



## **Arthritis Council Workgroup: Healthcare Provider Counseling About PA and Referral to AAEBIs Workgroup Call**

Thursday, May 5, 2022  
2:00 p.m. ET

**States in attendance:** Caitlin Gurney (NY), (NC), Kimberly Mosley (NC), Amyia Hardy (NC), Karen Day and Mona Burwell (VA), Margaret Chaykin (WA), Theresa Kreiser (WA), Cherylee Sherry (MN), Isla Alvarez (Kansas)

**Additional attendees:** Nick Turkas (Arthritis Foundation), Michele Mercier (CDC), Margaret Kaniewski (CDC), Serena Weisner (OAAA), Anamika Rajguru (CDC)

**Facilitator/Moderator:** Dr. Adam Burch, New Hampshire

### **Workgroup Overview:**

This Arthritis Council workgroup is open to states and national partners who want to discuss the screening/counseling/referral of individuals with arthritis and the efforts to increase healthcare providers counseling on physical activity to reduce arthritis pain, and referrals by those providers to evidence-based interventions. Participants are encouraged to share successes, challenges, barriers and invited to discuss opportunities to facilitate success towards strategy 2.

### **Opportunities for Collaboration and State Sharing**

Participants were asked to share the following on the call:

1. One strategy 2 success
2. What part of the process (e.g., screening, counseling, referral) the success is in and the steps taken to get there

### **State Sharing**

#### **New Hampshire**

- One success: getting screening tool universally added within EMR at FQHC
  - All physicians will see all PAVS questions at annual wellness visit
  - Increase # of screenings (annually)
  - 3 sites have implemented screening protocol into daily encounters and appointments with patients

#### **New York**

- One success: NY developed a toolkit with counseling resources for providers. Toolkit also includes patient education materials and includes arthritis registry questions (via Health Information Exchange)
  - New York is hosting public health live [event](#) (open to all HCPs)
  - NY's efforts are focused on education and awareness at this time



#### Minnesota:

- One success: Health coach training for CHWs and health care providers– focused on physical activity. Training includes language around how to talk to patients about increasing physical activity. Used curriculum from University of San Francisco. This effort is focused on education and awareness (with social media).
- “We talk about screening, counseling and referral” but MN is also focused on follow up with patients
- Minnesota uses Juniper (<https://yourjuniper.org>) for referrals to evidence-based programs.

#### North Carolina

- One success: incorporating health coaching and using certification to quality health coaching as a specialty. This helps with reimbursement efforts!
  - Certified health coaching certification
  - Partnering with University of Greensboro and others to pilot screening, counseling and referral protocol with students
  - <https://healthyagingnc.com/health-coaching/>

#### Kansas:

- One success: Working on bi-directional referral process and partnering with QIO (partner from CVH and Diabetes)

#### Washington:

- One success: Leveraging partners and leveraging programs (e.g., Walk with the Doc) and moving them to other AAEBIs (e.g., Walk With Ease).
  - Washington is looking to tap into above partners to add opportunities for screening, counseling and referral and bi-directional referral to efforts.
- Conducting research on referrals to understand current practices around the state
- All state evidence-based consortium: convened meeting to discuss statewide screening, counseling, and referral efforts and to identify opportunities for collaboration
- Holding quarterly webinars on AAEBIs (outpatient practices in WA) in region

#### Virginia:

- One success: Walk With Ease - Leveraging partnership with HHS and partnering with Weight Watchers to market WWE w/ Weight Watchers
- Virginia is encouraging all partners to “claim space” via Find Help
- Partnering w/ Partners in Prayer and Prevention (formerly Million Hearts) to market and promote AAEBIs to refer to WWE and CDSMP – send to AAAs for programming and virtual offerings (cohort based)



## Overall Themes:

### Training:

- The barrier to screening, counseling and referral is not the screening or the referral it is the counseling. This is b/c primary care does not typically “teach” PA during residency. Determine if this is an opportunity to add education and online CEU program focused on physical activity, screening, counseling, and referral. See if this could be added to certification renewal protocol for practitioners. Consider if your state has statewide LMS (e.g., Juniper)
- Tap into professional application programs (e.g., CHW) and add screening, counseling and referral language into trainings and certification processes

### Two-way Communication:

- Two-way communication b/w AAEBIs and healthcare providers is necessary
  - Could you use fax?
  - Could you use EMR?

### Concept of CEU for Providers:

- Recommendation: If you are making CEU for providers consider the opportunity to have course be AMA approved course that could be used across state lines and via multiple states

### Partner with National Organizations:

- Look for opportunities to document cost-benefit information on AAEBIs and to document data (patient specific outcomes) related to physical activity. Look for opportunities to link physical activity to things that physicians are focused on!
- Partner with national organizations to meet state and cooperative agreement goals
- Arthritis Foundation Partners for Patients: <https://www.arthritis.org/health-care-provider/resources-for-you/partners-4-patients-with-arthritis>
  - Consider offering to fill out the Providers 4 Patients with arthritis recognition forms for healthcare provider champions that are helping with Strategy 2 efforts <https://www.arthritis.org/health-care-provider/resources-for-you/partners-4-patients-with-arthritis>
- OA Care Tools: <https://oaaction.unc.edu/oacaretools/oacaretools-healthcare-providers/>

## Additional Resource/Discussion Items:

- Participants were asked to share feedback on today’s call
  - interested in future calls on the first Thursday of the month at 2pm ET; next call will be June 2
  - would like to learn what is working in other states and appreciate hearing from others



- For the next call participants should come prepared to share one significant barrier that you have faced related to Strategy 2 (in last two years) and any approach you took to address barrier. Please ensure that barrier is non-COVID related.