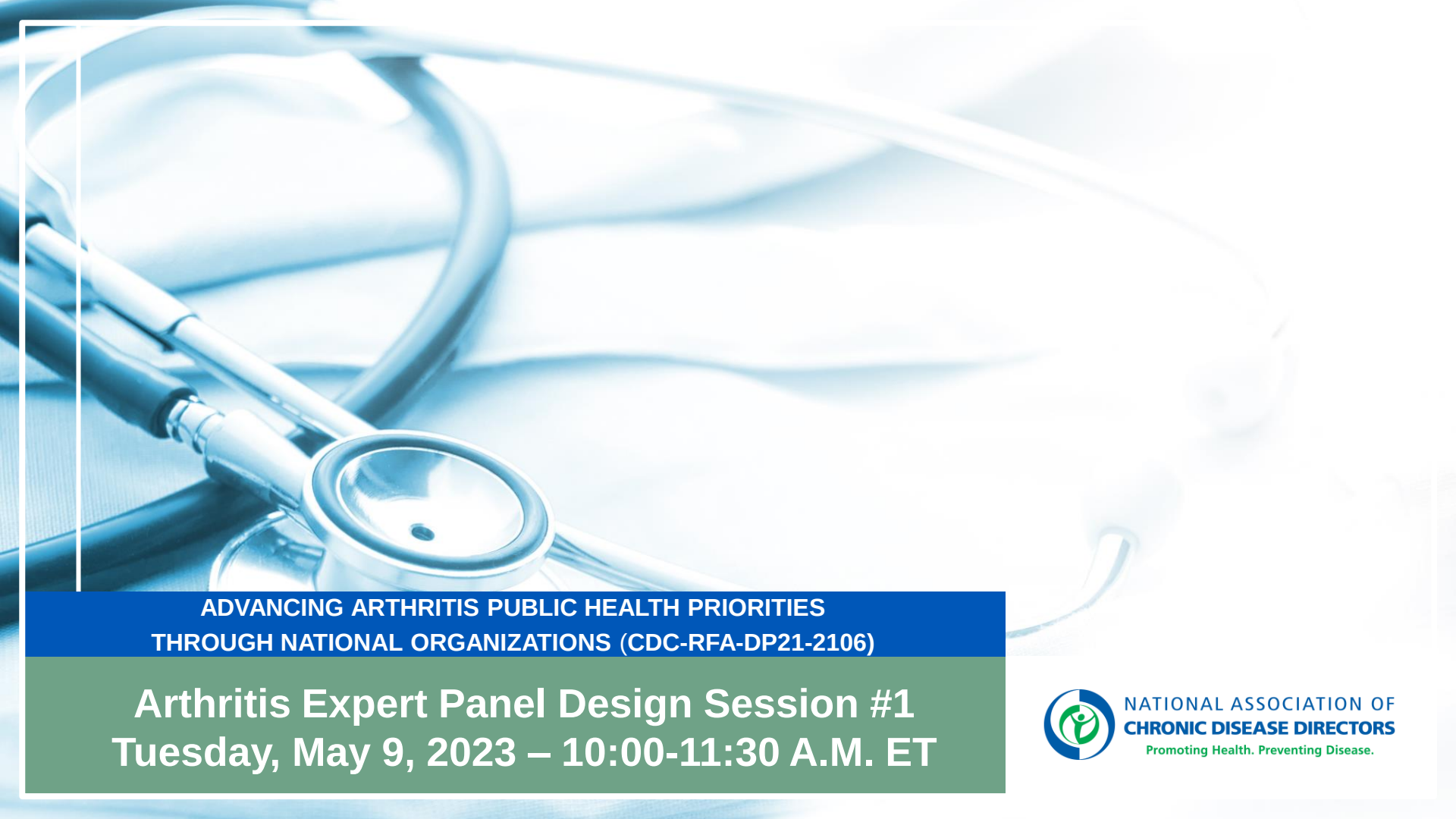

ADVANCING ARTHRITIS PUBLIC HEALTH PRIORITIES
THROUGH NATIONAL ORGANIZATIONS (CDC-RFA-DP21-2106)

Arthritis Expert Panel Design Session #1
Tuesday, May 9, 2023 – 10:00-11:30 A.M. ET

NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.

