

Design and Implementation of Exercise is Medicine Greenville®: The Power of Provider-Prescribed Physical Activity

CDC Arthritis Management and Wellbeing Recipient and Partners Meeting
October 19, 2023

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Professor: Lifestyle Medicine

University of South Carolina School of Medicine Greenville

Faculty Disclosure

In compliance with ACGME Guidelines, I hereby declare:

 I do not have financial or other relationships with the manufacturer(s) of any commercial product(s) or provider(s) of any commercial services(s) discussed in this educational activity.

Jennifer Trilk, PhD, FACSM, DipACLM





National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)

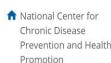
CDC > National Center for Chronic Disease Prevention and Health Promotion











About Chronic Diseases

Health and Economic Costs of Chronic Diseases

How You Can Prevent Chronic Diseases

About the Center

Our Programs and Impact +

Chronic Disease Data

Publications, News, and + Media

Tools and Resources



About Chronic Diseases

Six in ten adults in the US have a chronic disease and four in ten adults have two or more.





and saturated fats.

· Excessive alcohol use.

· Physical inactivity.







Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both. Chronic

diseases such as heart disease, cancer, and diabetes are the leading causes of

. Poor nutrition, including diets low in fruits and vegetables and high in sodium

death and disability in the United States. They are also leading drivers of the

Many chronic diseases are caused by a short list of risk behaviors:

· Tobacco use and exposure to secondhand smoke.











How You Can Prevent Chronic Diseases



Health and Economic Costs of Chronic Diseases

Prevalence of Arthritis in the United States

National Prevalence

- Based on data from the National Health Interview Survey (NHIS), during 2016 2018, an estimated 58.5 million US adults (23.7%) had ever been told by a doctor (doctor-diagnosed) that they had some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia.1
- The NHIS collects data on a broad range of health topics through personal household interviews with US adults.

Prevalence by State

- Based on data from the Behavioral Risk Factor Surveillance System (BRFSS), the percentage of adults with arthritis varies by state, ranging from 17.2% in the District of Columbia to 41.4% in West Virginia in 2019.2
- · Learn more about state-level arthritis statistics
- To view arthritis prevalence estimates by state, go to the interactive map on the Chronic Disease Indicators database and select a state on the map.
- The BRFSS collects health-related data on US residents in each state and is the data source for the information on states, counties, and cities on this page.

Prevalence by County

- The percentage of adults with arthritis varies considerably by county, ranging from 11.2% to 42.7% in 2015. Learn more about county-level arthritis statistics (BRFSS). 3
- To view arthritis model-based prevalence estimates by county, go to the interactive map on the Chronic Disease Indicators database and select a state on the map.

Prevalence by Small Areas

• To view arthritis prevalence estimates by census tract, county, incorporated and census designated place, and Zip Code Tabulation Area, go to the interactive map on PLACES and select location type.

Top of Page

Physical Activity Programs

Print

Studies show that physical activity can reduce pain and improve function, mood, and quality of life for adults with arthritis. Physical activity is also important for the management of other chronic conditions that are common among adults with arthritis, such as diabetes, heart disease, and obesity.

Several community-based, structured physical activity programs are proven to reduce arthritis symptoms and teach participants how to safely increase their physical activity to manage arthritis and other chronic conditions. Learn more about effective physical activity programs for yourself or to implement in your community.



ExeRcise is Medicine Greenville, SC



The solution to one of the greatest health problems of the 21st century

Exercise is Medicine® (EIM) is a global health program designed to improve the health and well-being of people in our community through a prescription of physical activity, lifestyle changes and education from physicians and healthcare providers. EIM is committed to establishing physical activity as a standard in health care and is integral in the prevention and treatments of diseases. Timmie is an absolute joy! She was here today because SHE wanted to make a lifestyle change, not because her doctor told her she had to. She told me she wanted to set goals for herself and reach them so she could be the "poster child for EIMG" (her exact words

Connect your patients to 12-week physical activity program for the prevention and treatment of chronic diseases through Exercise is Medicine Greenville® (EIMG®)

Vision

EIMG® inspires health by establishing physical activity and lifestyle changes as a standard of care for the prevention and treatment of physical inactivity, obesity and chronic diseases.



What is EIMG®?

A clinic-to-community referral program guided by trained exercise professionals

- · Already integrated in the Prisma Health EHR
- Used by 27 Prisma Health clinics
- Connects patients to 12-week communitybased physical activity programs



Mission

EIMG® is committed to compassionately improving the health and well-being of South Carolina Upstate residents by providing physical activity and lifestyle changes where people live, work, and play, regardless of their ability to pay.

Where is EIMG® Available?

