Diabetes Prevention and Control: Case Management Interventions to Improve Glycemic Control

Task Force Finding

**Intervention Definition**
Case management is “a set of activities whereby the needs of populations of patients at risk for excessive resource utilization, poor outcomes, or poor coordination of services are identified and addressed through improved planning, coordination, and provision of care.” It usually involves the assignment of authority to a single professional (the case manager, most commonly a nurse) who is not a provider of direct health care. The essential features of case management are (1) the identification of eligible patients, (2) the assessment of individual patients’ needs, (3) development of an individual care plan, (4) implementation of that care plan, and (5) monitoring of outcomes. Case management is often combined with disease management but can also stand alone as an intervention or be combined with other clinical care interventions (e.g., practice guidelines or patient reminders).

**Task Force Finding (January 2001)**
Case management is strongly recommended by the Task Force based on strong evidence of its effectiveness in improving glycemic control. Evidence is also available of its effectiveness in improving provider monitoring of GHb, when case management is combined with disease management. These findings are applicable primarily in the U.S. managed care setting for adults with Type 2 diabetes.

*From the following publication:*

**Publications**


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provide information and options for decision makers and stakeholders to consider when determining which programs, services, and policies best meet the needs, preferences, available resources, and constraints of their constituents.

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