# **Roadmap for Obesity Disease Management** Action Checklist

To provide patient access to obesity care that delivers positive outcomes this Roadmap for Obesity Disease Management details 36 specific actions across 10 solution elements within 3 solution areas to address the complex, cross-cutting challenges that this disease poses.

## Solution Area I: Patient Engagement, Identification, and Diagnosis

Healthcare providers must be able to **identify, diagnose, and treat** people with obesity such that the person feels confident that if they engage in the healthcare system, they will be treated respectfully as patients. These 11 actions prepare providers and build their capacity to proactively engage patients to begin effective treatment.

Solution Elements	Action Components
A comprehensive, public communications program	<ul> <li>Message content that is tailored to specific audiences, utilizing evidence-based information</li> </ul>
	Breadth & Depth of Message Penetration: Disseminate across multiple platforms simultaneously for a deep penetration that would generate a paradigm shift in our assumptions about obesity and its care
	□ Apply measures of success on the communications program
Build more comprehen- sive obesity education for care providers across healthcare systems	<ul> <li>Build obesity identification and care into medical, nursing and pharmacy school curriculum. Include obesity training in licensure tests.</li> </ul>
	□ Implement obesity care coordination training programs at nursing schools
	<ul> <li>Create mandatory Continuous Medical Education (CME) training programs for the disease and care of obesity</li> </ul>
	<ul> <li>Educate health systems on federal accessibility and equipment requirements to provide care for people living with obesity</li> </ul>
Normalize patient out- reach processes to initi- ate medical treatment for obesity care	Identify and engage new patients
	Consistent documentation of people with obesity by each HCP
	Create a pre-appointment checklist
	<ul> <li>Develop patient information materials that outline obesity as a disease and obesity care options</li> </ul>

## **Solution Area Ii: Shared Capability Building**

Patients and providers need the support of a coordinated, evidence-based, and continually learning healthcare system with aligned incentives for all to spur measurably improved outcomes. These 17 simultaneous actions across 4 solution elements create structures that aid rather than impede excellent obesity care.

Solution Elements	Action Components
Metrics development	<ul> <li>Integrate training around obesity-related coding and billing procedures in medical education programs.</li> </ul>
	Build improved and non-biased obesity coding system
	<ul> <li>Engage all Coding and Coding assessment agencies to coordinate their updates to codes for obesity.</li> </ul>
	Identify and coordinate the diversity of coding and metric innovations that are under development to navigate the pool of information available beyond BMI assessments and pool the information to accommodate best use of evidence for patients, providers and payers.
Quality and Outcomes Monitoring	<ul> <li>Develop a strategic set of peer-review articles that bring attention to the current state of coding and quality measures</li> </ul>
	<ul> <li>Build partnerships across scientific agencies and institutions focused on obesity care improvements</li> </ul>
	<ul> <li>Create NCQA behavioral health awards that recognize quality obesity care programs</li> </ul>
	<ul> <li>Partner to develop an NCQA- sponsored Innovation Summit focused on Obesity.</li> </ul>
Data collection & Evidence Generation	□ Embrace the current chaos: With evidence-based dialogues, clarify specif- ic data and analysis that is needed to a) move to clarity about the differen- tiating factors that determine disease severity; b) convey to patients what illnesses threaten their health, based on their specific disease profile
	<ul> <li>Encourage development of an aggregator marketplace to produce out- comes-based evidence</li> </ul>
	<ul> <li>Establish bridges across public-private partnerships to collect and share data across institutional boundaries</li> </ul>
	<ul> <li>Create evidence generation and evidence-sharing channels that allow health systems infrastructure to be updated more quickly (e.g., clinical guidelines, coding for reimbursement and clinician education programs)</li> </ul>
	<ul> <li>Plan for data collected to meet requirements at different levels of sophis- tication.</li> </ul>
	□ Include patient-reported outcomes in data collection processes
Align incentives across stakeholders	<ul> <li>Stakeholders must continue to experiment, designing programs that improve health outcomes</li> </ul>
	□ Share research/outcomes from private contracts
	$\hfill\square$ Build a resource navigation tool to share information and decision tools

#### **Solution Area Iii: Integrated Care**

Presuming coverage, this Roadmap contains 8 actions in 3 solution elements to drive delivery of tailored obesity care customized to the context and goals of each patient.

With data generated and research conducted, validated treatments, including ancillary services and medical treatments, can be offered to patients. These services will be utilized along care pathways that have been developed following medical standards of care.

Engaged patients will partner with HCPs as they jointly navigate these new opportunities for care that is customized to their disease status, local resources, and life conditions.

Solution Elements	Action Components
Validated Treatments	□ Share research results that assess ancillary services' use and effective- ness
	<ul> <li>Publish a quality review of telehealth and digital technology (e.g., apps) that support customized delivery of obesity care while maintaining care quality.</li> </ul>
Evidence-based care path development	Build patient journeys for obesity sub-populations that are based on analysis of successful utilization of the full, validated treatments and are structured to respond flexibly to new evidence.
	<ul> <li>Work with relevant medical societies and patient associations to estab- lish regular and timely updates to standards of care, inconsideration of new evidence</li> </ul>
Customized delivery	<ul> <li>Develop Artificial Intelligence (AI) programs to coordinate all services</li> </ul>
	<ul> <li>Integrate digital services that support customized access to resources</li> </ul>
	Build evidence from customized delivery into communication and edu- cation programs
	□ Identify sub-populations that remain outside healthcare settings

For more downloadable Roadmap resources, such as the complete report and infographic, visit newdigs.tuftsmedicalcenter.org/obesity

#### About the Center for Biomedical System Design

The Center for Biomedical System Design in the Institute for Clinical Research and Health Policy Studies at Tufts Medical Center is dedicated to improving health outcomes by accelerating appropriate and timely access for patients to biomedical products, in ways that work for all stakeholders. The Center designs, evaluates, and catalyzes the real-world implementation of system innovations that are too complex and cross-cutting to be addressed by a single organization or market sector. Its members include global leaders from patient advocacy, payer organizations, biopharmaceutical companies, regulatory agencies, clinical care, academic research, and investment firms. <u>https://newdigs.tuftsmedicalcenter.org</u>.