The EIMG® network supports physical activity programs offered by 7 community partners:

- · Prisma Health Life Center
- Greenville County YMCAs
- Oconee County YMCA



Design: 2013-2014

- Mary Jane Rogers, Prisma Health System Information Technology
 - Approval and Programming of the Exercise Vital Sign (EVS) into EPIC
- Scot Baddley, YMCA Chief Executive Officer
 - Partnership as the Community Care Team to deliver the EIMG Program
- Angelo Sinopoli, MD, Prisma Health Chief Medical Officer
 - A promise to deliver a high-quality, liability-mindful, EIMG Program around Total Health
 - 4 goals: reduce Obesity, A1c, Hypertension, and Dyslipidemia in Greenville Community









Design: 2014-2015

- Training and Credentialing of 24 EIM Professionals
- Proposal to Prisma Health for EIMG® Referral Coordinator
- 4-week "Operations Flow" (e.g. dress rehearsal) of Prisma employees
- RedCap Data Collection Training
- Prisma/YMCA/EIM Approval of Co-Branding and Marketing









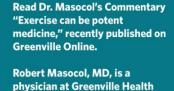
Implementation: 2015-2016

- EVS becomes enterprise across Prisma Health for adults
- Approval and hire of EIMG[®] Care Coordinator
- Pilot EIMG® with 2 clinical practices
 - Internal Medicine and Family Medicine
- Completion of EIMG® electronic referral pathway to YMCA
 - Provider Education provided through *Health Stream* and In-person
- EIMG® Program Design Task Force established
- EIMG® Advisory Board and Research Steering Committee established







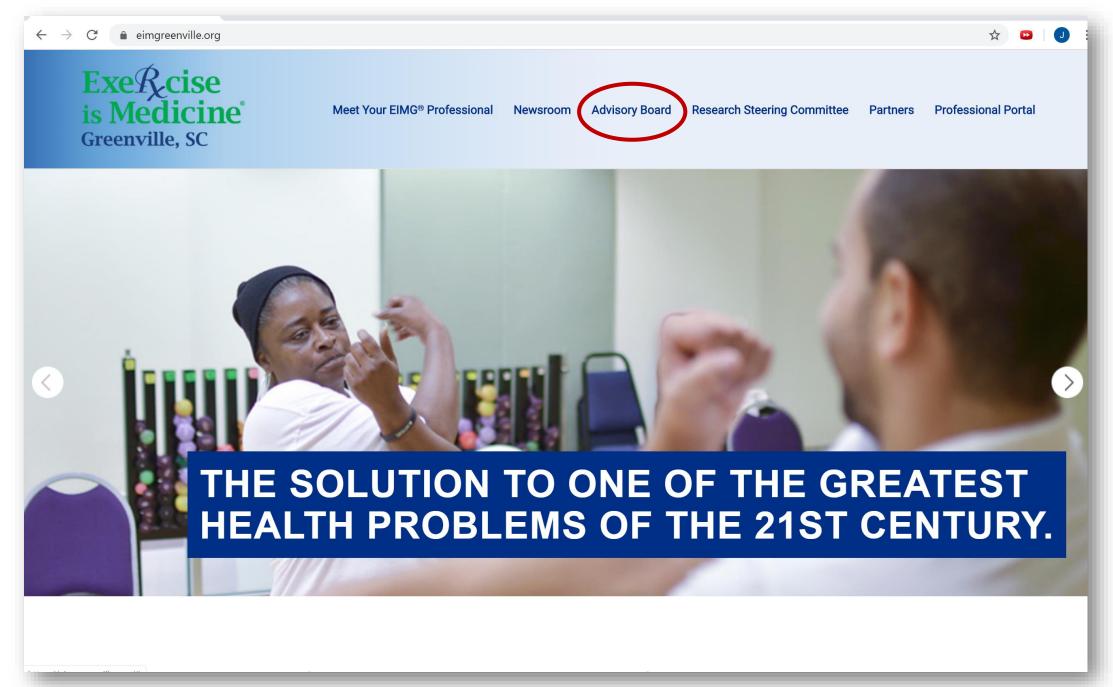


physician at Greenville Health
System's Center for Family
Medicine. He fellowship trained
in both family medicine and
sports medicine at GHS.











Advisory Board Established 2016



Peter Tilkemeier, MD

- Medical Director, EIMG®
- Chair, Internal Medicine



Jennifer L. Trilk, PhD

- Program Director, EIMG®
- Co-PI, EIMG®
- Professor USCSOMG



Peter Carek, MD

- Medical Director, EIMG®
- Chair, Family Medicine



Sam Franklin

 Chief Operating Officer YMCA of Greenville



Mark Stoutenberg, PhD

- Exercise is Medicine Global
- American College of Sports Medicine
- Co-PI, EIMG®



Libby Boerger

Manager of Life Center



Phyllis MacGilvray, MD

 Senior Associate Dean of Academic Affairs



Mary Jane Rogers, RN

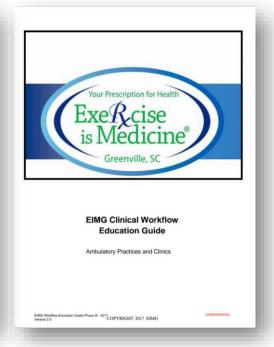
Manager, Clinical Informatics



Launch and Scale: 2016-2018

- August 2016 Pilot Launch of EIM Greenville[®] and Press Release
 - 4 Practices (2 Internal Medicine, 2 Family Medicine)
- Started scale-up in 2017: Systematically added practices as requested
 - 2018 Considered "At Maturity"
- Development and Dissemination of EIMG® Toolkit
 - Now available open sourced via USCSOMG request











