

Baseline Survey

Q1 Please provide the following before completing the survey

- First Name
- Last Name
- Email
- Clinic Name
- City
- State
- COORDINATE Diabetes Site ID

Q2 How does your clinic handle pre-authorization for medications? (i.e. PSK9 inhibitors, novel oral anticoagulants)

- Nurse/ clinic staff driven process
- Referral to pharmacist
- Defer to other healthcare provider/practice
- Other, please specify

Q3 Indicate the number of practicing providers practicing in each category? (in your clinic) Indicated by numeric value. (Example, cardiologist = 5)

- Cardiologist
- Advance Practice Provider, NP or PA
- Pharmacist
- Dietician
- RN
- Nurse Educator

Q4 What resources would be needed in your clinic in order to prescribe anti-hyperglycemic medications that improve CV health? For example: nurse to provide education on injection techniques, patient information/handouts about specific agents, provider specific education, additional resources (Please specify) _____

Q5 Where do you think the current gaps are in provider education? (Click all that apply)

- Understand what GLP-1 receptor agonists do and how they work.
- Understand which patients are eligible for GLP-1 receptor agonists.
- Understand when in the course of a patient's care GLP-1 receptor agonists should be initiated.
- Understand the potential side effects of GLP-1 receptor agonists
- Understand what SGLT-2 inhibitors do and how they work.
- Understand which patients are eligible for SGLT-2 inhibitors
- Understand when in the course of a patient's care SGLT-2 inhibitors should be initiated
- Understand the potential side effects of SGLT-2 inhibitors

Q6 Who usually prescribes new medications for diabetes care for patients with type 2 diabetes and CVD? (total must equal 100%)

- PCPs
- Cardiologists
- Endocrinologists

Q7 A best you can, please estimate how often communication happens between clinic providers and other members of the patients DM care team outside of your clinic? (i.e., PCP, endocrinologist)

- After every visit
- Only when management decisions effect diabetes
- If there is a specific question
- Never/rarely

Q8 Please rate the following key barrier statements to prescribing GLP-1 receptor agonists (Likert scale: Strongly agree, Somewhat agree, Neither agree nor disagree, Somewhat disagree, Strongly disagree)

- Cost too high for patients to afford
- Prior authorization is burdensome but the medications are usually approved
- Prior authorization is burdensome and the medications are frequently not approved
- Side effects of the medications are prohibitive and patients cannot stay on them
- Patients are non-adherent, unrelated to cost (i.e. unable/unwilling to inject the GLP-1 receptor agonist)
- Do not know enough about these medications (what they do, when to use them, what their side effects are)
- Not the responsibility as a cardiologist to prescribe diabetes medications
- Do not want to introduce confusion into the existing diabetes care plan
- It is difficult to effectively communicate with PCPs and endocrinologists about diabetes care plans
- There are other medication with greater efficacy in lowering HbA1C than GLP-1 receptor agonists

Q9 Please rate the following the key barrier statements to prescribing SGLT-2 inhibitors (Likert scale: Strongly agree, Somewhat agree, Neither agree nor disagree, Somewhat disagree, Strongly disagree)

- Cost too high for patients to afford
- Prior authorization is burdensome but the medications are usually approved
- Prior authorization is burdensome and the medications are frequently not approved
- Side effects of the medications are prohibitive and patients cannot stay on them
- Patients are non-adherent, unrelated to cost
- Do not know enough about these medications (what they do, when to use them, what their side effects are)
- It is not the responsibility of the cardiologist to prescribe diabetes medications
- Do not want to introduce confusion into the existing diabetes care plan
- It is difficult to effectively communicate with PCPs and endocrinologists about diabetes care plans
- There are other medications with greater efficacy in lowering HbA1C than SGLT-2 inhibitors

Q10 Does your clinic have any experience with developing and/or implementing evidence-based care pathways for certain diagnosis, such as heart failure or secondary prevention ASCVD?

- Yes
- Maybe
- No

Q11 Is there a formal process in place to educate clinic providers on current guideline recommendations?

- Yes, please specify
- Maybe
- No