



CARDI·OH

Ohio Cardiovascular and Diabetes Health Collaborative



CASE WESTERN RESERVE
UNIVERSITY
School of Medicine

In partnership with



May 28, 2026

About Cardi-OH

Founded in 2017, the mission of Cardi-OH is to improve cardiovascular and diabetes health outcomes and eliminate disparities in Ohio's Medicaid population.

WHO WE ARE: An initiative of health care professionals across Ohio's seven medical schools.

WHAT WE DO: Identify, produce, and disseminate evidence-based cardiovascular and diabetes best practices to primary care teams.

HOW WE DO IT: Online library of best practices resources available at Cardi-OH.org and via our web app, including monthly newsletters, podcasts, webinars, and quality improvement using the Project ECHO® virtual training model.

Learn more at Cardi-OH.org



CARDI•OH

Ohio Cardiovascular and Diabetes Health Collaborative

A Statewide Collaborative



Agenda



Topics	Presenter(s)	Timing
Welcome and Overview	Michael W. Konstan, MD Shari Bolen, MD, MPH	5 mins.
ODM Remarks	Mary Applegate, MD Jacqueline Morse, MD, MPH	5 mins.
Cardi-OH Over Time and Shared Successes	Michael W. Konstan, MD Shari Bolen, MD, MPH Cardi-OH Team	45 mins.
Cheers to 9 Great Years!	Michael W. Konstan, MD Shari Bolen, MD, MPH	5 mins.



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Ohio Cardiovascular and Diabetes Health Collaborative

ODM Remarks



Mary Applegate, MD, FAAP, FACP
Medical Director
Ohio Department of Medicaid



Jacqueline Morse, MD, MPH
Assistant Medical Director
Ohio Department of Medicaid



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Ohio Cardiovascular and Diabetes Health Collaborative

Cardi-OH Over Time and Shared Successes

Michael W. Konstan, MD
Shari Bolen, MD, MPH
Cardi-OH Team

Cardi-OH Trivia – Chat Activity #1



Can You Name the Original PI at your SOM?

Cardi-OH PIs: In the Beginning



Case Western Reserve University

Michael Konstan, MD

Shari Bolen, MD, MPH



Ohio University

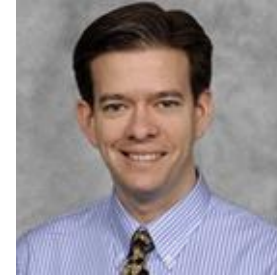
Elizabeth Beverly, PhD



University of Cincinnati

Michael Holliday, MD

Barbara Tobias, MD



The Ohio State University

Randy Wexler, MD



Northeast Ohio Medical University

Stacey Gardner-Buckshaw, PhD



University of Toledo

Lance Dworkin, MD



Wright State University

Roberto Colón, MD



Cardi-OH PIs: Today



Case Western Reserve University

Michael Konstan, MD Shari Bolen, MD, MPH



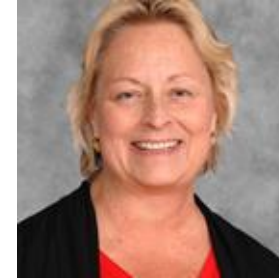
Ohio University

Elizabeth Beverly, PhD



University of Cincinnati

Chris Bernheisel, MD Sandra Regan, PhD



Wright State University

Jim Lamb, MD



The Ohio State University

Kathleen Dungan, MD, MPH Ayo Adesanya, MD, PhD



Northeast Ohio Medical University

Kris Baughman, PhD



University of Toledo

Lance Dworkin, MD Hoda Shabpiray, MD



Chat Activity #2



What is the one thing that impacted you the most as part of this collaborative?

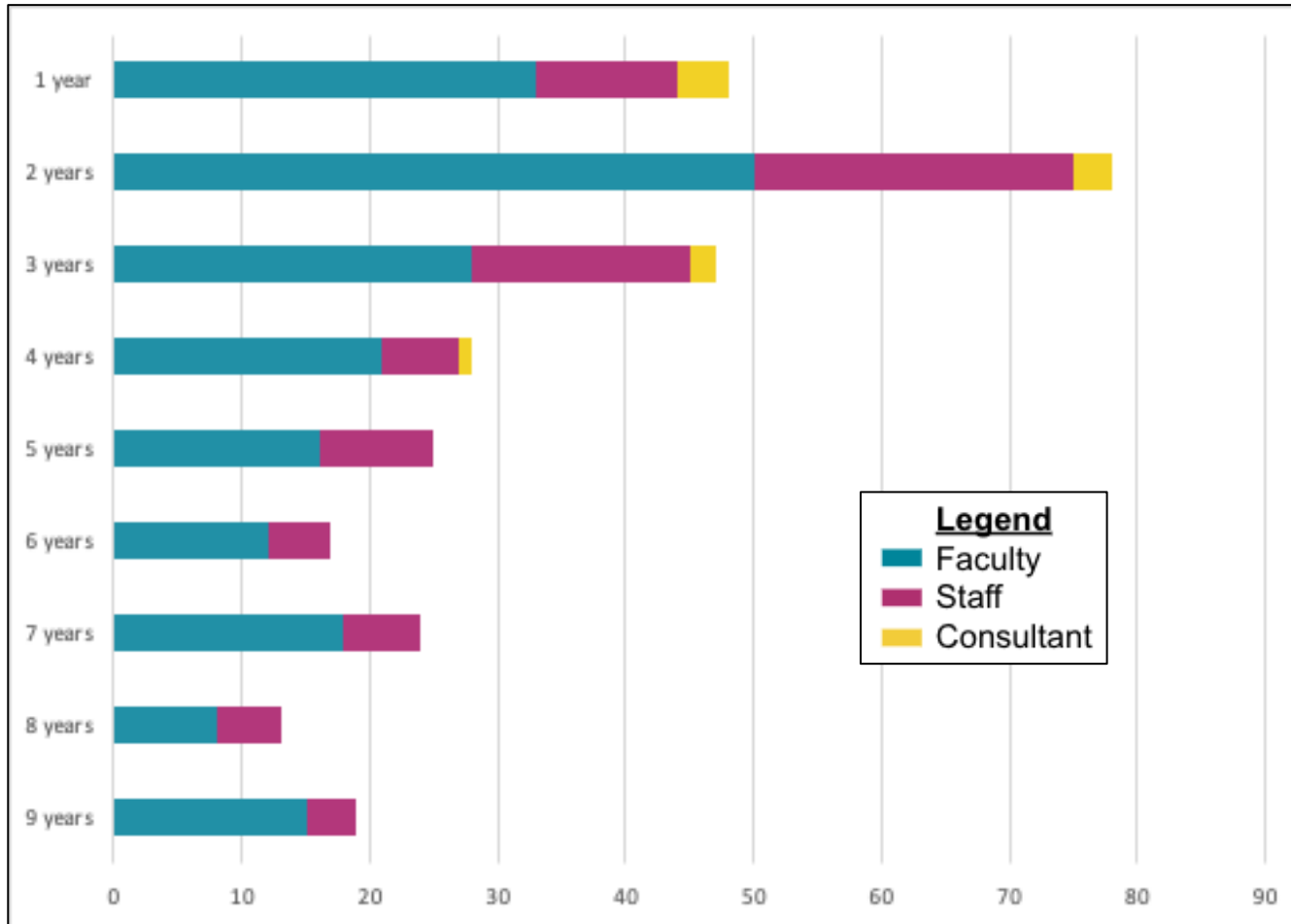
SFY17-SFY26

Mutual Investment and Commitment



Funding Source	Investment
Ohio Department of Medicaid/MedTAPP	\$21,315,454 (49%)
Ohio's 7 Medical Schools	\$22,185,947 (51%)
Total Investment	\$43,501,401

Cardi-OH Team Members Over Time



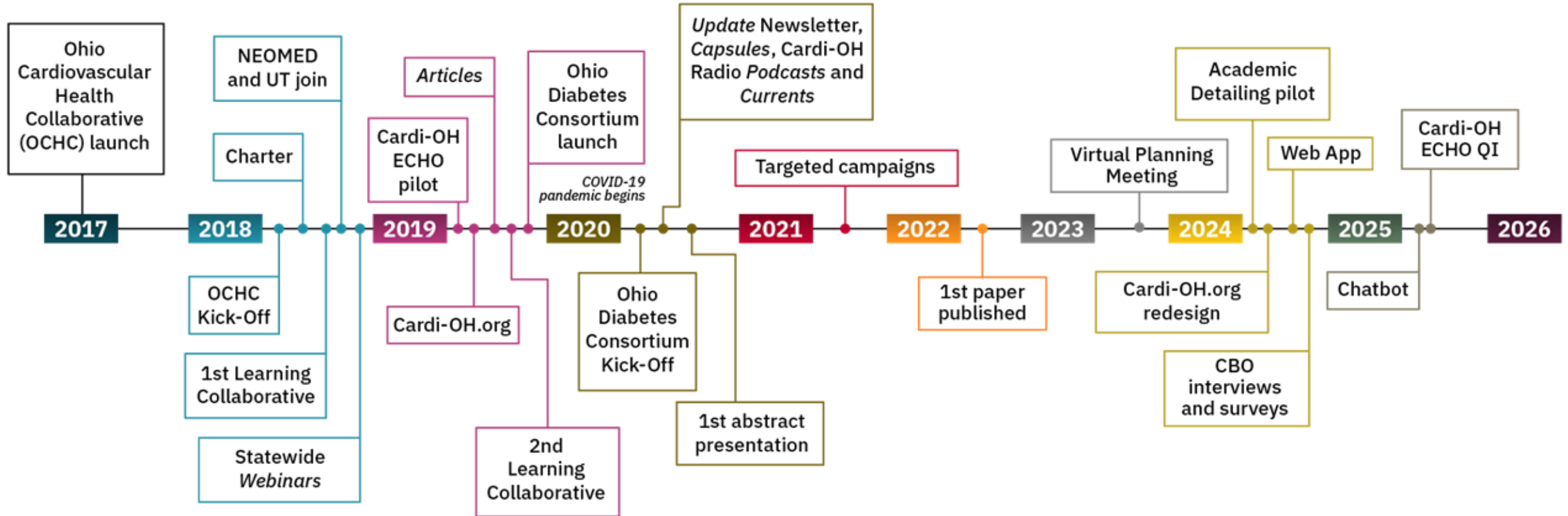
From 2017-2026,
Cardi-OH had a total of
300 team members
from 7 Schools of Medicine:

- 202 faculty
- 88 staff
- 10 consultants

Faces of Cardi-OH: 2017-2026



Timeline: Growth and Achievements

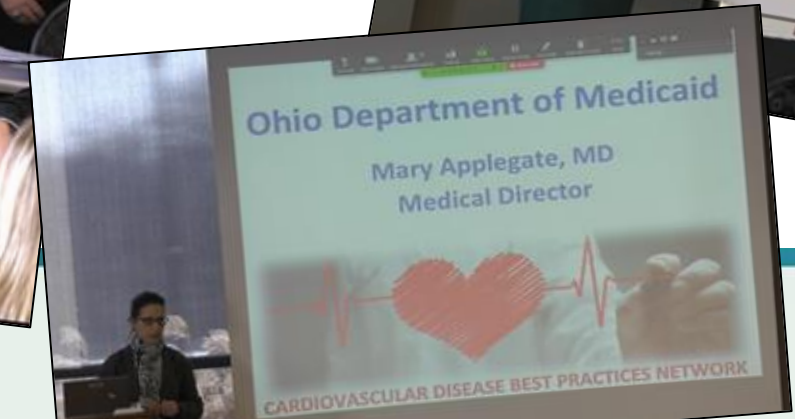
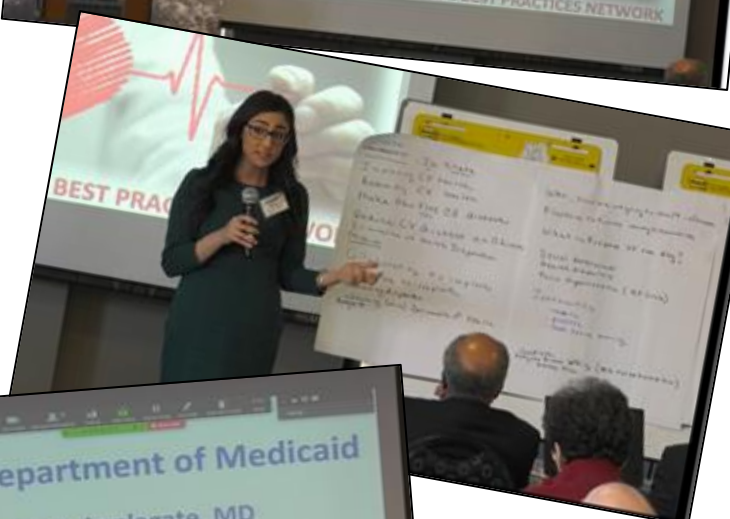