PHYSICAL ACTIVITY

THE EXERCISE IS MEDICINE® **GREENVILLE PROGRAMME**

- Written by Jennifer L. Trilk and Ann Blair Kennedy, USA

According to the World Health Organization hypertension, 12% are diabetic and 7 to 8% is shifting payment away from episodic

diseases will be the result of lifestyle choices that include lack of exercise and overall are emerging as a major driver of rapidly reward physicians who successfully physical activity, poor diet and obesity:" In growing healthcare costs. For example, in promote healthier lifestyle behaviours in the United States, according to the Center Greenville County the estimated cost of their patients, also called 'value-based cares'. for Disease Control and Prevention, chronic physical inactivity in 2013 was \$1956 per diseases such as diabetes, heart disease, adult almost twice as much as to the United morbidity, mortality, and healthcare costs stroke, cancer and chronic respiratory States average of \$1050 per adult. Diabetes by increasing levels of physical activity, the diseases are the leading causes of mortality, alone is the seventh leading cause of death World Health Assembly adopted the WHO representing 50% of all deaths and 86% in South Carolina, claiming 1186 lives in 2012 Global Strategy on Diet, Physical Activity and of healthcare costs annually. In the local and total direct costs of hospitalisations and Health to promote regular physical activity community of Greenville, SC, USA, the emergency room visits related to diabetes for the prevention of chronic diseases8. South Carolina Department of Health and in Greenville County were over \$4.7 billion A change in physical activity behaviour Environmental Control report that of the in 2012^{6.7}. Therefore, helping people to make nationally, as well as globally, would have adults in Greenville County, nearly 28% lead healthier diet and lifestyle choices has a major impact on population health a sedentary lifestyle, 68% are overweight or become increasingly critical. Additionally, management by preventing, reducing

sickness-based fee-for-service care, toward Lifestyle and obesity-related diseases payment mechanisms that financially

Recognising the opportunity for reducing

• Change patients' environment at the interpersonal (healthcare provider) and organisational levels (GHS

implementing the

 Exercise Vital Sign (assessing physical activity behaviour)

programme)

 Physician referral into exercise intervention

Healthcare practices

Exercise is Medicine® **Greenville Co-ordinator**

- Continuity of care bridge between healthcare practices and community intervention
- Assess motivation to start exercise programme

• 12-week exercise intervention (60

minutes bi-weekly) taught by certified professional Increase patients

exercise self-efficacy, improve self-regulation, provide social support and assist in stress management

> **Community exercise** intervention (Life Center and YMCAs)

Improvement in population health

 Goal to treat the GHS system's goals to improve type 2 diabetes, hypertension, dyslipidaemia, obesity and/or a sedentary lifestyle

The goal is to place opportunity for health behaviour change at the centre of the patient's life, in the community where they live, work and play

(WHO): "by 2020, two-thirds of global are prediabetic34.

obese, 44% have high lipid levels, 40% have the United States healthcare environment and/or reversing morbidity and mortality

124 ASPETAR SPORTS MEDICINE JOURNAL



Participating Practices

39 Participating Clinics; Reach > 400 miles²



Department of Family Medicine

CFM Greenville
Greenville Family Medicine
Family Medicine Mountain View
Travelers Rest Family Medicine
Riverside Family Medicine-Eastside
Travelers Rest Family Medicine
Woodward Adult Family Medicine

Department of Internal Medicine

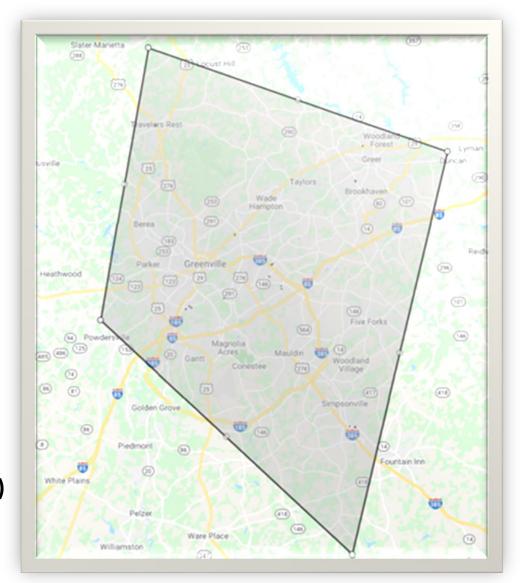
Internal Medicine Clinic
Cross Creek Internal Medicine
Internal Medicine Associates
Heritage Pediatrics & IM
Cypress IM - Patewood
Internal Medicine-Simpsonville
Prisma Health Pediatrics & IM
Five Forks Internal Medicine
Carolina Internal Medicine

Specialty Clinics

Diabetes Prevention Program
Cancer Institute CIOS
Weight Management Institute
Endocrinology Specialists
OB/GYN Center

Oconee Clinics

CFM Oconee
Family Medicine – Walhalla
Mountain Lakes Family Medicine
FM & IM – Seneca (future)
Seneca Medical Associates (future)