Welcome

Heidi Milby, MPH

National Association of Chronic Disease Directors (NACDD)

Funding Attribution

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Agenda

- Welcome
- Human Centered Design Recap
- Design Session Overview and Opportunities
- Screening Tool and Discussion
- Workflow Recommendations
- Closing/Next Steps

Project Aims

Aim 1: Evidence-Informed Arthritis Care Model

Develop and implement an evidence-informed arthritis care model to conduct function, pain, and physical activity screenings; patient counseling on the benefits of physical activity; and referrals to arthritis-appropriate physical activity and self-management programs and other evidence based “treatments.”

Aim 2: Demonstrate / Pilot

Pilot the arthritis care model in a healthcare system that serves diverse populations; demonstrate clinical outcomes and total cost of care savings; and reimbursement pathways and incentives for provider screening, counseling, and referral.

Aim 3: Scale & Spread

Disseminate learnings on a national level and enhance healthcare provider awareness, knowledge, and skills to promote physical activity as an effective, drug-free way to relieve arthritis pain, improve function, and limit arthritis progression among adults with arthritis.

Timeline / Progress Review

YEAR 1
(Sept 30, 2021 – Sept 29, 2022)
Landscape Assessment

- Environmental scan of the literature
- Semi-structured interviews with key stakeholders
- Clinical Practice Assessment with healthcare providers

YEAR 2
(Sept 30, 2022 – Sept 29, 2023)
Expert Advisory Panel & Design Team

- Create evidence-informed approach framework
- Develop evaluation framework
- Identify pilot site(s)

YEAR 3
(Sept 30, 2023 – Sept 29, 2024)
Health System Pilot and Evaluation

- Implement and evaluate strategic approach

YEARS 4 & 5
(Sept 30, 2024 – Sept 29, 2026)
Pilot/Evaluation Continuation, Scale and Disseminate Findings

- Continue pilot and evaluation
- Scale strategic approach
- Disseminate findings

Human Centered Design Recap

Patricia Doxey

Leavitt Partners

Recommendations from Human-centered Design Sessions

01 Create a central repository for arthritis resources and programs.

02 Develop a decision aid to use when counseling and referring patients.

03 Develop an accreditation process for organizations offering AAEBIs and other evidence-based interventions.

04 Design a model that integrates care team members that meet patient needs.

05 The resulting framework needs to be flexible for different capabilities, models, and health system situations.

06 For pilot site, consider demographics, reimbursement flexibility, and multi-sector strong relationships.

07 Seek input from different perspectives to ensure that the model can implemented in the real world and improve patient outcomes.