Cardi-OH Kick-Off: January 2018



Team Best Practices (BP) Members

CRNP	MD	MD	MD	MD
Jonathan T. Wright, MD, PhD, MPH	Kate Smith, MD, PhD, MPH, BC, PMP-PM	Charlotta A. Beverly, PhD	Alan Saperstein, MD	Michael Mchale, MD
Adam Pappalardo, PhD	Mary Trubka, PhD	Emily Swenson, PhD	John Moore, MD, JD	Anna Shattuck, MD
Wendy Wang, MD, MPH	Robert Aron, MD	Steve Cook, MD, MPH	Rebecca Springer, MD	Alexa Mangione, MPH, MSc, MEd, MPP
Alanna Curran, PhD	Cheryl Curran, PhD	Matthew Sandberg, MD		
Victor Anderson, MD, PhD	Shawna Smith, MD			
J. Brent Swanson, MD, PhD	Juliana Cook, MD, MPH, MEd			
Paulette Hagan, MD	Juliana Sandberg, MD			



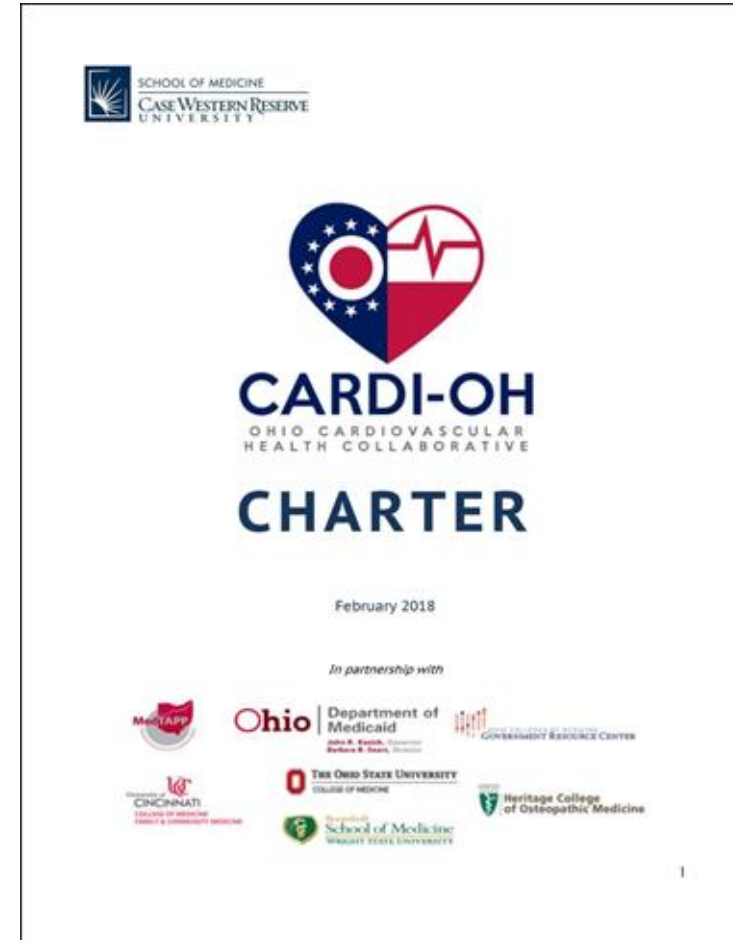
Charter Approved: 2018

Our Mission

To improve cardiovascular and diabetes health outcomes and eliminate health disparities, while improving patient and provider experiences.

Our Vision

For all Ohioans to reach their highest potential for cardiovascular and diabetes health.



Cardi-OH Success Metrics



- 1) Growth of a diverse group engaged with Cardi-OH in terms of geographic region and professional roles, disciplines, and sectors
- 2) Reach and quality of educational events and materials
- 3) Improvement in cardiovascular health metrics

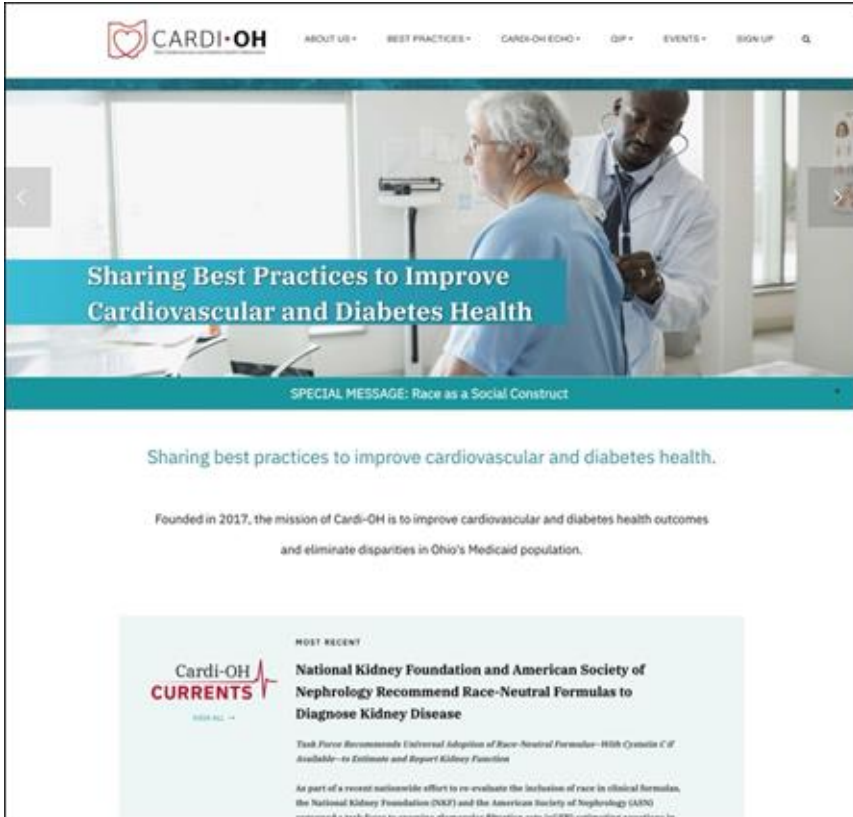
Cardi-OH Name and Brand



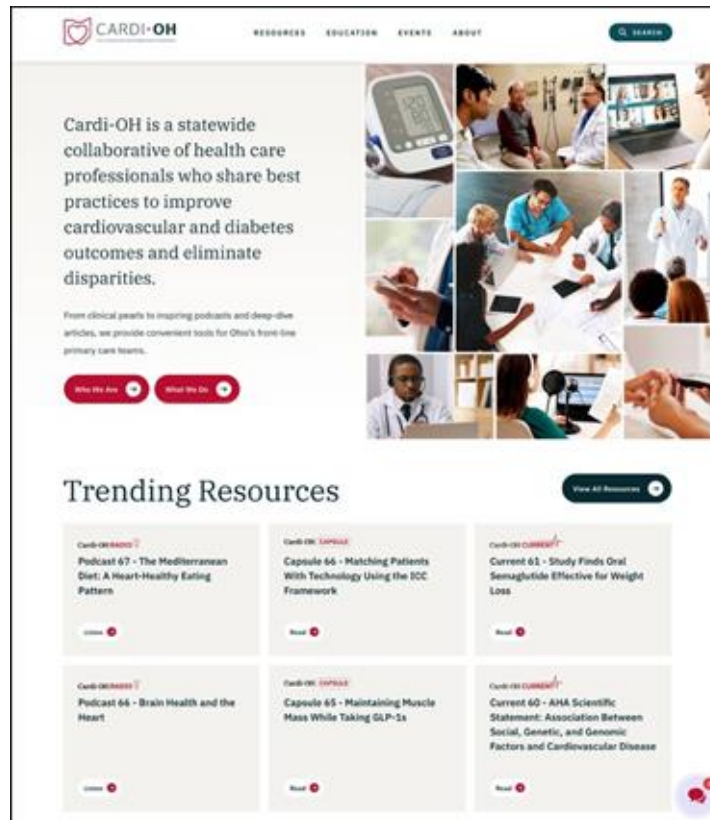
CARDIOVASCULAR DISEASE BEST PRACTICES NETWORK



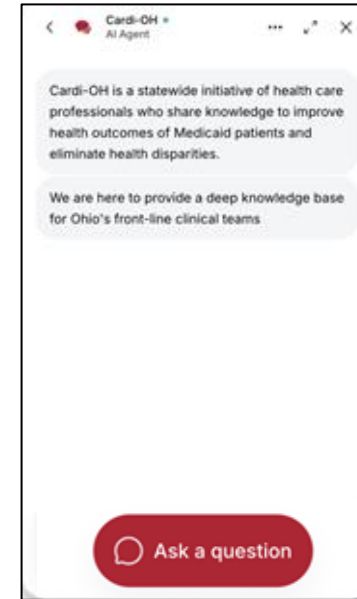
Cardi-OH.org: Then and Now



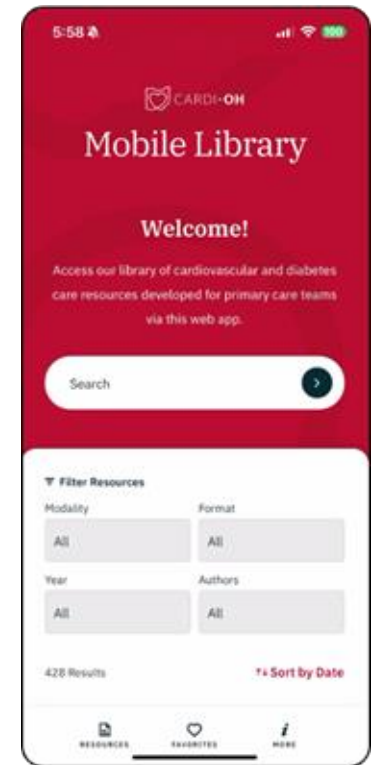
Then



Now



Chatbot



Web App

Cardi-OH Learning Collaborative: June 2018



Cardi-OH Learning Collaborative: May 2019



CARDI-OH
Ohio Cardiovascular and Diabetes Health Collaborative



Diabetes Consortium Kick-Off: January 2020



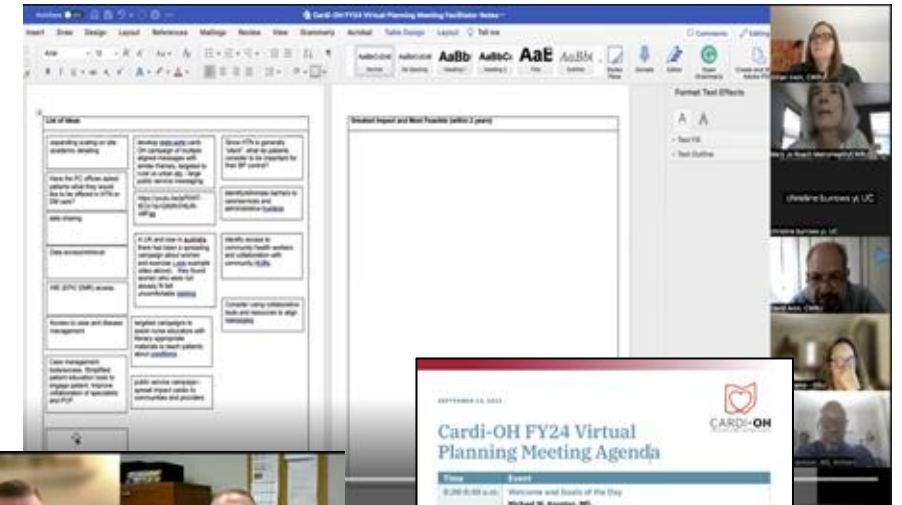
Cardi-OH Virtual Planning Meeting: September 2023



Convened 130 stakeholders for a FY24 Virtual Planning Meeting to identify high priority activities for the Statewide Collaborative over a two-year period.