ExeRcise is Medicine Greenville, SC

Community PA Facilities

Area: >350 miles²

7 facilities in Greenville & Oconee Counties













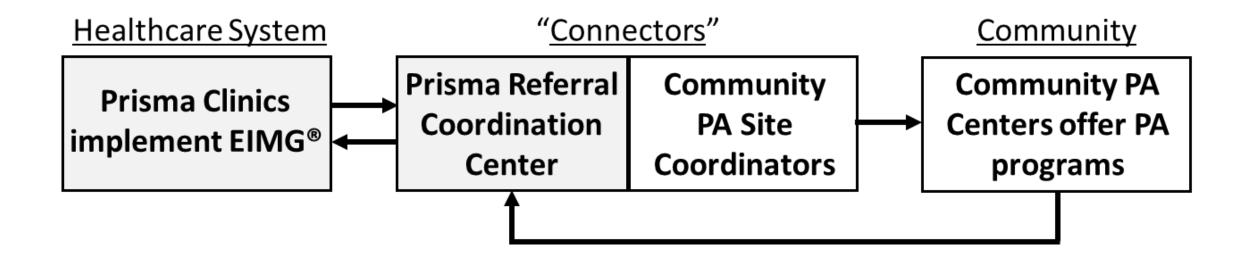
Prisma Health Life Center, Greenville
Caine Halter YMCA, Greenville
Prisma Health Family YMCA, Simpsonville
Eastside YMCA, Taylors
Verdae YMCA, Verdae
George I. Theisen YMCA, Travelers Rest
Foothills YMCA, Seneca (Oconee County)





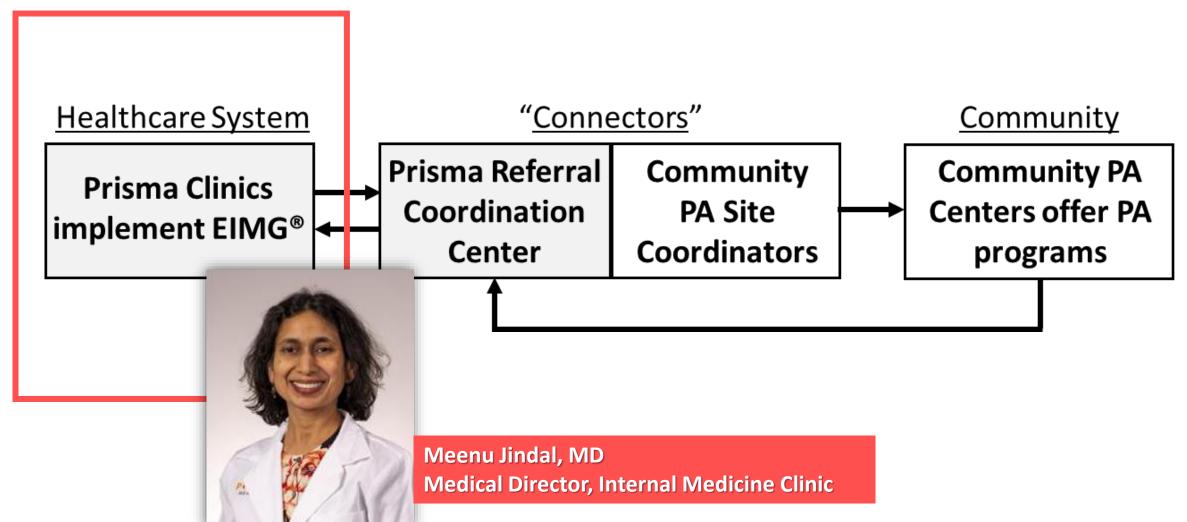


Program Flow





Program Flow



EIMG Clinic Room Poster

ExeRcise is Medicine Greenville, SC

Exercise is Medicine Greenville® (EIMG®) is proud to offer a 12-week program for adults who are looking to make a positive impact on their own health. The program includes 60-minute exercise and health education sessions that meet twice a week, and are led by an EIMG® Professional. An individual membership with unlimited access to the assigned EIMG® facility location is included during the 12-week program.









Who?

- Patients engaging in <150 min/week of physical activity
- Patients diagnosed with, or at-risk for, chronic health conditions (such as high blood pressure, Type 2 Diabetes, high cholesterol)
- · Patients with abnormal BMI
- · Patients with musculoskeletal weakness and/or pain

*Patients identified with high risk conditions may be referred to clinical rehabilitation programs.

Where?

EIMG® is available at the following locations:

- PRISMA Health Life Center
- · Caine Halter Family YMCA (Downtown)
- Verdae YMCA (Greenville)
- Eastside Family YMCA (Taylors)
- PRISMA Health Family YMCA (Simpsonville)
- George I. Theisen Family YMCA (Travelers Rest)

How?

Request a referral from your Healthcare Provider
 (Providers must review risk factors and co-morbidities for appropriate referral.)

Cost?

 \$249 covers the full 12-week program (individual facility membership with program)

(Financial assistance available based on income. Payment plan is available.)

