

230 Park Avenue, Suite 659
New York, NY 10169

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Judith Faulkner
Chief Executive Officer
Epic Systems Corporation
1979 Milky Way
Verona, WI 53593

Brent Shafer
Chief Executive Officer
Cerner Corporation
2800 Rockcreek Parkway
North Kansas City, MO 64117

Howard Messing
Chief Executive Officer
MEDITECH (Medical Information Technology)
1 Meditech Circle
Westwood, MA 02090

Paul M. Black
Chief Executive Officer
Allscripts Healthcare Solutions
222 Merchandise Mart Plaza
Chicago, IL 60654

Dear Electronic Medical Records Leaders,

We write to you on behalf of tens of millions of people living with Type 1 and Type 2 diabetes in the United States, each doing their best to partner with their health care providers to manage severe, acute, and chronic health challenges. As you know, diabetes is a top healthcare concern in the United States, both because of rising numbers and the fact that outcomes need to be far better than they are today. Through our constituents, we each possess unique perspective on what patients, providers, and health systems need to prevent complications, better manage diabetes, and improve outcomes. We have identified a crucial role for you and your companies to play in this transformation and ask for your collaboration to streamline workflows, improve care and ultimately the health outcomes for millions of people.

Indeed, a transformation in care for people living with diabetes is already underway. There has been a shift to emphasize (1) diabetes-related technologies and glucometrics, (2) long-term prevention and screening methodologies, and (3) a holistic diabetes care model, which takes into account factors such as someone's home environment and behavioral health.

This is all very positive, and we now need updates to EMR systems to reflect these advances. We also need standardization across EMR platforms. The COVID19 pandemic made it even more clear – that hospitals, health systems, providers and ultimately patients suffer because of the challenges posed by EMRs. The good news is that we know that you can change this.

The need for this change is urgent. We've reached a moment in diabetes care evolution where our progress is gated by how EMR systems currently operate. We are asking you to:

1. **Enable seamless integration of diabetes-related technologies and metrics**, provide a standard way of importing device data into EMRs automatically, and incorporate a basic dashboard of key glucose metrics.

The lack of standardization for importing and displaying CGM data, and integrating and storing patient data, undercuts the incredible value of having such data in the first place. We ask that you incorporate the following glucose-related data points to enable the best possible care when assessing a patient's blood glucose level based on device:

- **CGM:** Glucose Management Indicator (GMI), Time in Range (TIR), Time below 70 mg/dL, and the Ambulatory Glucose Profile (AGP) display

- **Pumps and insulin smart pens:** total daily dose (TDD), percent basal insulin, percent bolus insulin, number of boluses or injections/day
 - **Meters:** number of days used, number of readings per day
2. **Enable seamless integration of lab results into the EMRs, and simpler methods of tracking complication screenings.** We need a standard way of tracking lab results, and for readily viewing completed screenings and any information complications.

We understand that in some – if not all – instances, lab results are imported into the EMR via a PDF and are relegated to the notes section. This overall lack of visibility of existing labs creates a whole host of issues. These can be overcome by integrating lab values and complication screenings in a way that they are easy to access and easy to read. Again, we stand ready to recommend specifics.

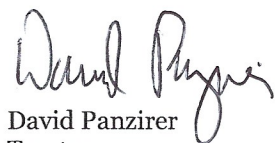
3. **Add patient-centered data for holistic diabetes care.** Like so many other conditions, managing diabetes requires far more than monitoring metrics. It requires a whole-person approach, and this needs to be reflected in EMR. This ranges from capturing the insurance someone has, to tracking behavioral and environmental information about individuals. This is an emerging element of care across many conditions, and now is the time to ensure that EMR is up to date.
- We request that the following information needs to be added and easy to find within the EMR:
 - **Insurance:** Integrated solution that provides most economical option of test, device, or therapy for the PWDs based on insurance
 - **Behavioral health and social Determinants of health information:** CORE, Patient Health Questionnaire, awareness of PWD's access to healthy food, housing situation

Your companies have an opportunity to support improvements in diabetes management and care, and we cannot think of a good reason why you wouldn't want to be a part of this. Indeed, the changes we've outlined above are long overdue and, unfortunately, now stand in the way between millions of people and better health outcomes. They also hamstring both health providers' ability to provide the best care and their efficiency.

Today healthcare is failing to adequately treat the large majority of people living with diabetes. We've examined the entirety of the healthcare system and EMR expansion and standardization would undoubtedly be a step in the right direction towards improving outcomes for all.

The reality is simple: To better meet the needs of millions of patients and chronic complications and costs, we need EMRs to standardize and reflect the state of the art in diabetes care. We would welcome a conversation to discuss the recommendations we've outlined above, and how we can collaborate to ensure that EMR is a part of the solution to delivering better diabetes care in the United States.

Sincerely,



David Panzirer
Trustee
The Helmsley Charitable Trust

Tracey Brown
Chief Executive Officer
American Diabetes Association

Moshe Phillip, M.D.
Co-Chairman
Advanced Technologies and Treatments for Diabetes

Leslie E. Kolb, R.N.
Chief Science, Practice and Learning Officer
Association of Diabetes Care & Education Specialists

Thom Scher
Chief Executive Officer
Beyond Type 1

Jeff Hitchcock
Founder & President
Children with Diabetes

Satish K. Garg, MD
Editor-in-Chief
Diabetes Technologies & Therapeutics

Amy Tenderich
Founder & Editor-in-Chief
DiabetesMine

Carol H. Wysham, MD
President
Endocrine Society

David C. Klonoff, MD
President, Diabetes Technology Society
Editor-in-Chief, Journal of Diabetes Science and Technology

Aaron Kowalski, PhD
President & Chief Executive Officer
Juvenile Diabetes Research Foundation

Dave Walton
Chief Executive Officer
T1D Exchange

Steven Edelman, M.D.
Founder & Director
Taking Control of Your Diabetes

Howard Look
President, Chief Executive Officer & Founder
Tidepool