Attendees represented:

- All 7 SOMs
- Regional Quality Improvement Hubs
- Ohio Department of Medicaid
- Ohio Colleges of Medicine Government Resource Center
- Ohio Medicaid Managed Care Plans
- Key community and professional organizations



Cardi-OH ECHO Hub Established: 2018



Cardi-OH ECHO Series: 2019-2026



Cardi-OH ECHO Series: 2019-2026

By the Numbers



- 12 Cardi-OH ECHO Series
- Participation
 - 71 unique primary care practices
 - 184 primary care team members
 - 41 subject matter experts
 - Representing all SOM regions
- 144 total hours spent in ECHO clinics

Cardi-OH ECHO Health Systems and Practices



Cardi-OH ECHO Clinics



Core Obesity Knowledge

- 2) Epidemiology and key drivers of the obesity epidemic
- 2.0 Demonstrate a working knowledge of the epidemiology of the obesity epidemic
- E.g. 2.2. The social, cultural, and other factors that have contributed to the obesity epidemic.

Case Discussion

Jose Tavares is the lead physician in a 12-provider primary care practice near Akron, OH. He wants to encourage patients with hypertension to self-monitor their BP to promote engagement and hypertension control.

- Questions for Discussion:
 - In plain language, how might you explain the importance of home monitoring to an individual patient?
 - What other measures would you take to ensure success of home monitoring?



Blood Pressure During Follow-up

	Ramipril	Amlodipine	Metoprolol	Low MAP Goal	Usual MAP Goal
SBP (mm Hg)	134	131	134	128*	141
DBP (mm Hg)	81	81	81	78*	85
MAP (mm Hg)	99	98	99	94*	104

*Significantly different between two blood pressure goals p<0.01

Wright et al. JAMA 2002; 288:2421



Medical comorbidity among individuals with chronic mental illness (CMI)

- CMIs such as recurrent depression, bipolar disorder and schizophrenia generally complicate general health outcomes
- CMI is often accompanied by additional mental health comorbidities such as substance abuse and PTSD
- CMI inflates costs
- CMI life-span reduced by 10-30 years.
- CMI have a 1.2 to 4.9 increase in mortality compared to age and sex-matched individuals from the general population resulting from DM, cardiovascular disease, and stroke.

Colton CW, Manderscheid RW. Preventing Chronic Disease 3: A42. 2006
 Whitman, K. L. et al. Psychiatric Services 61(11), 1213-1225, 2010
 Walker, E. R. et al JAMA psychiatry. 72(4), 334-341, 2015

Cardi-OH ECHO QI Series



Kick-Off Meeting: April 2025
 ECHO QI Monthly Clinics: May 2025-April 2026

QUALITY IMPROVEMENT Cardiovascular Series

Registration Now Open!
Cardi-OH.org/ECHO-QI/register

FACILITATORS:
 Gourham Reis, MD, FAHA & Aileen Caron, PhD
 Case Western Reserve University School of Medicine

DATES:
 April 2025 - May 2026
 ECHO QI Clinics on the first Thursday of each month, 8-9 a.m.

Cardi-OH is recruiting seven Ohio primary care practices to participate in an innovative quality improvement (QI) initiative using the Project ECHO model.

How it Works

- Practices design, implement, and evaluate a QI project that addresses an important problem in cardiovascular disease prevention or management.
- Monthly 1-hour virtual ECHO clinics featuring didactic presentations led by subject matter experts, followed by a discussion of practices' progress in QI efforts.
- Monthly data submission followed by a 1-hour QI coaching session to review your practice's individual QI project.

Why Join

- Professional development and continued learning.
- Increased QI knowledge and support from a dedicated coach.
- Expanded knowledge network and collegiality with practices across the state.
- Improved patient care delivery.
- No-cost CME credits available and support for MOC.
- Participation stipend.

In partnership with:

Founded in 2017, the mission of Cardi-OH is to improve cardiovascular and diabetes health outcomes and eliminate disparities in Ohio's Medicaid population. Visit Cardi-OH.org to learn more.

Register Now!
Cardi-OH.org/ECHO-QI/register

Questions?
ECHO-QI@Cardi-OH.org

JANUARY 2025

Practice Recruitment Information

Eligibility Requirements

- Serve at least 30% Ohio Medicaid OR 50% Medicaid, Medicare, and uninsured patients.
- Cannot be participating in the Regional QI Hub Quality Improvement Project.

Participation Requirements

- Develop and implement a new QI project that aligns with **Partnership for Quality Measures as part of the Core Quality Measures Collaborative**.
- Designate two project leads per practice.
- Participate in monthly activities, 1-hour ECHO QI clinics, 1-hour coaching sessions, and submit project data.

Timeline

March 2025	April 2025	May 2025 - April 2026	May 2026
<ul style="list-style-type: none"> Submit baseline practice data Complete practice baseline survey 	<ul style="list-style-type: none"> Attend virtual Kick-Off Meeting on 4/4/2025 Attend a 1-hour coaching session Submit monthly practice data 	<ul style="list-style-type: none"> Attend monthly ECHO QI clinics Attend monthly 1-hour coaching sessions Submit monthly practice data Submit required information for MOC and CME 	<ul style="list-style-type: none"> Complete program evaluation surveys

Register Now!
Cardi-OH.org/ECHO-QI/register

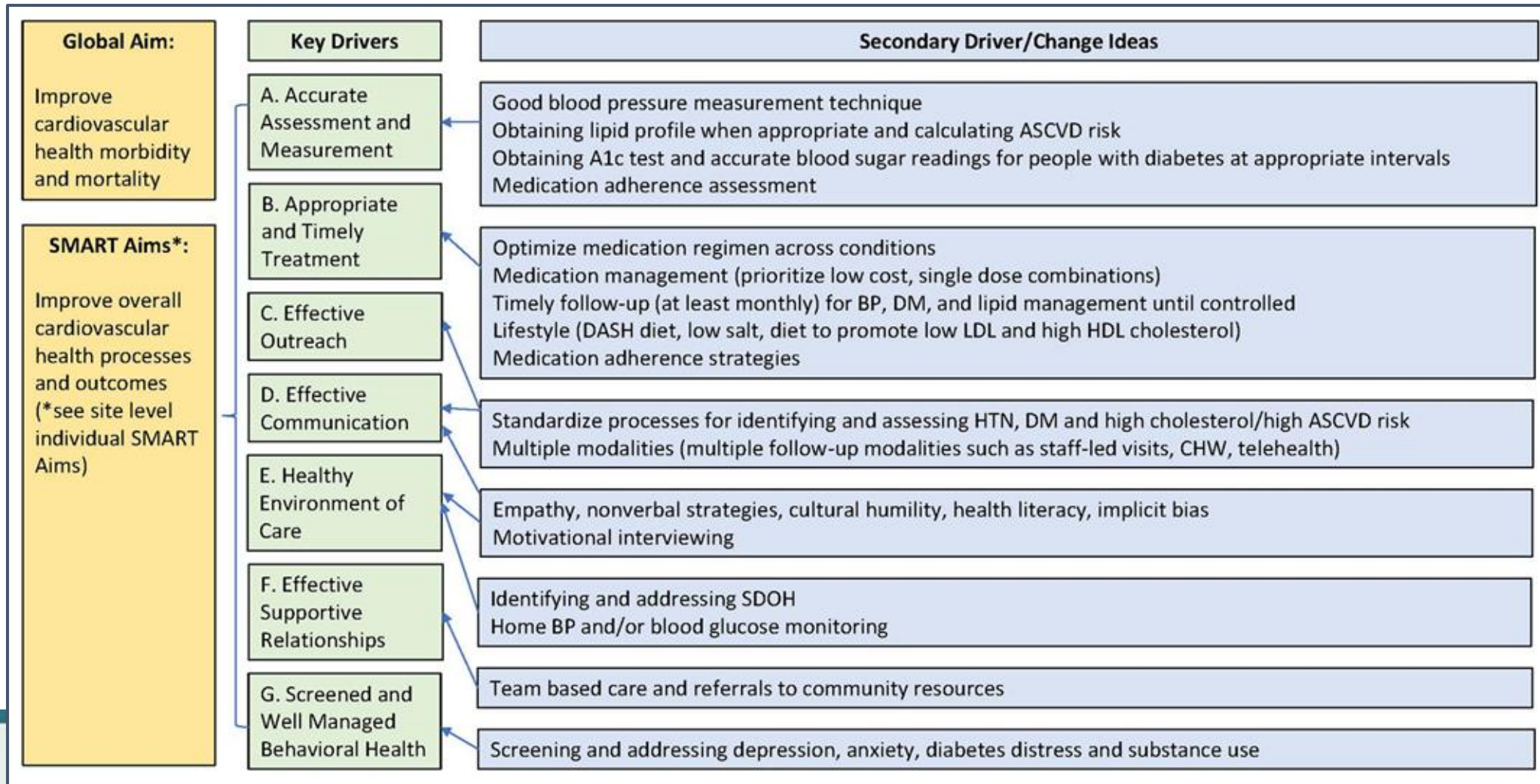
Questions?
ECHO-QI@Cardi-OH.org

JANUARY 2025

Spring 2025 Cardi-OH ECHO QI Cardiovascular Series Participant Sites

- 1 Erie County Community Health Center Sandusky**
- 2 Fisher-Titus Medical Center, Norwalk Primary Care Norwalk**
- 3 MetroHealth Middleburg Heights November Family Health Center Middleburg Heights**
- 4 Village of Healing Euclid**
- 5 East Liverpool City Hospital Family Medicine Residency Office East Liverpool**
- 6 The HealthCare Connection Cincinnati**

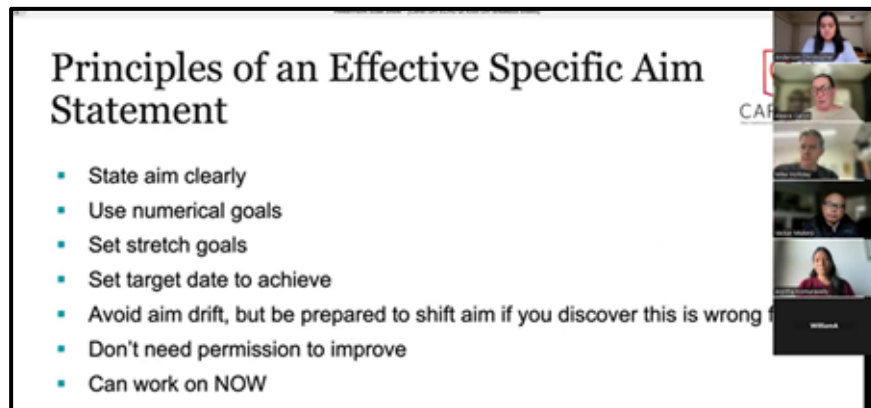
Overall Key Driver Diagram



ECHO QI Implementation & Innovations

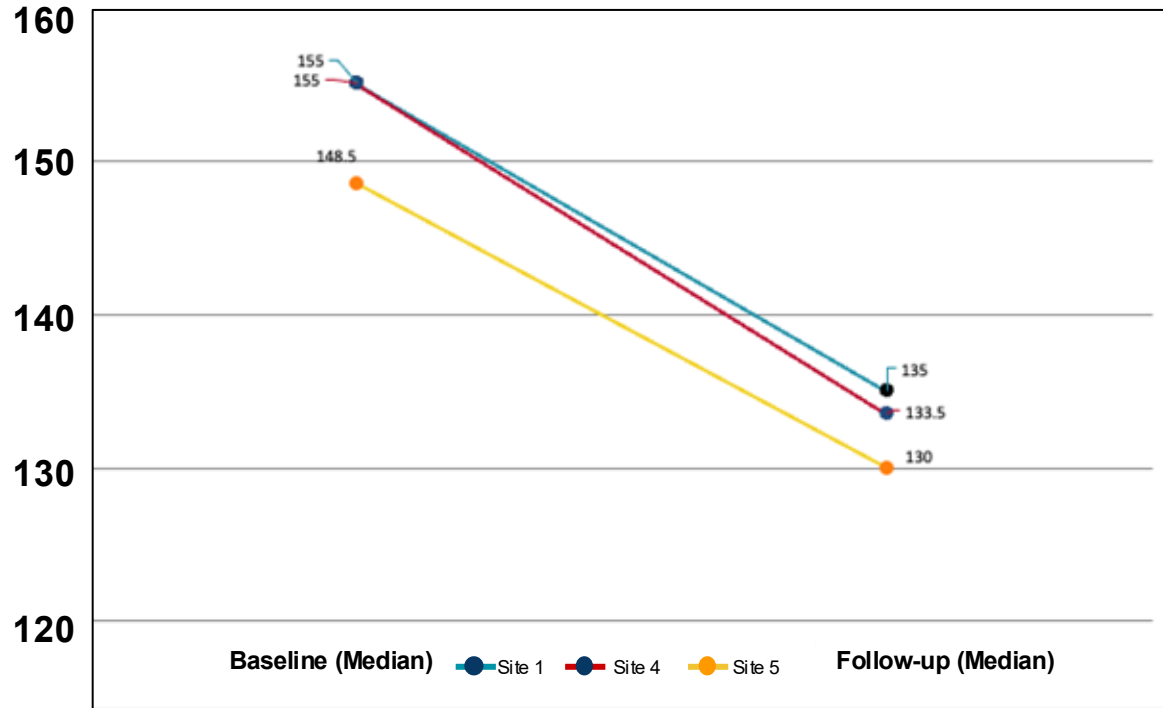


- Virtual Kick-Off Meeting
- Monthly:
 - ECHO QI Clinics
 - QI Coaching w/Clinical QI Coaches
 - Manual Data Submission
- Practices design their own QI projects on a range of CVD topics