EIMG Brochure

ExeRcise is Medicine Greenville, SC

VISION

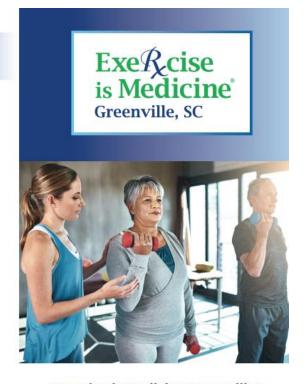
Exercise is Medicine Greenville* inspires health by establishing physical activity and lifestyle changes as a standard of care for prevention and treatment of disease.

MISSION

Exercise is Medicine Greenville*
provides an evidence-based,
community program committed to
compassionately improving the
health and well-being of South
Carolina Upstate residents through
providing physical activity and
lifestyle changes where people live,
work, and play, regardless of their
ability to pay.

EIMG® Program Coordinator 864-455-4392

EIMGreenville.org



Exercise is Medicine Greenville®
(EIMG®) is proud to offer
A 12-WEEK PROGRAM
for adults looking to make a
positive impact on their health.

"I can't be there with the patient at the gym, so I love knowing that there is someone there to encourage them and make sure they are progressing safely towards a healthier lifestyle."

-Prisma Health Internal Medicine Physician

WHAT?

60-minute exercise and health education sessions that meet twice a week for 12 weeks and are led by an EIMG® Pro Trainer

WHO?

- Patients engaging in less than 150 min/week of physical activity
- Patients diagosed with, or at-risk for, chronic health conditions (such as high blood pressure, Type 2 Diabetes, high cholesterol)
- Patients desiring a healthier weight
- Patients with musculoskeletal weakness and/or pain

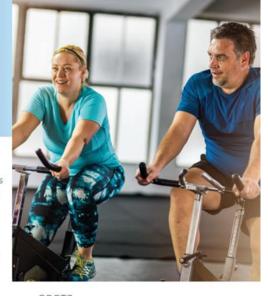
HOW?

Request a referral from your Prisma Health Provider

WHERE?

EIMG® is available at the following locations:

- Prisma Health Life Center (Downtown Greenville)
- Caine Halter Family YMCA (Downtown Greenville)
- Verdae YMCA (East Greenville)
- Eastside Family YMCA (Taylors)
- Prisma Health Family YMCA (Simpsonville)
- George I. Thiesen Family YMCA (Travelers Rest)



COST?

\$249 covers the full 12-week program, and includes an individual membership to the facility of choice

(Cost not covered by insurance, Financial assistance available based on income, Payment plan also available.)

"When I started the program I really thought there would be more people like myself that were overweight and feeling hopeless. However, I was pleasantly surprised. We had all types in our program, different ages and different body types and sizes. It was so diverse and I found it comforting to be part of a group of great people, all with their own reasons for being there. I discovered that exercising was more enjoyable with a group to talk to, work out with, and get to know."