08 Select/develop a screening tool for arthritis patient quality of life.

Design Session Overview

Lisa Erck, MS

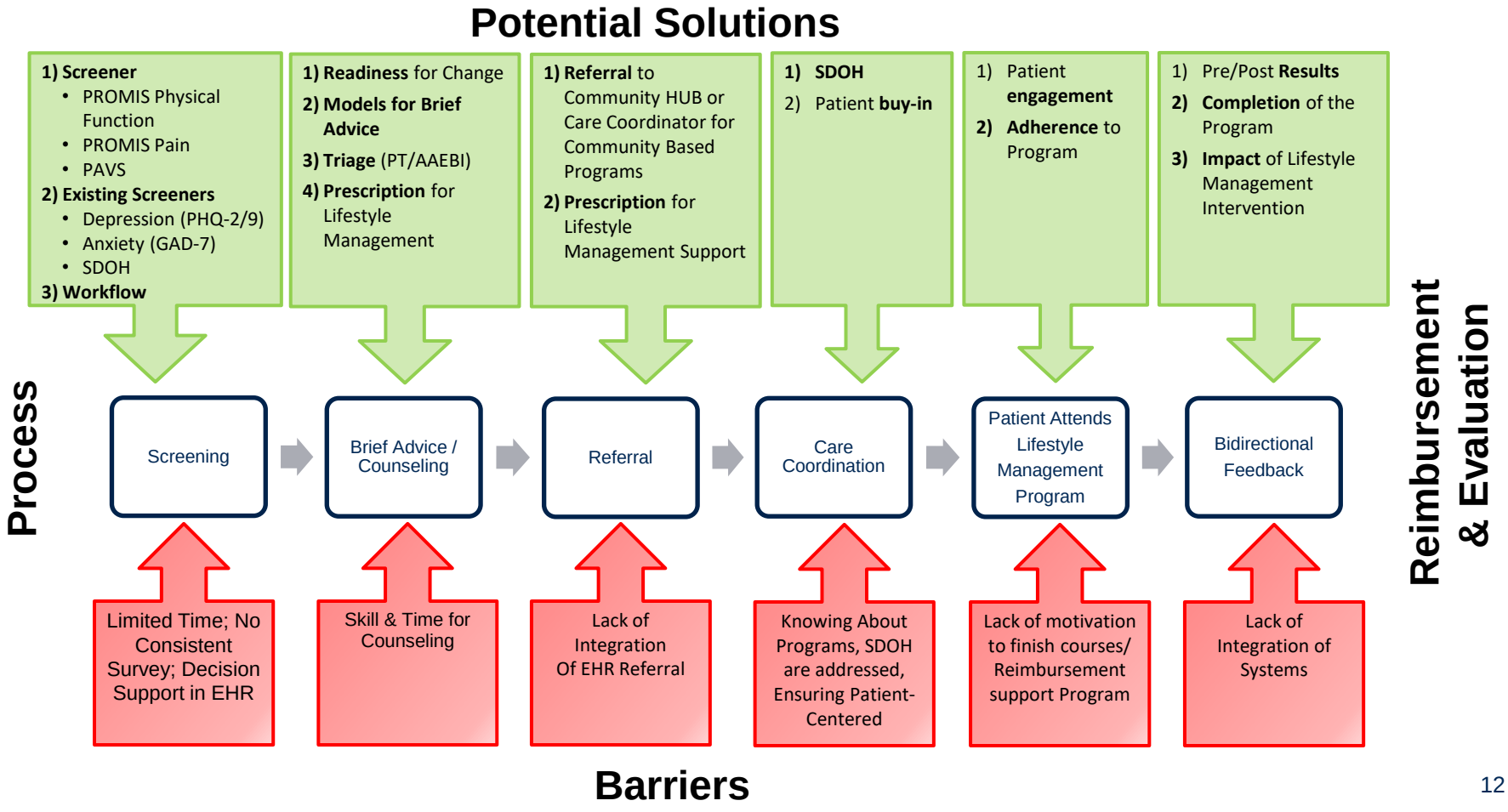
National Association of Chronic Disease Directors (NACDD)

DESIGN SESSION	**HCD Rec #1:** Create a central repository for arthritis resources and programs.	**HCD Rec #2:** Develop a decision aid to use when counseling and referring patients.	**HCD Rec #3:** Develop an accreditation process for organizations offering AAEBIs and other evidence-based interventions.	**HCD Rec #4:** Design a model that integrates care team members that meet patient needs.	**HCD Rec #5:** The resulting framework needs to be flexible for different capabilities, models, and health system situations.	**HCD Rec #6:** Considerations for a pilot program include demographic considerations, flexibility in reimbursement arrangements, and a strong relationship between a health system, payers, and community resources.	**HCD Rec #7:** Seek input from different perspectives, including patients, to ensure that the model can implemented in the real world and improve patient outcomes.	**HCD Rec #8:** A thoughtful, effective screening tool (and creativity in how/when it's administered) could help increase the number of individuals that receive early interventions.
1 - Screening								
2 - Brief Advice / Counseling								
3 - Referral								
4 - Care Coordination								
5 - Reimbursement and Beyond								
6 - Evaluation								

Design Sessions

1. May 9 **Screening Arthritis Pt's for QoL**
2. May 23 **Advice / Counseling**
3. June 13 **Referral**
4. June 27 **Care Coordination**
5. July 11 **Reimbursement and Beyond**
6. July 25 **Evaluation**

Evidence-Informed Approach Framework



Assumptions for Design

- Patient with correct diagnosis of knee/hip osteoarthritis
- Primary care setting as initial entry point
- High-level recommendations that can fit in any health system and care team size
- Leverage health system in value-based arrangement; maximize reimbursement in fee-for-service whenever possible
- Process will need to be embedded into electronic health record
- May need to demonstrate feasibility to gain reimbursement mechanisms