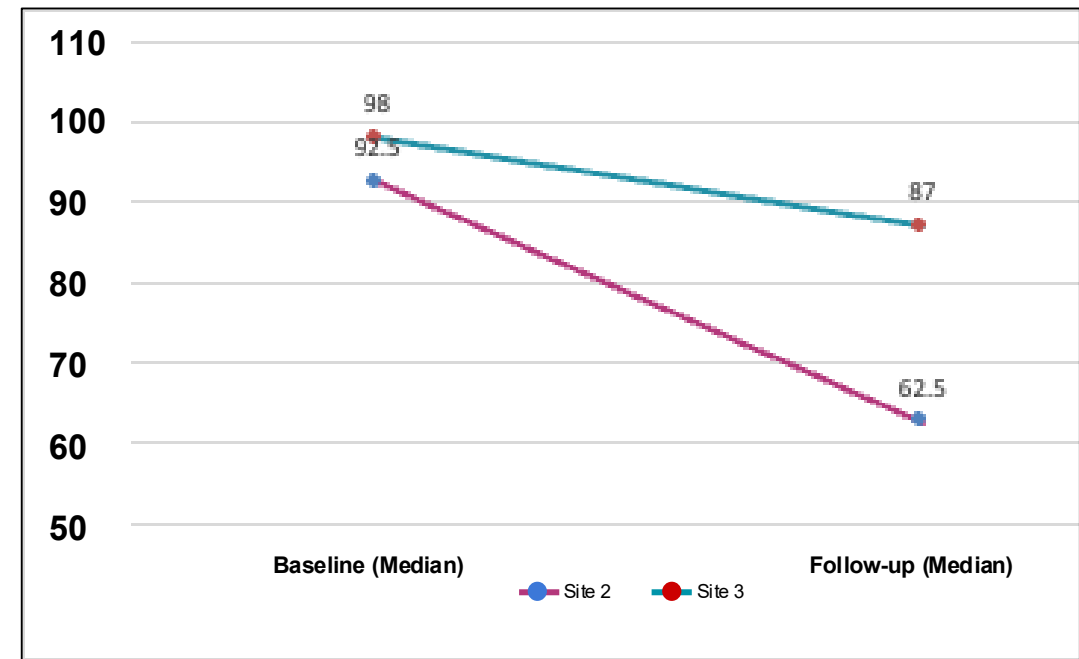
Outcome Measures

Blood Pressure

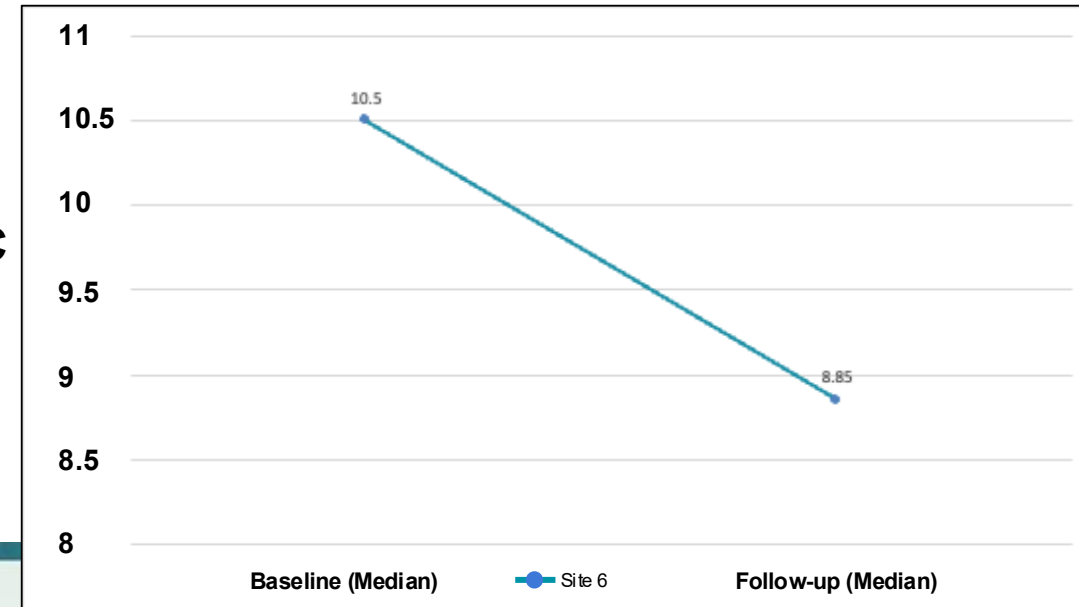


Note: downward trend shows improvement for all three clinical outcome measures

LDL



A1C



ECHO QI Participant Testimonials



“I always like it when providers when they ask why we have such good hypertension or diabetes rates. I like to tell that providers do follow the cardiovascular best practices and standard of care guideline. And I’ve said that since we’ve participated in our first Cardi-OH project. That’s why our hypertension and diabetes numbers are so great is because of Cardi-OH’s evidence-based practices.”

“...one of the positive things about the QI project was the Coach’s leadership in it and challenging us, and it was always very professional, very timely. I thought it was a great experience.”

“I felt like we got a lot of different perspectives. So, I thought that it was very helpful and I liked listening to everyone’s ideas.”

Building QI Capacity: Increased Knowledge of Clinical QI Coaches



“Learned much about QI process again, but also by working with [lead coach] was able to see in action the best practices used for QI in today’s world. The ECHOs were so useful to hear how others were tackling similar issues. Cardi-OH provided outstanding preparation, regularly teaching and feedback, and great relationships with our clinical partners. Thank you for doing this - will be utilizing within our own Medicaid-serving clinics.”

QI Coaching Skill Domain	Baseline Survey Mean	Exit Survey Mean
Considering local context for data and evaluation needs	3.5	4.8
Executing effective interpersonal skills for key stakeholder engagement	4.1	5.2
Motivating QI in a practice and among QI team members	4.0	5.3
Teaching and/or sharing QI tools and methods	3.3	5.1
Assisting practices in obtaining and using data to evaluate QI	3.1	4.9
Supporting QI spread	3.7	5.2







Note: scores could range from 1 “not at all comfortable or knowledgeable” to 6 “extremely comfortable or knowledgeable”

Team Best Practices

A curated library with
hundreds of
cardiovascular and
diabetes best practices

About Team Best Practices

Experts research and disseminate best practices for primary care providers to use in clinical care.

 Hypertension Management Access online evidence-based hypertension resources. READ MORE »	 Diabetes Management Access online evidence-based diabetes resources. READ MORE »	 Lifestyle Read current information about improving cardiovascular health through lifestyle. READ MORE »
 Social Determinants of Health View materials highlighting the connection between social factors and health outcomes. READ MORE »	 Patient Adherence Review content on patient adherence applicable to the primary care setting. READ MORE »	 Effective Teams Review resources designed for primary care practices to improve clinical operations and clinical team engagement. READ MORE »

Cardi-OH Trivia: Can You Name the Most Downloaded Article?

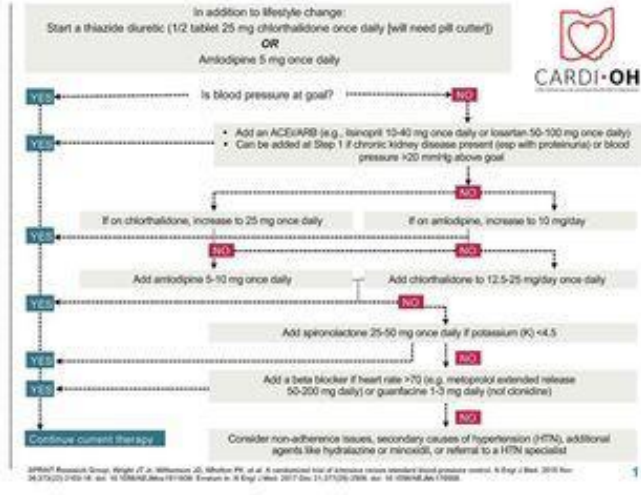


Modified SPRINT Hypertension Algorithm: Monotherapy Start

- This algorithm was recommended in Systolic Blood Pressure Intervention Trial (SPRINT), with chlorthalidone the preferred thiazide-like diuretic, especially for African American patients.
- Non-African American patients could also start with either angiotensin-converting enzyme inhibitor (ACEi) or angiotensin receptor blocker (ARB)
- Very effective in achieving even systolic blood pressures < 120 mmHg
- No significant disparity in blood pressure lowering or outcome benefit similar across race/ethnicity was seen in the SPRINT trial
- May be better option in practices with large numbers of African American hypertensives since uses chlorthalidone rather than hydrochlorothiazide (HCTZ) as initial therapy

The Ohio Cardiovascular & Diabetes Health Collaborative is a unit of the Ohio Department of Health and administered by the Ohio College of Podiatric Medicine and Health Sciences. The views expressed in this document are solely those of the authors and do not represent the views of the Ohio or federal government programs.

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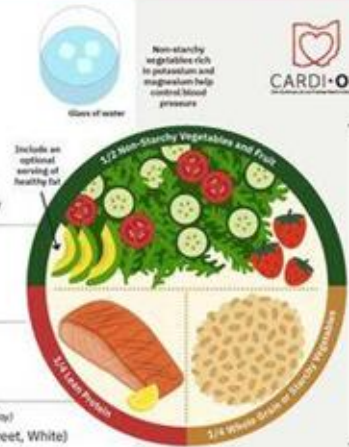


UPDATED MAY 2025

Building a DASH Diet Plate

Contributing authors on behalf of Team Best Practices:
 Eileen Seeholzer, MD, MS, Case Western Reserve University
 Kate Gawlik, DNP, RN, APRN-CNP, The Ohio State University
 Sarah McAleer, HEA, RD, LD, Case Western Reserve University

- Non-Starchy Vegetables (3-5 servings per day or more)**
 - * Broccoli
 - * Spinach
 - * Cabbage
 - * Tomatoes
 - * Carrots
 - * Cauliflower
 - * Cucumbers
 - * Lettuce
 - * Mushrooms
 - * Beets
 - * Asparagus
 - * Peppers
- Fruit (4-5 servings per day)**
 - * Apples
 - * Strawberries
 - * Grapes
 - * Melon
 - * Orange
 - * Blueberries
 - * Banana
 - * Mango
 - * Pear
- Whole Grains or Starchy Vegetables (3-8 servings per day)**
 - * Quinoa
 - * Potatoes (Sweet, White)
 - * Bread (Whole Grain, High Fiber)
 - * Lentils
 - * Oatmeal
 - * Beans (Black, Kidney, Pinto, Lima)
 - * Peas (Green, Black-Eyed)
 - * Brown Rice
 - * Whole Wheat Pasta
 - * Corn
 - * Whole Grain Cereal
- Lean Protein (3-4 servings per day)**
 - * Skinless Chicken or Turkey (white meat preferred)
 - * Pork Tenderloin
 - * Egg, Egg White, or Egg Substitutes
 - * Beef Sirloin or Tenderloin
 - * Fish (Salmon, Cod, Halibut, Sole, Tilapia)
 - * Ground Beef (93% lean)
- Meatless (plant protein)**
 - * Beans (Black, Kidney, Pinto, Lima)
 - * Lentils
 - * Soy (Edamame, Tofu)