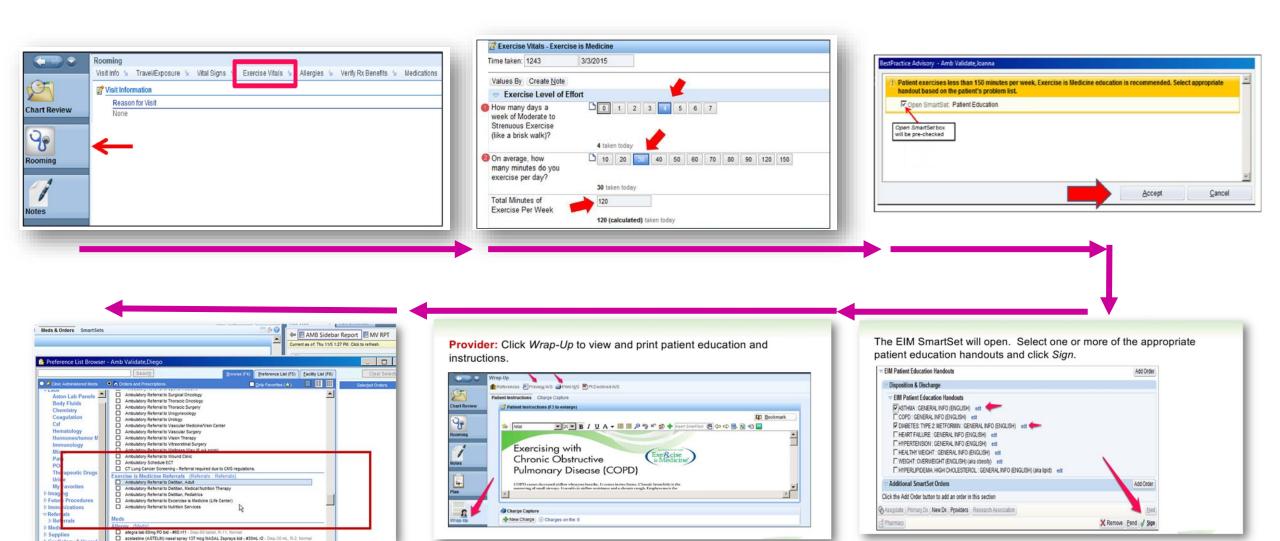








Electronic Health Record (EHR) Referral Programmed in EPIC



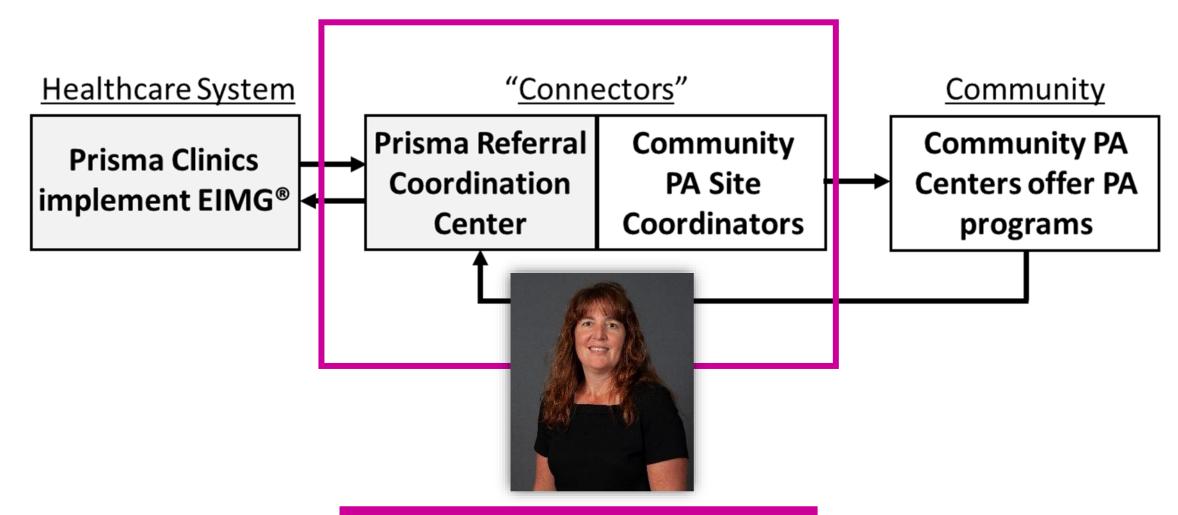


Placing a Referral to EIMG®

- 1. Obtain the Exercise Vital Sign (EVS)
- 2. Complete the Risk Severity Assessment
- 3. Obtain the Consent and Release of Information forms



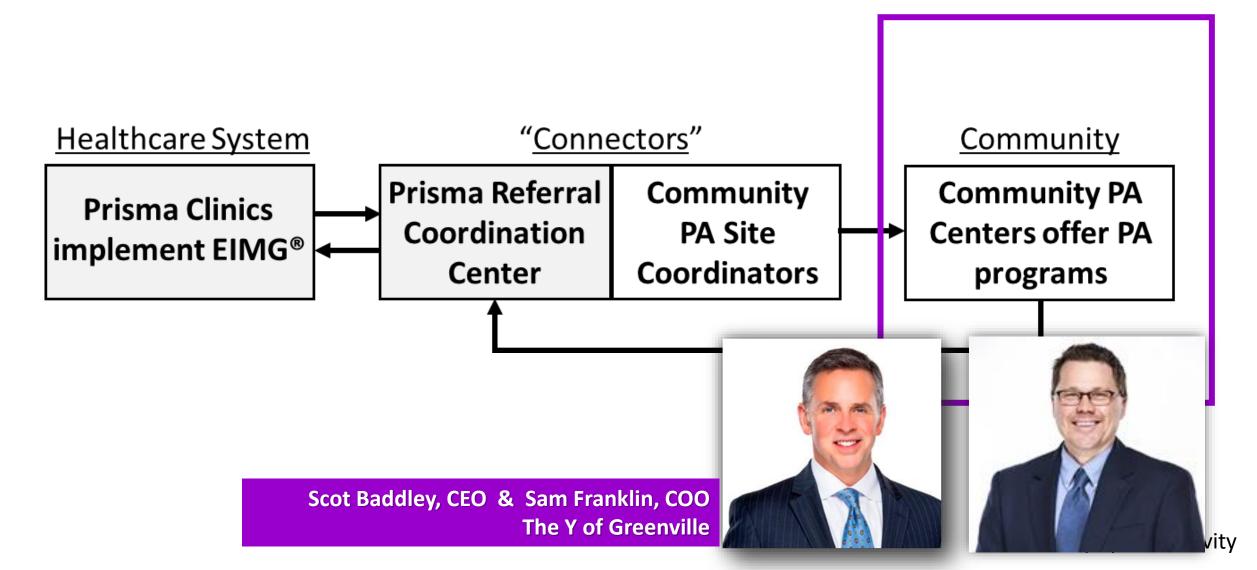
Program Flow: "The Bridge"



