

VISTA HEALTHPLAN, INC., AND VISTA HEALTHPLAN OF SOUTH FLORIDA, INC. (“VISTA”) CONGESTIVE HEART FAILURE CLINICAL PRACTICE GUIDELINE

I. PURPOSE

Congestive Heart Failure is a prevalent disease in Medicare aged members and that prevalence is reflected in the Vista population.

In an effort to improve provider and member awareness of nationally established practice guidelines for common disease states Vista encourages providers and members to use clinical practice guidelines as reference tools for giving and receiving care. Providers are encouraged to familiarize themselves with applicable guidelines and to refer to them in their daily patient management. The Healthplans have recognized the guideline for Congestive Heart Failure management developed by the American College of Cardiology (ACC). A complete copy of the guideline, may be found at <http://content.onlinejacc.org/cgi/reprint/46/6/e1>

This is intended solely as a guide and information source. Vista recognizes that any management plan should be individualized, and developed in coordination with the physician, healthcare team, patient, and family, as deemed necessary.

II. GUIDELINE OBJECTIVES

- To provide evidence-based principles and recommendations for congestive heart failure therapy
- To improve care by increasing the awareness of clinicians and patients
- To provide tools to evaluate the quality of care

III. ACTION PLAN

- Vista will communicate the current ACC guidelines to providers who manage members with heart failure.

IV. KEY POINTS

Some key components from the guideline have been highlighted here, with the caveat that the entire guideline should be used to guide your practice.

- Patient Assessment:
 - Thorough H&P
 - Assessment of Activities of Daily Living (ADLs)
 - EKG
 - CXR
 - Routine labs
 - Initial labs should include CBC, electrolytes—including magnesium and calcium, renal and liver functions, lipids, glycohemoglobin (Hemoglobin A1C), and urinalysis.
- Treatment
 - Members at High Risk for Developing Heart Failure (Stages A and B)
 - Control systolic and diastolic blood pressures
 - Control lipid abnormalities
 - Counseling on behaviors which increase risk of heart failure (e.g. smoking, alcohol)
 - Members with Current or Prior Symptoms of Heart Failure (Stages C and D)
 - ACEI/ARB for all patients with heart failure and reduced LVEF (**monitored standard**)
 - Beta-Blocker for all patients with heart failure and reduced LVEF (**monitored standard**)
 - Advice concerning exercise training for all patients with heart failure and reduced LVEF
 - Control Ventricular rate in patients with atrial fibrillation and normal LVEF
 - Meticulous identification and control of fluid retention for refractory end-stage heart failure
 - Dietary Salt Restriction

V. GUIDELINE COMPONENTS TO BE MONITORED

- Prescription fill rates of ACEI/ARB
- Prescription fill rates of Beta Blockers
- Annual lipid testing rates

VI. INTERVENTIONS

- By evaluating claims data, Vista will collect data to verify provider compliance with ACEI/ARB, Beta Blocker and lipid testing, as recommended by the guideline.
- Educational information and individual provider feedback will be provided where compliance rates do not meet benchmark goals.

VII. CLINICAL OUTCOME GOALS

- Increased use of ACEI/ARB
- Increased use Beta Blockers
- Appropriate lipid testing rates