Serving sizes:
 1 cup of leafy or 1/2 cup raw or cooked per serving of non-starchy vegetables and fruit
 1/2 cup, 1 ounce slice, or 1 ounce of cereal per serving of whole grains or starchy vegetables
 1 ounce per serving of lean protein

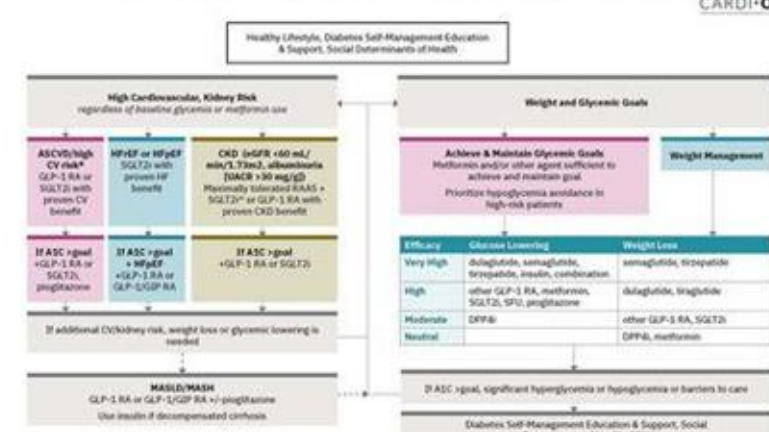
- Add throughout the day:**
 - * 2-3 servings of low-fat dairy
 - * 2-3 servings of healthy fats and oils
 - * Water as a main beverage
- Add throughout the week:**
 - * 4-5 servings per week of nuts, seeds, and legumes

Nutrition Facts	
Amount Per Serving	
	% Daily Value*
Calories 230	
Total Fat 10g	20%
Total Carb 40g	80%
Total Protein 10g	20%
*Percent Daily Values are based on a diet of other people's health problems.	

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For more information head to cardi-oh.org

Modified ADA Diabetes Algorithm: Pharmacologic Treatment



This algorithm is for patients with type 2 diabetes mellitus who are not pregnant or breastfeeding. It is not intended for use in patients with type 1 diabetes mellitus, gestational diabetes mellitus, or prediabetes. The views expressed in this document are solely those of the authors and do not represent the views of the Ohio or federal government programs.

For more information head to cardi-oh.org

Cardi-OH Trivia: Can You Name the Most Downloaded Capsule?



CAPSULE

UPDATED MAY 2025 – CAPSULE 3

Home Blood Pressure (BP) Monitoring: Practical Instructions for Patients

CONTRIBUTING AUTHORS: Sheri Babin, MD, MPH, Steven Choung, MD, MPH, and Jackson T. Knight, Jr., MD, PhD, on behalf of Team Best Practices

How many blood pressure (BP) readings should a patient take at home to inform a hypertension treatment decision?

Home BP monitoring is an important step in the evaluation and management of hypertension. Clinicians can facilitate more meaningful home BP readings by educating patients on how to measure their BP accurately.

Cardi-OH has developed practical instructions for accurate home BP monitoring to share with patients. Consider adapting these tips for use in clinical after-visit instructions.

When Should You Measure Your Blood Pressure?

In the 3 to 5 days before your next visit, take your blood pressure according to the schedule below and record all blood pressure readings in a log.¹ If your BP medication is changed, check weekly starting two weeks after the change and continuing until the next visit.²

Each day, take:

Two blood pressure readings in the morning, before taking your medications and two blood pressure readings in the evening, before going to bed.³

How to Take Your Blood Pressure at Home:

1. Do NOT smoke, exercise, or drink caffeine in the 30 minutes before checking your blood pressure.
2. Sit in a chair with your back supported and feet flat on the floor.
3. Rest your arm on a table at heart level.
4. Sit at rest for at least 5 minutes before taking the first blood pressure reading.
5. Do NOT talk during the 5 minute rest period or while taking your blood pressure.
6. Wait 1 minute before taking the second reading each time (morning and evening).
7. Write down the two readings along with the date and time.

Remember!

Bring both your log and home blood pressure monitor to each clinic visit to be checked against your doctor's office machines.



REVIEWED SEPTEMBER 2025 – CAPSULE 29

Using SMART Goals to Promote a Healthy Body Weight

CONTRIBUTING AUTHORS: Jenna J. Wilcox, PhD, Case Western Reserve University; Karen Rilling, MD, MS, Cleveland State University; Colin Cross, MD, Case Western Reserve University, on behalf of Team Best Practices

Weight loss can be achieved and maintained by making lifestyle changes that benefit both weight and overall health. When patients express a desire to lose weight or improve overall health, clinicians can guide patients in aligning their goals with each of the SMART (Specific, Measurable, Achievable, Relevant, Time-Based) goal criteria.

- Ask the patient about their reasons for wanting to lose weight and express empathy by reflecting on their responses. Be aware that the patient may be sensitive to judgment or negativity, as many have experienced weight-based stigma in health care settings.¹
- Although it is common for patients to hope to achieve significant weight loss, advise that even a modest loss of 5% to 10% is likely to produce health benefits, including improvements in blood pressure, cholesterol, and glucose levels.²⁻⁴
- Explain SMART goal setting and its value. Invite the patient to choose one lifestyle behavior to implement. Evidence-based recommendations include:⁵⁻⁸
 - Eat a protein-rich breakfast as the biggest daily meal.
 - Drink only water, black coffee, or plain tea.
 - Stop all food intake at 7 p.m.
 - Exercise for 30 minutes daily.
- Inquire about anticipated obstacles to implementation. Using motivational interviewing techniques, elicit the patient's ideas about overcoming obstacles and assist with contingency planning.
- Plan for follow-up in 4 weeks to discuss SMART goal progress.
- Optional: Assist the patient in setting weekly and monthly weight loss goals. Weight loss should not exceed 2 pounds per week. Inquire about support for weight loss efforts. If resources are available, offer support from a community health worker or a member of the practice staff.

For more information, access Cardi-OH's patient handout on [SMART goals](#) and expanded resources on [motivational interviewing](#) and [healthy lifestyle changes](#).



CAPSULE

Specific: I plan to drink no other beverages besides water and black coffee on at least four of the next seven days.

Measurable: Each day that I achieve my goal, I will circle the date on my calendar before going to bed.

Achievable: This goal seems realistic and I believe that I can achieve it.

Relevant: Achieving this goal can help me lose weight and improve my health, which are important to me.

Time-Based: I plan to work on this goal for the next seven days.

REVIEWED DECEMBER 2024 – CAPSULE 5

5 Pearls for Motivational Interviewing

CONTRIBUTING AUTHORS: Owen Bricker, MD, Wright State University; James J. Wornat, PhD, MHA, Case Western Reserve University; Shreeen Khoury, MD, MPH, Case Western Reserve University, on behalf of Team Best Practices

The foundation of cardiovascular health improvement consists of healthy lifestyle behaviors such as getting regular exercise, avoiding smoking, eating a healthy diet, and taking medications as prescribed. However, it can often be challenging to guide patients toward meaningful behavior changes.

Motivational interviewing is an evidence-based conversational approach used to explore and strengthen a patient's own motivating factors toward behavior change.¹

Motivational interviewing seeks to understand circumstances from the patient's point of view, because providing information to patients is important but not typically sufficient to drive behavior change.² Change is driven by the patient's desire for consistency between their goals and values and their behavior. In motivational interviewing, the clinician guides the patient in resolving their ambivalence by eliciting their motivation for healthy behavioral changes.

For more information, access Cardi-OH's expanded resource on [motivational interviewing](#).

Consider incorporating these skills into your clinical conversations as you work with patients toward better cardiovascular health:

Open-Ended Questions **TRY ASKING**
What is your understanding of how smoking affects your blood pressure?
These cannot be answered with a simple "yes" or "no"

INSTEAD OF
Do you see a connection between your smoking and your recent high blood pressures?

Evoke Change Talk **TRY ASKING**
If you really decided to quit smoking, how could you do it? What's the downside of how things are now?
Change talk is any argument the patient makes for change

INSTEAD OF
Why haven't you changed? Why do you have to smoke?

Ask-Tell-Ask **TRY ASKING**
How do you feel about your smoking? Quitting smoking is one of the best ways you can reduce your risk of heart attack and stroke. What questions or concerns do you have for me?
This elicits patient thoughts or concerns both before and after providing a key message

INSTEAD OF
You need to quit smoking.

0-10 Scales **TRY ASKING**
On a scale of 0-10, with 0 being not at all ready, and 10 being ready today, how ready are you to make a quit-smoking attempt? What made you say 3 instead of 3? What might it take for you to move to a 6 or 7?
These can assess importance, readiness to change, or confidence

INSTEAD OF
You don't seem ready to quit yet.

Reflective Listening **TRY STATING**
I am concerned about the need to add new medicines.
This summarizes what the patient has said, or restates the meaning of what they express

INSTEAD OF
I am prescribing a new medicine for your blood pressure.



CAPSULE

69 Capsules Since January 2020

3,839 Total Lifetime Downloads



CARDI•OH
Ohio Cardiovascular and Diabetes Health Collaborative

The collage features numerous 'Capsule' documents, each with a blue header and the CARDI-OH logo. Visible titles include:

- RECEIVED DECEMBER 2024 - CAPSULE 60: Tips to Improve Family Support for Heart-Healthy Living
- RECEIVED DECEMBER 2024 - CAPSULE 59: MAELD: An Overview of Metabolic Dysfunction-Associated Steatotic Liver Disease
- RECEIVED DECEMBER 2024 - CAPSULE 58: Using the 4 C's to Facilitate Patient Conversations and Improve Understanding
- RECEIVED DECEMBER 2024 - CAPSULE 57: Using the PETAL Framework to Advance Health Equity
- RECEIVED DECEMBER 2024 - CAPSULE 56: Five Pearls for Motivational Interviewing
- RECEIVED DECEMBER 2024 - CAPSULE 55: Addressing Medication Adherence to Improve Health Outcomes
- RECEIVED DECEMBER 2024 - CAPSULE 54: Medication Access: Assisting Patients With Financial Barriers
- RECEIVED DECEMBER 2024 - CAPSULE 53: Understanding A1C Targets and Possible Factors for Discordance
- RECEIVED DECEMBER 2024 - CAPSULE 52: Communicate About Cardiovascular Health
- RECEIVED DECEMBER 2024 - CAPSULE 51: One Simple Step to Improve Medication Adherence for Blood Pressure Control
- RECEIVED DECEMBER 2024 - CAPSULE 50: Using the Teach-Back Method to Improve Patient Understanding
- RECEIVED DECEMBER 2024 - CAPSULE 49: Managing Hypertension in Adults With ASCVD
- RECEIVED DECEMBER 2024 - CAPSULE 48: Implementing a Low Sodium DASH Diet: Practical Tips for Counseling Patients
- RECEIVED DECEMBER 2024 - CAPSULE 47: Communicate with Persons with a Disability
- RECEIVED DECEMBER 2024 - CAPSULE 46: The SHARE Approach (Seek, Help, Assess, Reach, Evaluate)

Cardi-OH Trivia: Can You Name the *Cardi-OH Radio* Podcast with the Most Listens?