Screening

Karen Schifferdecker, PhD, MPH

Kathleen Carluzzo, MS

The Dartmouth Institute for Health Policy and Clinical Practice

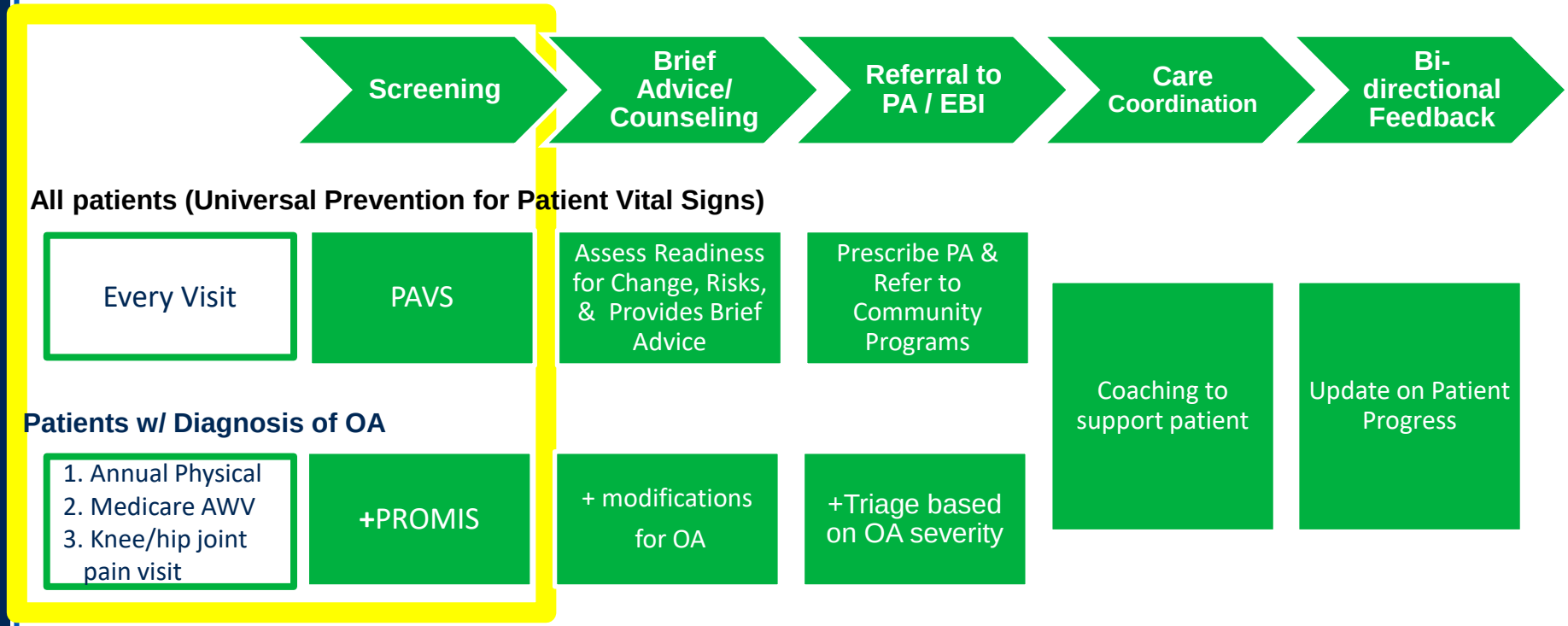
Center for Program Design & Evaluation
CPDE | Dartmouth College

Proposed Screening Measures (also support baseline/outcomes)

May 9, 2023

Proposed pathway

For patients age ≥18…



What about patients with chief complaint of pain of knee and hip who don't have a diagnosis of OA?

Recommendation: PAVS

Use to screen <u>all patients</u> (age ≥18) at <u>all visits</u>; <30 sec to complete

Physical Activity Vital Sign (PAVS) – formerly, “Exercise Vital Sign”

1. On average, how many days per week do you engage in moderate to vigorous physical activity (like a brisk walk)? _____ days
2. On average, how many minutes do you engage in physical activity at this level? _____ minutes

Calculate #1 x #2 = Minutes/week; (National guidelines = 150 min/week)

Consider including:

3. How many days a week do you perform muscle strengthening exercises, such as bodyweight exercises or resistance training?

Recommendation: PROMIS Physical Function and Pain Interference

Collect at (or before) annual Physical/AWV to all patients (age ≥18) diagnosed w/OA *or* chief complaint of knee/hip pain + PAVS; 1-2 min to complete

- **Physical Function (4 items)** – Response options (5): Without any difficulty → Unable to do
  In the past 7 days…
  - Are you able to do chores such as vacuuming or yard work?
  - Are you able to go up and down stairs at a normal pace?
  - Are you able to go for a walk of at least 15 minutes?
  - Are you able to run errands and shop?