Stephanie Eskuri, RN, Care Coordinator



Program Flow





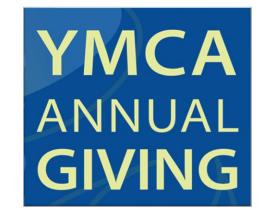
YMCA is a Strategic Partner



\$249 for the 24 sessions and a membership for the duration of the program

No one is turned away for an inability to pay

Over \$350,000 raised for the program







EIMG Financial Aid Report 2016-Present

		Total Non-Scholarship	.,
Year	Total Scholarship Provided	Revenue	% Scholarship of Total Rev
2016	\$1,537	\$796	66%
2017	\$3,686	\$1,791	67%
2018	\$7,983	\$5,771	
2019	\$10,240	\$21,648	32%
2020			
2021	\$6,723	\$8,611	44%
2022	\$3,657	\$6,705	35%
To: 10/13/23	\$6,338	\$7,719	45%

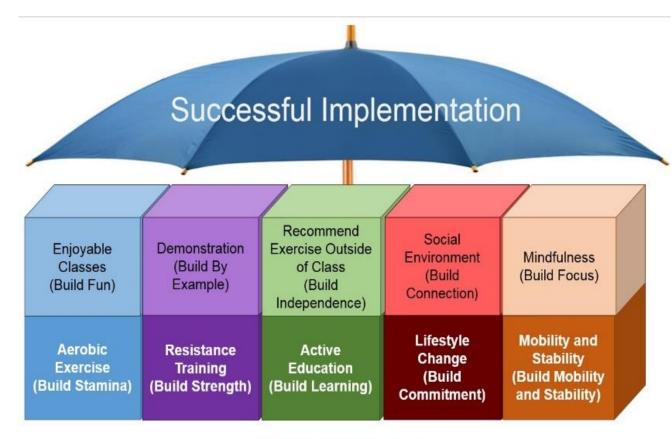
			% of Total Participants on
Year	Total Participants	Participants on FA	FA
2016	22	4	18%
2017	142	29	20%
2018	201	51	25%
2019	231	66	29%
2020			
2021	65	36	55%
2022	46	19	41%
To: 10/13/23	55	39	71%



Program Delivered by Highly Qualified Professionals







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- 12-weeks, 2x/week, 60-min sessions
- Behavior Change Focused to Increase Patient Self-Efficacy
- Flexible and Adaptable with Essential and Recommended Strategies to Reach Goals



EIMG PA Program:

"Move to Learn" patient education provided at every visit

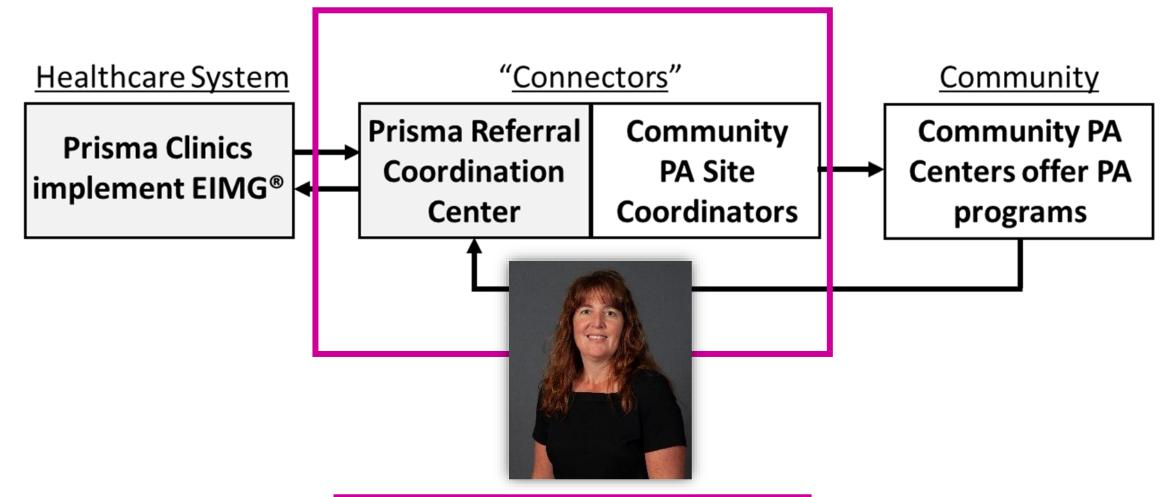


Week	#	Topic	
1	1	Planning for Success	
	2	Identify Barriers	
2	3	Set Goals	
	4	Water Works Wonders	
3	5	Exercise & Weight Loss	
	6	Flexibility	
4	7	Stress Management	
	8	Stick To Your Plan	
5	9	Snacking	
	10	Don't Go It Alone	
6	11	Intensity Intelligence	
	12	Aerobic and Strength Training	
7	13	METS vs WATTS	
	14	Map Your Success	
8	15	Feeling Great!	
	16	Get More From Less	
9	17	The Truth About Carbs	
	18	Fast Facts for Fats	
10	19	Build On Proteins	
10	20	Packing Healthy Lunches	
11	21	SMART Goals	
11	22	See the Finish Line!	





