

## Arthritis Council

### **Arthritis Council Strategy 1 Workgroup Summary** *Partnerships and Strategies to Sustain and Disseminate AAEBIs*

**Thursday, June 13, 2024, 2:00 P.M. ET**

**Workgroup Charge:** The NACDD Arthritis Council's Strategy 1 Workgroup aims to provide a platform for national and state partners to engage in discussion about all aspects of AAEBI capacity building, delivery, and sustainability including but not limited to partnerships, planning, promotion, implementation, coupling, referrals, and evaluation.

**Participants:** IA, MI, MN, MT, NC, NH, OK, WV, CDC, OAAA

#### **Discussion on Partnerships and Strategies to Sustain and Disseminate AAEBIs**

- **Partnering to incorporate AAEBIs and arthritis strategies into other CDC funded or chronic disease related programs**
  - Successful partners around embedding AAEBIs
    - NC – WISEWOMAN and DPP through cross referrals, into WWE self-directed; cross training group leaders and meeting with individuals in both program areas
    - MI - In the process of working with the CDC diabetes program in MN and seems there is more interest at the level of cross referral with NDPP and DSMES than there is in a more formal WWE 'enhanced' self-directed.
      - WWE is an approved WISEWOMAN Healthy Behavior Support Service (HBSS)
      - MN has a similar referral path for diabetes programs
    - NACDD continues to work on collecting data on coupling the WWE and NDPP programs to create the evidence base
    - WV – working to convene a meeting of chronic disease programs at the WV Dept of Health and Human Resources
      - Arthritis team is on a learning collaborative with the CVH program and has suggested partnering on EBIs
      - WV now has access to WWE portal so creating a strategy to work with Bureau of Senior Services to use for clients that have an interest
      - Team is working with Active Southern WV in 11 counties; staff can use the WWE portal; there are over 100 Community Captains who will potentially use the WWE program in the OAAA Portal
      - Currently working to map AAEBI leaders throughout state
      - Many AAEBIs are part of the evidence-based program list in the 5-year Aging Plan
      - Meeting with Senior Centers, Board of Directors to share information about the AAEBIs and promote the new OAAA WWE portal that is available in WV
    - MT – NDPP health coaches are cross trained in WWE

- Recently partnered with the Nutrition and Physical Activity Program and working to partner with WISEWOMAN
  - Reminder of Engage discussion post - [Incorporating arthritis into other existing CDC-funded programs, such as heart disease, stroke, diabetes, falls prevention, and tobacco control initiatives](#)
  - NH – partnering with diabetes (Emily is the arthritis and diabetes program coordinator)
    - A referral to WWE is required
    - Arthritis program works closely with WISEWOMAN and has multiple AAEBIs that are approved as a HBSS; the cost of these programs is covered by WISEWOMAN
      - Note that WWE must be enhanced or group format, not SD for WISEWOMAN
        - MI noted that self-directed removes some of the barriers identified by their priority population, so it is interesting that SD isn't approved
        - IA has WWE Enhanced SD approved as a HBSS; they lost WISEWOMAN program funding this year, but the hub is serving as a WWE Enhanced SD referral source for the VT WISEWOMAN program
      - TJQMBB has extensive research/evidence so making the HBSS case for this program was easy
  - MN – partners closely with diabetes, CVH, dementia and SagePlus (WISEWOMAN) programs
- **QUESTION: Are there any programs or organizations that funded arthritis states would like to partner with?**
- Discussion around partnership with heart disease/CVH projects and the programs that are approved for CVH.
    - These programs are called lifestyle management programs (e.g., Tops, Curves, etc.)
    - NH is working to make the case for AAEBIs to be included in the CVH approved program list; TJQMBB is likely to be approved in NH, but not WWE
      - With TJQMBB there are research articles that show the direct correlation between participation in program and lower blood pressure.
    - Concerns from states around the lack of information on how to submit for CVH/heart disease program approval
    - Suggestion that NACDD/CDC connect with heart disease/CVH program to see what evidence is necessary for approval as a lifestyle management program or what is lacking in the AAEBIs
      - There may need to be specific outcomes around blood pressure or weight loss measures with the AAEBIs to be approved for CVH
      - Could also look into justification/evidence around the specific activity (e.g., walking) and the reduction in blood pressure, blood glucose, etc.
      - Explore the opportunity to work with AAEBI program developers to provide outcomes that will help justify programs for other chronic

diseases like CVH/heart disease. NACDD will follow up on this opportunity.

- OAAA team will look into additional co-morbidity data for AAEBIs to support partnering
  - Note that OAAA is focused on developing standards this year so no new programs will be approved as AAEBIs
- WV is looking into putting together a small study to help make the case for WWE and other chronic diseases
- Medicaid partners – in NH NDPP is a covered benefit; currently working to get PAVS as a screener for physical activity; would like AAEBIs to help with social needs and address social needs screening
- Managed Care partners - WV is working with programs to approach and educate managed care organizations on covering some of the AAEBIs, as coverage can serve as a good marketing tool
- OR is working on reimbursement pathways with Medicaid so there is an opportunity to learn from them as their work continues
- WV is working with partner Quality Insights (QIO) and training them on some of the AAEBIs (e.g., CDSMP and CPSMP)
- Are there any states that have had success in partnering with dementia, healthy aging, Alzheimer's, injury or falls prevention programs?
  - NC partners with CDSME and falls prevention grantees; created a healthy aging NC resource center
  - MT is beginning to work with BOLD grant colleagues, and just joined their coalition
  - MN is are connected to their BOLD grant as well but still working through what that partnership could look like
  - Lisa shared that perhaps creating capacity with AAEBIs to deliver programs that are also falls, Alzheimer's, etc., related EBIs might help with future funding for other disease programs
    - Note that the September Peer Sharing/TA webinar is falls related
    - Link to AAEBIs that are also falls prevention approved - <https://oaaction.unc.edu/wp-content/uploads/sites/623/2024/03/AAEBI-Falls-Prevention-1pager.pdf>
  - Iowa State University has research project that is looking at WWE as a falls prevention program; partner Unity Point, promotes and holds a Tai Chi class as a part of falls prevention effort; research study ends 9/29/2025
  - NC has had some success in partnering with the UNC Health Injury Prevention Coordinator and Trama program; they are using WWE to support falls prevention; did their own internal research and found the benefit and low cost of WWE to support falls prevention was worth it.
- **What are states doing to integrate arthritis strategies into regional or state plans?**
  - IA is working with partners in diabetes and integrating arthritis strategies through the HALT platform
  - WV has arthritis and chronic disease strategies woven into the WV Physical Activity Plan; team sits on several other committees so there are other opportunities to integrate arthritis strategies

- NC has Healthy Aging NC initiative/AAEBIs included in the State Aging Plan through partnership with the Division of Aging
- MT shared that NCHPAD presented their WWE adaptation guide to independent living centers (CILs) and they are working to continue to integrate.
  - o Note that the August Peer Sharing/TA webinar will focus on this topic
  - o Discussed the opportunity to work with policy, systems and environmental change programs and have AAEBIs support those PSE strategies
  - o Discussed the opportunity to partner with state or regional parks, Departments of Natural Resources, and others that oversee greenspaces to look at the built environment to support physical activity and add in arthritis friendly trails
    - o MT shared that they recently presented at the Montana Parks and Recreation Conference to promote and support programs; this resulted in one location being trained in all of the arthritis programs that are offered

### **Announcements and Sharing**

- Next Strategy 1 Workgroup is July 11<sup>th</sup> at 2:00 P.M. ET
- New link - [REGISTER](#) for calls beginning July 2024