- **Pain Interference (4 items)** – Response options (5): Not at all → Very much
  In the past 7 days…
  - How much did pain interfere with your day to day activities?
  - How much did pain interfere with work around the home?
  - How much did pain interfere with your ability to participate in social activities?
  - How much did pain interfere with your household chores?

What is PROMIS?

- The Patient-Reported Outcome Measurement Information System®
- Validated, standardized measures
- Include domain-specific assessments (e.g., Pain Interference, Fatigue, Anxiety) in fixed-item short-forms (e.g., 4-items) and Computer-Adaptive Testing (CAT) format
- Also includes fixed-length global assessments (e.g., PROMIS Global-10) and composites (PROMIS-29)

Why use PROMIS?

- Measures are integrated in Epic, Cerner, and EHR systems
- Commonly used in research and practice
- Translated (and validated) in many languages
- Validated for many conditions, including arthritis
- Scores (for short-forms) have meaningful benchmarks
  - Within Normal Limits
  - Mild Symptoms (or functional impairment)
  - Moderate Symptoms (or functional impairment)
  - Severe Symptoms (or functional impairment)
- Scores are easy to interpret, and based on means for the general US population (T-score of 50 is population mean; 10 point difference = 1 SD)

What about mental health, SDOH, existing measures sites are using?

This recommendation assumes site(s) already capturing mental health, SDOH

e.g., PHQ 2/9

Unknown:

What measures partner sites are currently using

Will assess/adapt

Using PAVS and PROMIS for screening

Screening = identify eligible patients for counseling and AAEBI referral

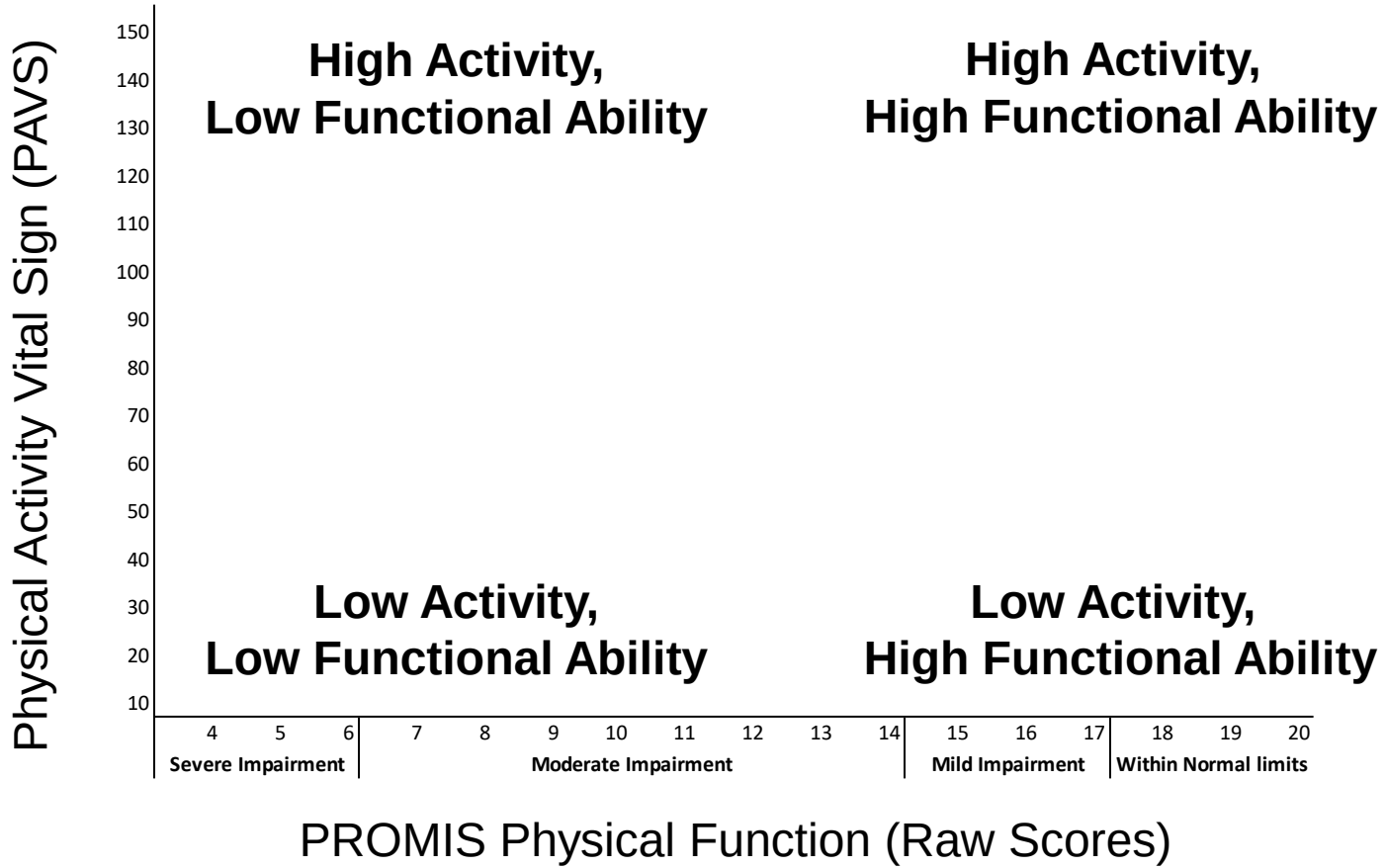
Physical Activity Vital Sign (PAVS) based on physical activity level