Program Flow: "Closing the Loop"



Stephanie Eskuri, RN, Care Coordinator



2022 data:

- 210 patients completed the program (>60% graduation rate)
- Patients with hypertension receiving usual care, referred by their HCP:
 - \downarrow Body weight (p = 0.001)
 - ↓Systolic & Diastolic BP (p < 0.001)
- Graduating patients highly satisfied w/ program & personnel: >4 on a 5-point Likert scale
- As of October 2023, EIMG has expanded to 39 clinics with > 600 patients onboarded
- Pilot for Prisma Health Team members N=200
- Duke Endowment and NIH R56

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Preventive Medicine Reports

journal homepage: www.elsevier.com/locate/pmedr

Design and implementation of a clinic-to-community, physical activity health promotion model for healthcare providers

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ARTICLEINFO

Keywords: Community health Disease prevention Exercise Health behavior Noncommunicable disease

ABSTRACT

Due to the worldwide burden of noncommunicable disease, the American College of Sports Medicine (ACSM) launched a global health awareness initiative in 2007 called Exercise is Medicine® (EIM®) to create awareness in healthcare providers in promoting physical activity to their patients. To transition awareness into action, Exercise is Medicine Greenville® (EIMG®) launched in 2016 through a first-of-its-kind partnership between a medical school, large healthcare system, and community organization to comprehensively integrate physical activity as a primary prevention strategy into their health system. The EIMG® model connects patients referred by their healthcare provider due to diagnosis of a physical inactivity and/or noncommunicable disease to community partners who provide evidence-based physical activity programs as a population health management strategy. The EIMG® program is inclusive of all patients referred and provides an "open door policy" through the YMCA scholarship fund. Through 2019, 210 patients completed the program (>60% graduation rate). Patients receiving usual care by their healthcare provider decreased body weight (p < 0.001) and systolic blood pressure (p = 0.042). Patients receiving usual care by their healthcare provider who were referred with hypertension decreased body weight (p = 0.001), and both systolic and diastolic blood pressure (p < 0.001). Graduating patients were highly satisfied with the program and program personnel (>4 on a 5-point Likert scale). Aligning healthcare and community partners to implement a clinic-to-community model for patients with noncommunicable disease may be a beneficial population health promotion strategy. Future efforts will be to refine the referral process, scale the model, and continue to inform national health promotion strategies.

1. Introduction

The Centers for Disease Control and Prevention (CDC) reports that 53% of US adults meet the Physical Activity (PA) Guidelines for aerobic PA (i.e. 150 min/week of moderately-intense PA), and 23% meet both aerobic and muscular strengthening recommendations (Centers for Disease Control and Prevention, 2017). PA and structured exercise are well established methods of decreasing chronic disease prevalence through multiple mechanisms including reduction of blood pressure and body weight (Donnelly et al., 2009). Unfortunately, the CDC also reports that global chronic disease deaths from cardiovascular disease (17.9 million) and diabetes mellitus (1.5 million) are linked with physical inactivity (Centers for Disease Control and Prevention, 2021). While strategies to improve PA on a population level are needed, several

reports demonstrate that healthcare providers (HCPs), who potentially have the best opportunity to affect population health, lack training, confidence, time, and reimbursement models to provide appropriate counseling in lifestyle behaviors that include PA (Astin et al., 2008; Rogers et al., 2006; Hébert et al., 2012).

Due to the U.S. and worldwide burden of physical inactivity-related chronic diseases (Lee et al., 2012), the American College of Sports Medicine (ACSM) launched a global initiative in 2007 called Exercise is Medicine® (EIM®) with a goal to demonstrate the importance of PA in the healthcare sector and to assist HCPs in an evidence-based clinical approach to promote PA to their patients (Lobelo et al., 2014). Subsequently, ACSM and Kaiser Permanente convened a consensus meeting in 2015 with a goal of making PA assessment and prescription a medical standard of care (Sallis et al., 2016). Also in 2015, Heath et al. reported

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^{*} Corresponding author.



Testimonials



- "Excellent program/awesome team here; I felt they cared about my progress and kept me engaged on meeting goals."
- "This was encouraging and helpful in the social aspect of my life."
- "This program is remarkable! I have never felt so welcomed. I enjoy the comradery with other participants & would recommend this program & instructor to anyone!"



Buy-In: Hospital System and Community

- Continually contacted by national health care systems, eager to know process of implementing EIMG® into their systems
- EIMG® is recognized system-wide and throughout our community; enormous community support



WH.GOV



• UNIVERSITY OF SOUTH CAROLINA SCHOOL OF MEDICINE

GREENVILLE: The University of South Carolina School of Medicine Greenville will make a \$4.8 million in-kind donation to help implement its open-source Lifestyle Medicine curriculum in all interested medical schools. It will also provide guidance to the National Board of Medical Examiners, the primary organization assessing competency of medical providers, on adding questions and content related to lifestyle medicine. Finally, the school will provide 637 health systems and 755 YMCA associations with consulting and free access to its *Exercise is Medicine Greenville* toolkit, a comprehensive, 12-week program for using exercise



\$8 Billion in New Commitments as Part of Call to Action for White

House Conference on Hunger, Nutrition, and Health

to mitigate risk for chronic diet-related diseases.