Cardi-OH **RADIO** 

Podcast 1 - Addressing the Quadruple Aim in Health Care

Peter Pronovost, MD, MPH

Cardi-OH **RADIO** 

Podcast 5 - Medication Adherence: A Driver of Patient Outcomes

Marilee Clemons, PharmD
Sarah Aldrich Renner, PharmD
Nicholas Horen, MD

520 total listens

Cardi-OH **RADIO** 

Podcast 28 - Adaptive Leadership: An Essential Tool for Effecting Change

Peter Pronovost, MD, MPH

69 *Cardi-OH Radio* Podcasts Since March 2020



CARDI•OH
Ohio Cardiovascular and Diabetes Health Collaborative

15,372 Total Lifetime Listens



Cardi-OH RADIO  Podcast 49 - Understanding the Link Between Migraine and Cardiovascular Disease

Cardi-OH RADIO  Podcast 4 - Disparities in Cardiovascular Disease and Diabetes: Implications for Practice

Cardi-OH RADIO  Podcast 30 - Air Pollution Exposure and the Heart

Cardi-OH RADIO  Podcast 67 - The Mediterranean Diet: A Heart-Healthy Eating Pattern

Cardi-OH RADIO  Podcast 57 - Pediatric Hypertension: An Overview for Primary Care

Cardi-OH RADIO  Podcast 42 - Mindful Medicine: Integrating Mindfulness and Meditation in Primary Care

Cardi-OH RADIO  Podcast 21 - Talking With Our Patients: Insulin Initiation and Administration

Cardi-OH RADIO  Podcast 10 - Taking Care of the Heartland: Rural Telehealth During COVID-19

Cardi-OH RADIO  Podcast 14 - The Top Six Things Endocrinologists Wish Every Primary Care Provider Knew

Cardi-OH RADIO  Podcast 3 - Hypertension Management in the Era of Telehealth

Cardi-OH RADIO  Podcast 44 - Obesity and Weight Loss Management: Surgical Interventions, Part 2

Cardi-OH RADIO  Podcast 35 - Sleep Disorders and the Heart

Cardi-OH RADIO  Podcast 26 - Kicking the Habit: Partnering With Patients to Treat Tobacco Dependence

Cardi-OH RADIO  Podcast 62 - Updates in ASLD and MASH: What Providers Need to Know

Cardi-OH RADIO  Podcast 23 - Quality Improvement in Clinical Practice: How to Tell Your Story

Cardi-OH RADIO  Podcast 47 - Overcoming Barriers to Continuous Glucose Monitoring Use with Your Patients

Cardi-OH RADIO  Podcast 33 - Using Teach-Back Method to Improve Patient Understanding

Cardi-OH RADIO  Podcast 37 - What I Want My Health Care Team to Know About Having a Disability

Cardi-OH Trivia: Can You Name the Most Viewed *Current*?



Cardi-OH **CURRENT**

Current 42 - AGA Update on the Management of GLP-1 RA for Endoscopic Procedures

Cardi-OH **CURRENT**

Current 47 - AHA Recommends New Terminology and Personalized Approach for Managing Elevated BP in Inpatient Settings

2,582 total views

Cardi-OH **CURRENT**

Current 57 - 2025 ACC/AHA Guideline for High Blood Pressure in Adults

63 Currents Since July 2020

12,985 Total Lifetime Views



CARDI•OH
Ohio Cardiovascular and Diabetes Health Collaborative

Cardi-OH CURRENT
Current 61 - Study Finds Oral Semaglutide Effectively Promotes Weight Loss

Cardi-OH CURRENT
Current 16 - Report Highlights Negative Impact of COVID-19 Pandemic on U.S. Obesity

Cardi-OH CURRENT
Current 5 - Prospective Cohort Study Finds Both Artificially Sweetened Beverages & Sugary Drinks Associated with Increased Cardiovascular Disease Risk

Cardi-OH CURRENT
Current 20 - Health Workers and Telehealth: Improving A1C Levels in Patients with Diabetes

Cardi-OH CURRENT
Current 23 - Update on Diagnosis and Management of Nonalcoholic Fatty Liver Disease

Cardi-OH CURRENT
Current 22 - Update on E-Cigarettes and Cardiovascular Disease Risk

Cardi-OH CURRENT
Current 56 - Updates from the U.S. Dietary Guidelines Advisory Committee's Scientific Report

Cardi-OH CURRENT
Current 38 - Elevated Systolic Blood Pressure in Infancy Linked to CVD

Cardi-OH CURRENT
Current 43 - Pediatric Hypertension Doubles the Risk of Major Cardiovascular Adulthood

Cardi-OH CURRENT
Current 52 - Statins Reduce Liver Cancer and Decompensation Risk in Patients with Chronic Liver Disease

Cardi-OH CURRENT
Current 12 - American College of Cardiology Releases Guidance to Address ASCVD Risk in Patients with Hypertension

Cardi-OH CURRENT
Current 7 - Interprofessional Collaborative Practice Improves HbA1C and Blood Pressure

Cardi-OH CURRENT
Current 46 - Blood Test for Three Biomarkers Predicts Cardiovascular Risk in 30-Year-Olds

Cardi-OH CURRENT
Current 27 - Older Adults Frequently Undertreated for Hypertension

Cardi-OH CURRENT
Current 59 - Key Updates from the 2026 ADA Standards of Care

Cardi-OH CURRENT
Current 36 - SELECT Trial: Semaglutide Reduces Cardiovascular Risk in Patients With Overweight/Obesity and CVD

Cardi-OH CURRENT
Current 32 - Update on Chronic Kidney Disease in People With Diabetes

Cardi-OH CURRENT
Current 9 - Adverse Pregnancy Outcomes Increase Cardiovascular Disease Risk Factors and Development

16 Statewide Webinars Since November 2018



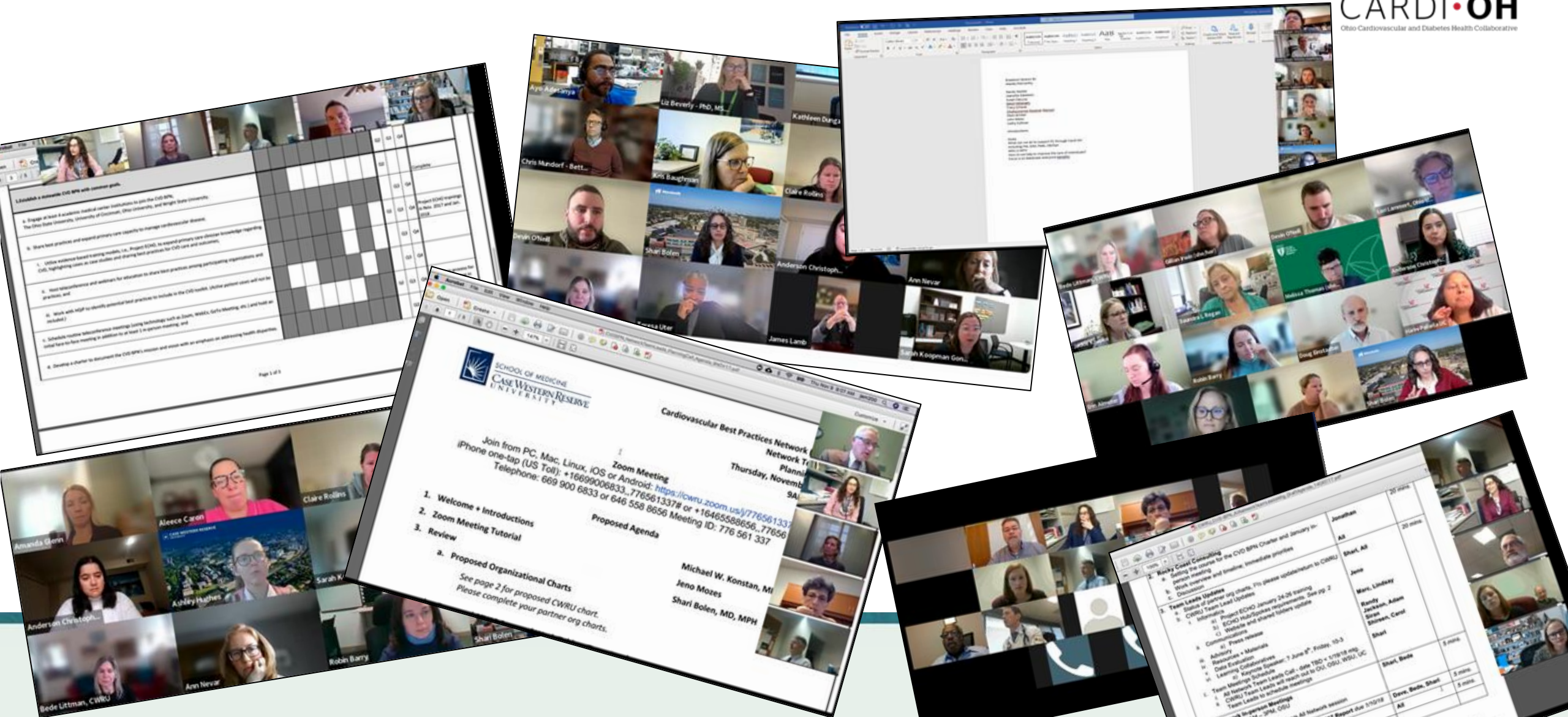
Cardi-OH Trivia: Can You Name the Webinar With the Highest Attendance?



1. **DASH Diet**
Randy Wexler
2. **Behavioral Health**
Trygve Dolber
3. **Community Health Workers**
Elizabeth A. Beverly & Melissa K. Thomas
4. **T2D in Adolescents**
Rose Gubitosi-Klug & Erika Lundgrin
5. **Race and Cardiovascular Health**
Herman A. Taylor, Jr.
6. **Remote Monitoring for Diabetes**
Kathleen Dungan
7. **COVID-19 and Cardiovascular Health**
Tamanna K. Singh
8. **Weight Management and Diabetes**
Benjamin O'Donnell
9. **Heart Health and Sleep**
Jennifer Molano
10. **Heart Failure**
Mark E. Dunlap
11. **Fatty Liver Disease**
Lanla F. Conteh
12. **Social Determinants of Health**
Rachel Gold
13. **Prevention of CVD in Women**
Leslie Cho
14. **Food Insecurity**
David H. Holben
15. **Brain Health**
Robert B. Saper
16. **Tackling Adherence Challenges**
M. Robin DiMatteo

336 attendees

So Many Zoom Meetings!



**SCHOOL OF MEDICINE
CASE WESTERN RESERVE
UNIVERSITY**

Zoom Meeting
Join from PC, Mac, Linux, iOS or Android: <https://cwrw.zoom.us/j/776561337>
iPhone one-tap (US Toll): +16699006833, 776561337# or +16465588656, 77656
Telephone: 669 900 6833 or 646 558 8656 Meeting ID: 776 561 337

Thursday, November 11, 2021 10:00 AM - 11:00 AM

Proposed Agenda

- Welcome + Introductions
- Zoom Meeting Tutorial
- Review
 - Proposed Organizational Charts
See page 2 for proposed CWRU chart.
Please complete your partner org charts.

Michael W. Konstan, M.D.
Jeno Mozes
Shari Bolen, MD, MPH

Weekly Case Counting

Setting the course for the CVD BPN Charter and January 1st period meeting

- Work overview and timeline, immediate priorities
- Discussion

Team Leads Updates

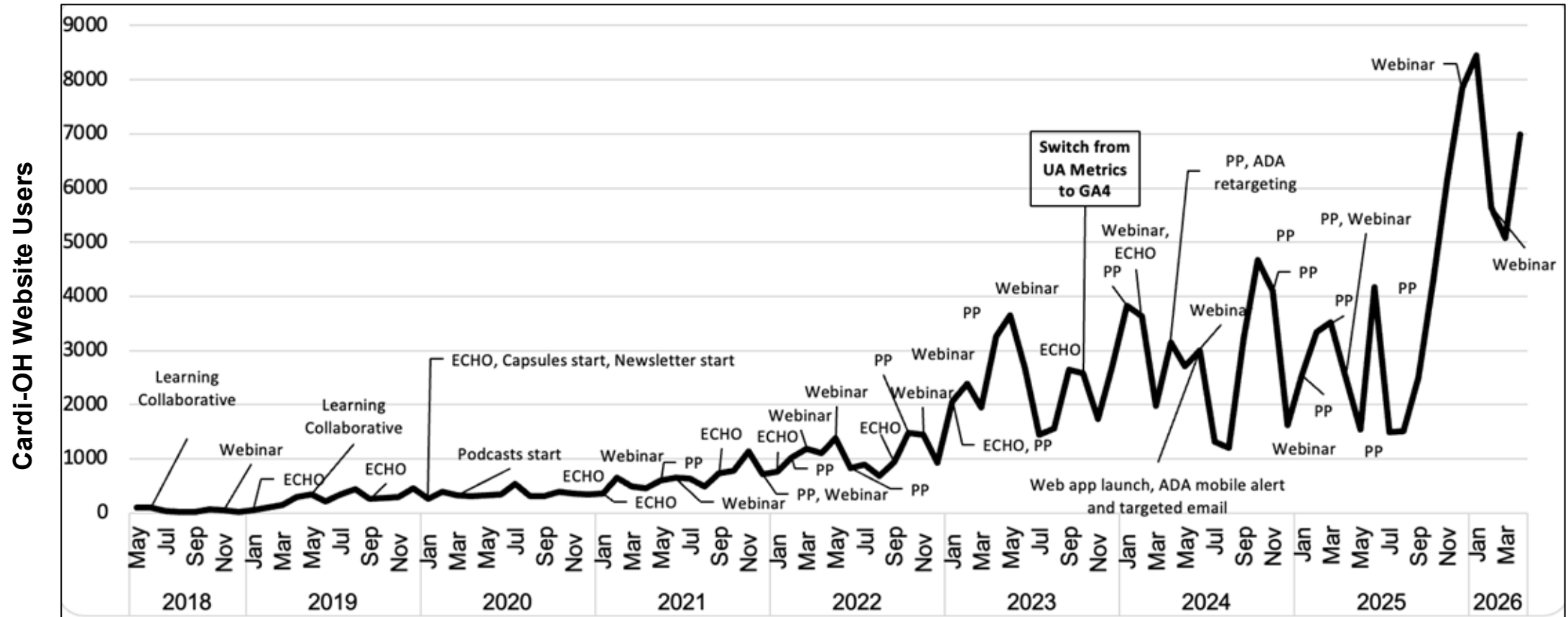
- Scope of partner org charts, FYI please update them to CWRU
- CWRU Team Lead Updates
 - Project ECHO January 24-26 training
 - ECHO Hub/Spoke Implementation. See pg. 2
 - Website and shared history visible
- Completions
 - Press release