- Consider thresholds for counseling/referral using PAVS only

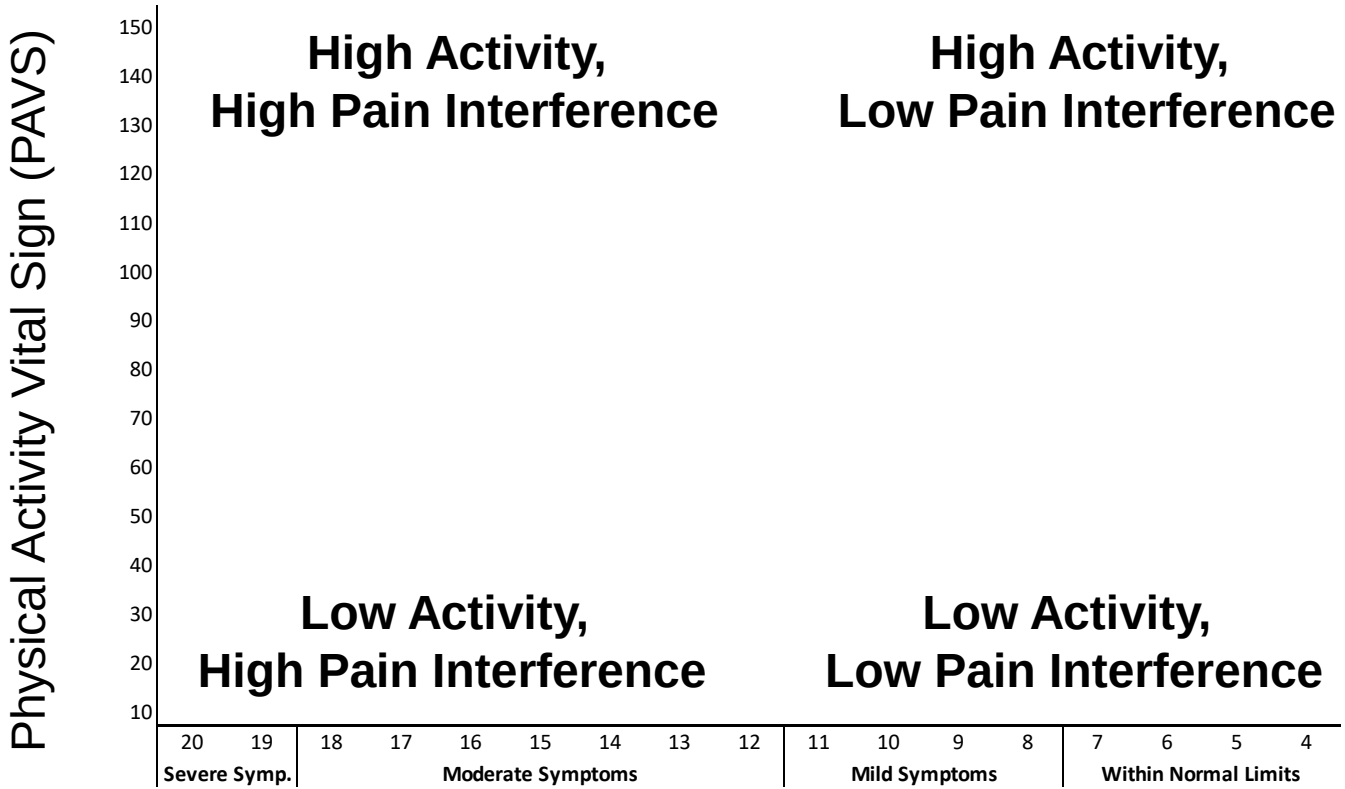
PROMIS items focus on day-to-day activities

- Consider thresholds for counseling/referral when combining PAVS *and* PROMIS—use quadrants?

