celebrating its most significant milestones and successes.

View the webinar recording and slides on [Cardi-OH.org](https://www.cardi-oh.org).

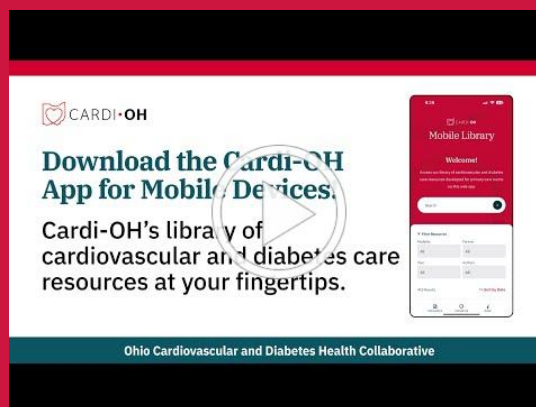


May 28, 2026
Michael W. Konstan, MD & Shari Bolen, MD, MPH

Using the Cardi-OH Web App is Simple!

- Access Cardi-OH's library of cardiovascular and diabetes care resources.
- Bookmark your favorites.
- Share best practices with colleagues.

[Download Web App →](#)



Learn More

Visit [Cardi-OH.org](https://www.cardi-oh.org) to read more about the collaborative and our latest best practices.



*Sharing best practices to improve
cardiovascular and diabetes health*

In partnership with



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