Team Meetings

- Advisory
 - Resources + Minutes
 - Data Evaluation
 - Learning Collaboratives
 - Keynote Speaker: 7 June 8th, Friday, 10-3
- All Training Team Leads Call - date TBD + 1/18/21 wpt.
- All Training Team Leads will report out to OSU, OSU, WCU, UC
- CWRU Team Leads will report out to OSU, OSU, WCU, UC
- Team Leads to include meetings
- Supervisor Meetings
- All network session
- Report due 1/18/21



Task	Assignee	Duration
Website and shared history visible	Shari, All	20 mins
Project ECHO January 24-26 training	Jeno	20 mins
ECHO Hub/Spoke Implementation	Mari, Lindsay	20 mins
Website and shared history visible	Randy Jackson, Adam Berez Shivers, Carol	20 mins
Press release	Shari	5 mins
Advisory	Shari, Bode	5 mins
All Training Team Leads Call	Dave, Bode, Shari	5 mins
Supervisor Meetings	All	5 mins

Cardi-OH.org Reach and Engagement



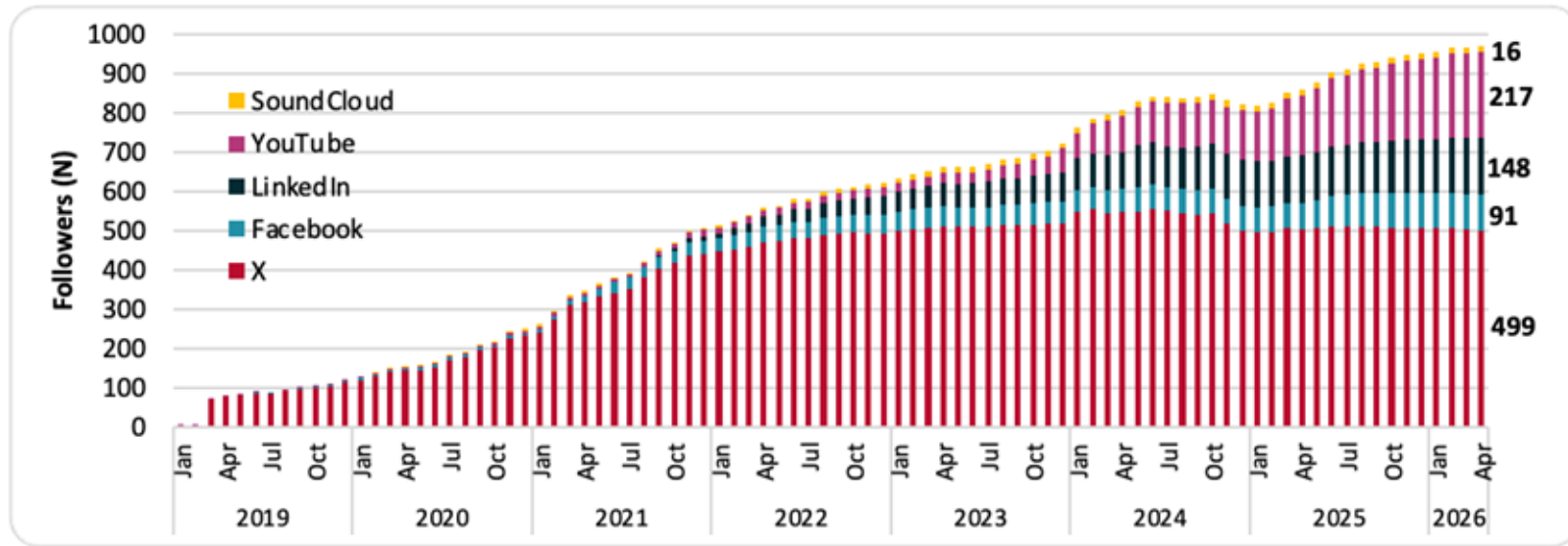
Reach and Engagement in Ohio Over Time



- Legend**
-  School of Medicine
 -  REDCap user added after engaging with Cardi-OH at least once (i.e., attended event, ECHO clinic, or took the annual needs assessment)

n=1,335 out of 3,475 total records

Social Media Followers by Month



Cardi-OH
February 12 · 🌐

The American Heart Association recommends engaging family members in adult cardiovascular care to improve patient outcomes. Family involvement can enhance shared decision-making, support adherence, and strengthen understanding of care plans.

This ❤️ American Heart Month ❤️, explore practical ways to incorporate families into cardiovascular care. -> <https://bit.ly/4qoZlHt>

Case Western Reserve University School of Medicine
University of Cincinnati College of Medicine
Northeast Ohio Medical University
Ohio University Heritage College of Osteopathic Medicine
Ohio State University College of Medicine
The University of Toledo College of Medicine and Life Sciences
Wright State University Boonshoft School of Medicine [See less](#)



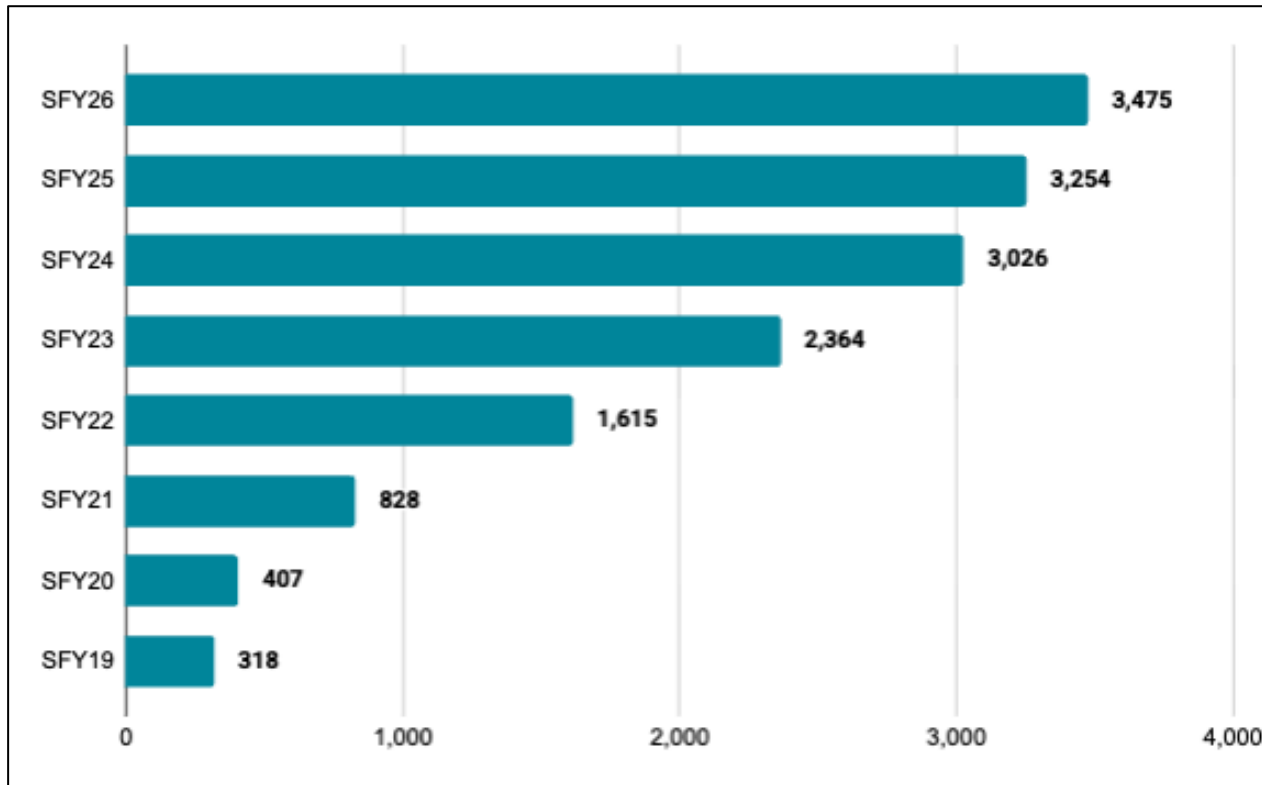
Clinical Strategies for Family-Focused Care

- ✓ Include family in visits when appropriate (in person or virtual)
- ✓ Provide skills training and clear guidance
- ✓ Connect patients and families to psychosocial resources
- ✓ Advocate for family-supportive policies
- ✓ Acknowledge that not all family dynamics are supportive



[Learn more at Cardi-OH.org](https://www.cardi-oh.org) 

Cardi-OH Database: Growth Over Time



Contacts in the Cardi-OH REDCap Database

Reaching HCPs Where They Practice: PatientPoint



Use Food Labels to Make Healthy Choices

Avoid foods with a high % Daily Value for saturated fat, sodium, and sugar.

Talk to your health care team today.

Nutrition Facts	
4 servings per container	
Serving size 1 cup (227g)	
Amount per serving	
Calories	280
% Daily Value*	
Total Fat 10g	20%
Saturated Fat 4 1/2g	9%
Trans Fat 1g	2%
Cholesterol 30mg	6%
Sodium 100mg	20%
Total Carbohydrate 50g	10%
Dietary Fiber 1g	2%
Total Sugar 10g	20%
Included as Added Sugars 8g	16%
Protein 5g	10%

Take time to learn about your health insurance coverage.

Ohio Cardiovascular and Diabetes Health Collaborative

Do you know Cardi-OH?

Discover a curated library with hundreds of cardiovascular and diabetes best practices.

Algorithms, articles, podcasts, webinars, and more for primary care teams.

Visit Cardi-OH.org

Ohio Cardiovascular and Diabetes Health Collaborative

Download the Cardi-OH App for Mobile Devices!

Cardi-OH's library of cardiovascular and diabetes care resources at your fingertips.

Ohio Cardiovascular and Diabetes Health Collaborative

Diabetes Self-Management Education and Support Programs Help Patients Manage Diabetes

Proven to Work!

- Lowers:**
 - Blood Sugar
 - Hospitalizations and Emergency Room Visits
- Increases:**
 - Skills to Care for Your Diabetes
 - Quality of Life

Now covered by Ohio Medicaid. Talk with your doctor today!

Learn more at Cardi-OH.org

CARDI-OH BEST PRACTICE SPOTLIGHT

Supporting Patient Success With Continuous Glucose Monitors

Download

CARDI-OH BEST PRACTICE SPOTLIGHT

Building a DASH Diet Plate

Download

Cardiovascular and Diabetes Best Practices All in One Place

Developed by Ohio's experts for everywhere you practice.

Don't Miss a Beat

Expert-led podcasts on **steady** best practices.

Download the App!