Activity level x physical function



Activity level x pain interference

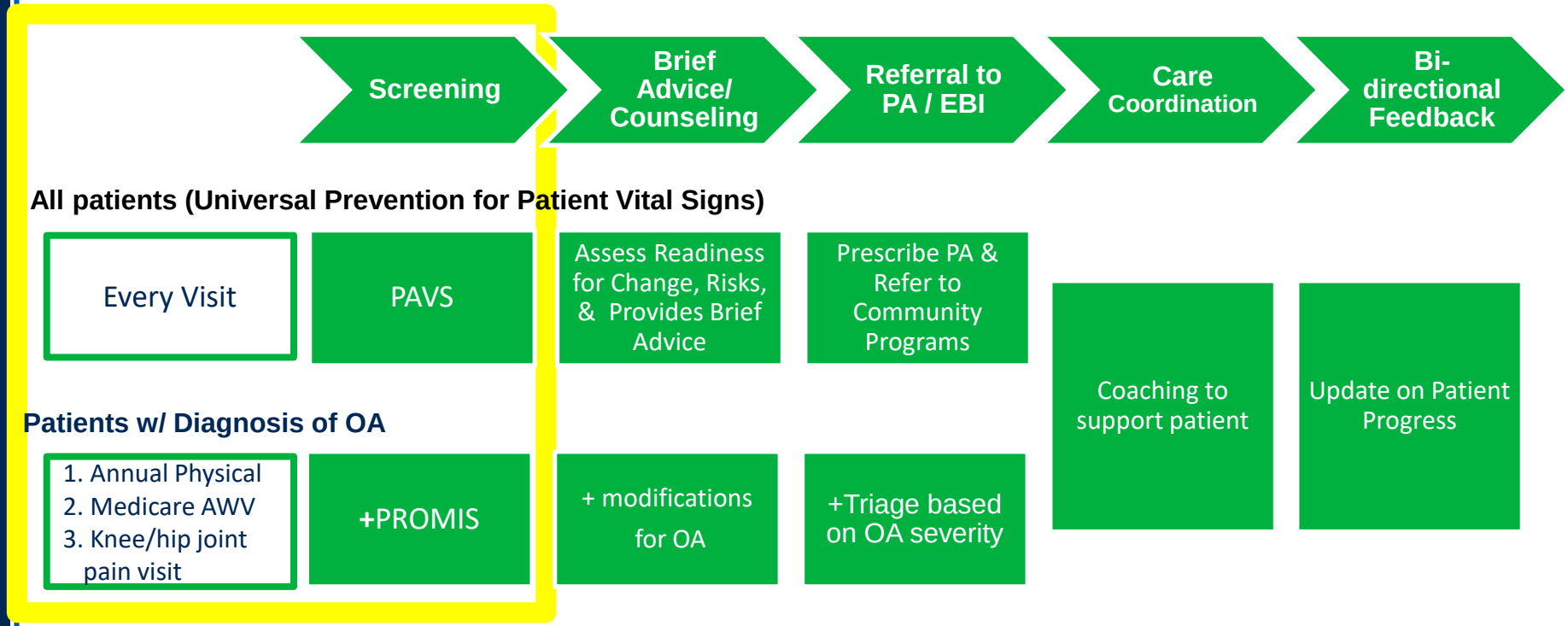


Strategic Discussion

Expert Panel

Proposed screening

For patients age ≥18…



What about patients with chief complaint of pain of knee and hip who don't have a diagnosis of OA?

Arthritis Care Model - Discussion

Feedback on recommendations for screening measures?

1. PAVS (+advice and referral) *for anyone regardless of OA status*
2. PAVS (+advice and referral) + PROMIS physical function and pain interference *for those with OA*
3. PAVS (+advice and referral) + PROMIS physical function and pain interference *for those with chief complaint knee/hip*

Arthritis Care Model - Discussion

Thoughts on including PAVS muscle strengthening exercise question?

- How many days a week do you perform muscle strengthening exercises, such as bodyweight exercises or resistance training?

Arthritis Care Model – future decisions

What are thresholds for counseling and referral for PAVS alone and PAVS + PROMIS?

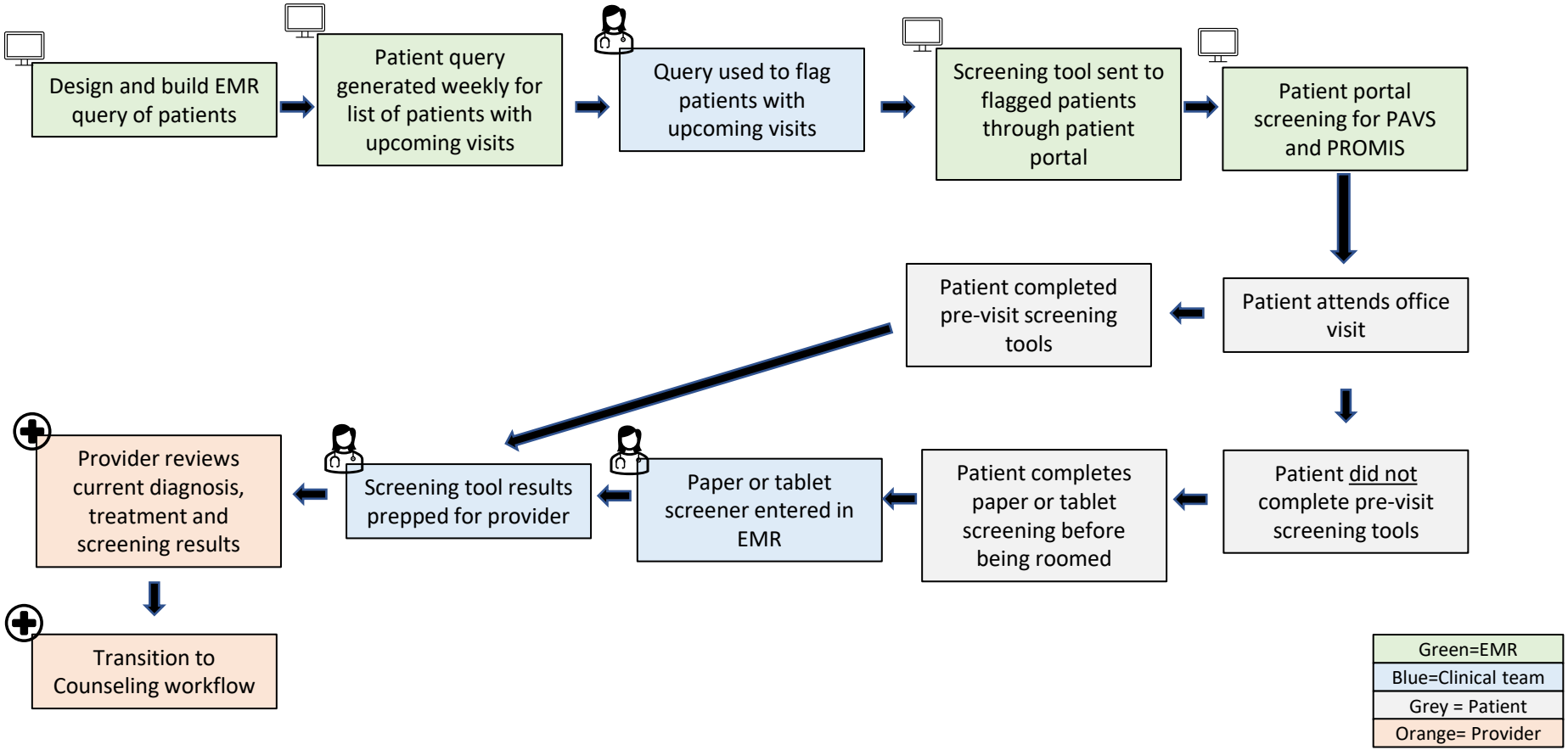
- **e.g., How might patients be referred differently by quadrant?**

How and at what point are other measures (e.g., mental health) incorporated and considered?

Workflow

Katrina Seipp-Lewington, MPH
Comagine Health

Screening Arthritis Patients for Quality of Life



Jamboard Engagement Activity

Strategic Discussion

Expert Panel

Closing and Next Steps

Homework for Design Session #2

1. Review counseling tools in resource document and be prepared to talk about this
2. Be prepared to share your tools for counseling
3. Please email your tools ahead of time

Thank You!