Access Cardi-OH's resource library on your mobile device.

Download Now

Sharing Best Practices to Improve Cardiovascular and Diabetes Health

Access Cardi-OH's evidence-based resource library for primary care teams

- CARDI-OH CAPSULE**: Clinical pearls for day-to-day practice
- CARDI-OH CURRENTS**: News you can use
- CARDI-OH RADIO**: Podcasts with experts on hot topics
- ECHO**: ECHO Clinics with case-based learning

Learn more at Cardi-OH.org

Ohio Cardiovascular and Diabetes Health Collaborative

LORENZO'S Light Club

The **Light Club** is a free, virtual hangout for youth of a parent living with younger-onset dementia to connect, find support, and have fun.

TWEENS (ages 9-12) second Wednesday of each month 6:00 p.m.-7:00 p.m. CT

Scan QR code to learn more.

1:17 PM | PatientPoint

Join Our Virtual Learning Community

How Does it Work?

- Uses a hub-and-spoke model to share best practices with Ohio primary care teams
- Features expert-led didactic and interactive case-based learning discussions

Why Join?

- Development and continued learning with practices across the state
- Success and joy in work retention and health outcomes

Register at Cardi-OH.org Free CME credits

Today's Weather **48°**

High 48° Low 30°

THU 57° FRI 65° SAT 68° SUN 58°

38° 36° 47° 54°

1:18 PM | PatientPoint

Sharing Best Practices to Improve Cardiovascular and Diabetes Health

Access Cardi-OH's evidence-based resource library for primary care teams

Learn More →



Reaching HCPs: ADA, OAFP, OOA



ADA Meeting News
JUNE 5-9 | NEW ORLEANS

The official news source of the Scientific Sessions

Do you know Cardi-OH?
Discover a curated library with hundreds of cardiovascular and diabetes best practices.

Visit Cardi-OH.org

Mon 23 Overland Park

9:44

82° Windy

Get to know Cardi-OH and discover a library of cardiovascular and diabetes best practices!

WHAT'S LURKING AT BOOTH 3024?

Quick Links

- Meeting News
- Event Program
- My Meeting

ADA 2025
Get to know Cardi-OH and discover a library of cardiovascular and diabetes best practices

Download the NEW! Cardi-OH Web App

Paid Sponsorship by Cardi-OH

Access Cardi-OH's resource library on your mobile device by downloading the app today!

Download Now

Webinar: Identifying and Addressing Food Insecurity in the Medical Setting

KEYNOTE SPEAKER
David H. Holben, PhD, RDN, LD

April 30, 2025
12-1 p.m. ET

Register

Webinar: Identifying and Addressing Food Insecurity in the Medical Setting

Paid Sponsorship by Cardi-OH

Register for the upcoming Cardi-OH webinar on April 30. Earn CME credit at no cost.

Register for the Cardi-OH ECHO QI Cardiovascular Series

Paid Sponsorship by Cardi-OH

Register your practice for the upcoming Cardi-OH ECHO QI Cardiovascular Series.

Register

Don't Miss a Beat

Expert-led podcasts on timely best practices.

Listen Now

Tune in to Cardi-OH's Podcast for Primary Care Teams

Paid Sponsorship by Cardi-OH

Access Cardi-OH's monthly podcasts filled with expert-led discussions on timely topics on the Cardi-OH website or via your favorite podcast platform.

Do you know Cardi-OH?

Discover a curated library with hundreds of cardiovascular and diabetes best practices.

OsteoFACTS

Promoting the distinctive philosophy and practice of osteopathic medicine in Ohio.

Now Recruiting Practices!
Quality Improvement Cardiovascular Series

April 2025-May 2026 (Monthly ECHO clinics & coaching)

- Continuous learning and professional development
- Support from a dedicated QI coach
- Improved patient care delivery

Register

OsteoFACTS

Promoting the distinctive philosophy and practice of osteopathic medicine in Ohio.

Statewide Webinar
Identifying and Addressing Food Insecurity in the Medical Setting

Wednesday, April 30, 2025
12-1 p.m. ET

KEYNOTE SPEAKER
David H. Holben, PhD, RDN, LD
The University of Mississippi

Register

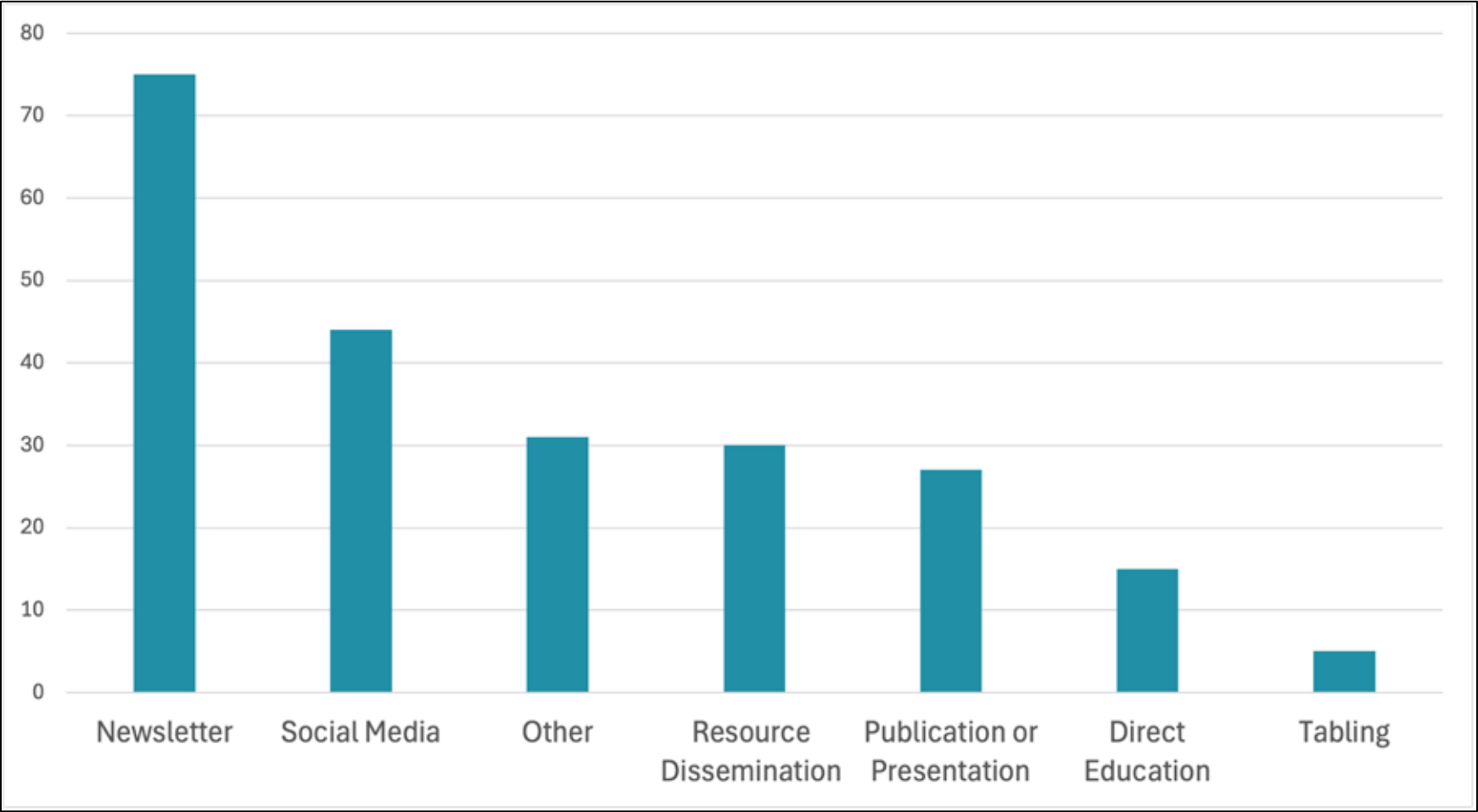
Outreach Events



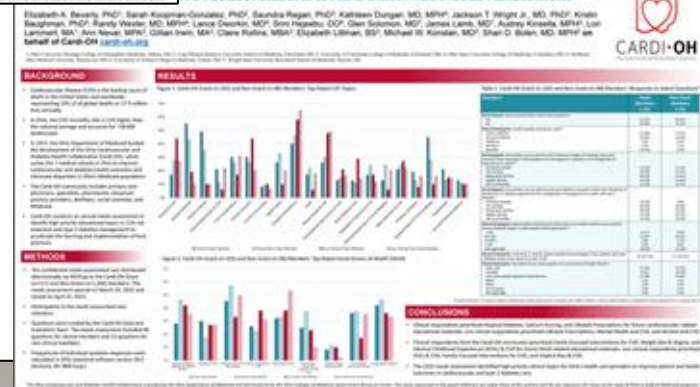
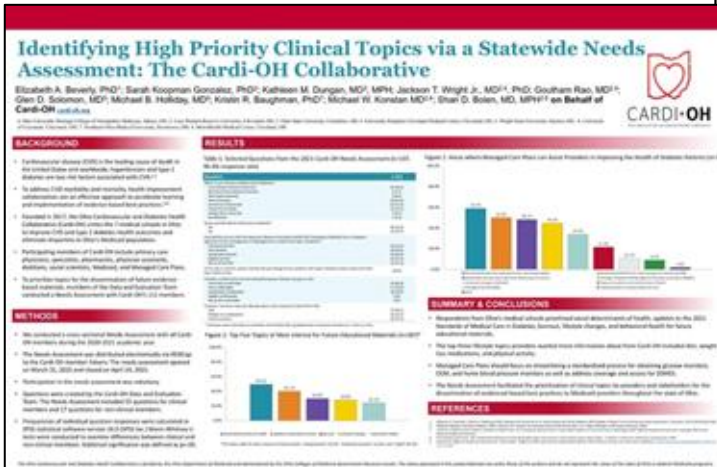
SFY25 Regional Dissemination Activities



CARDI•OH
Ohio Cardiovascular and Diabetes Health Collaborative



Presentations



- Identifying High Priority Cardiovascular and Diabetes Topics for the Dissemination of Evidence-Based Best Practices: Results from a Statewide Needs Assessment (ADA 83rd Annual Scientific Sessions; June 2023, San Diego, CA)
- Expanding a Medicaid-Funded Statewide Collaborative to Include Diabetes Outcomes (SGIM Annual Meeting; May 2023, Aurora, CO)
- Cardi-OH Formation and Reach: A Statewide Cardiovascular and Diabetes Health Collaborative (AcademyHealth Annual Research Meeting; June 2022, Washington, DC)
- Cardi-OH Formation and Reach: A Statewide Cardiovascular Health Collaborative (SGIM Annual Meeting; April 2022, Orlando, FL)
- Identifying High Priority Clinical Topics via a Statewide Needs Assessment: The Cardi-OH Collaborative (Association of Diabetes Education and Care Specialists Annual Conference; August 2021, Virtual Conf)
- A Statewide Needs Assessment to Inform Best Practices for the Ohio Cardiovascular and Diabetes Health Collaborative (ADA 81st Scientific Sessions; June 2021, Virtual Conf)
- Ohio Cardiovascular Health Collaborative Needs Assessment Results (SGIM Annual Meeting; May 2020, Virtual Conf)

In Summary



- Cardi-OH's ECHO Clinics and evidence-based library has built capacity to manage cardiovascular conditions for Medicaid enrollees.
- The Cardi-OH ECHO QI Series has further demonstrated successful improvement in cardiovascular outcomes and coaching skills.
- Cardi-OH has successfully reached and engaged thousands of primary care team members using multiple dissemination modalities.
- The impact of this work will reverberate for many years to come and seed other initiatives for even greater impact.



CARDI·OH

Ohio Cardiovascular and Diabetes Health Collaborative



Chat Activity #3



What's one thing from Cardi-OH
that you will carry forward in your future work?

Words of Wisdom

“Ultimately, the secret of quality [or a good collaborative] is love . . . If you have love, you can then work backward to monitor and improve the system.”

- Avedis Donabedian, MD, MPH
health systems research pioneer



<https://www.michiganmedicine.org/health-lab/how-love-and-landmark-paper-improved-health-care>

Regional Celebrations



Stay Connected



Visit **Cardi-OH.org**

Learn more about the collaborative and read up on the latest best practices.

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Info@Cardi-OH.org



Thank You!

