The GEM Study

Goals for Eating and Moving (GEM) is a 24-month Weight Management study for patients seen by primary care teams at the Veterans Affairs and Montefiore Medical Group sites

Why is GEM Needed? Over a third of Americans have obesity and therefore are at risk of developing several chronic diseases. Modest weight loss through comprehensive lifestyle programs (e.g. MOVE! or the Diabetes Prevention Program) can reduce cardiometabolic risk, but patients may not have access or choose to participate. Further, primary care teams often lack the time and training to counsel patients about obesity.

Description of GEM Intervention: GEM is a technology-assisted health coaching intervention with input from patients, doctors, nurses, and other members of the healthcare team. We train non-clinician health coaches to work with patients to create collaborative, individualized weight management goals, address common barriers to achieving these goals, and facilitate communication with other team members. The health coaches and patients use the GEM tool on tablet computers to help create a weight management plan. When the patient then sees the healthcare team, this plan becomes part of their comprehensive care.

We designed GEM to promote 5As Counseling
The 5As is an evidence-based framework that Medicare uses to pay providers for weight management counseling. The 5As guides healthcare teams to Assess risk and stage of change, Advise weight loss and behavior change, Agree on goals, Assist via addressing barriers (motivational interviewing (MI)), and Arrange to follow-up or refer patients for further treatment (see Table).

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<th>HEALTH COACH</th>
<th>PCMH TEAM</th>
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*PCMH= Patient Centered Medical Home
**Aims and Methods of the GEM Study**

**AIMS:**
- 1: Test the impact of the GEM intervention on weight change, fruit and vegetable intake, physical activity, and clinical outcomes
- 2: Identify predictors of weight loss related to goal-setting processes and GEM components
- 3: Determine the impact of GEM on obesity-related counseling practices and attitudes of PCMH teams

**METHODS:**
- We will randomize 11 PCMH teams at the VA and 8 PCMH teams at MMG to either the GEM intervention or Enhanced Usual Care
- We will screen 2,615 eligible patients to enroll 512 patients in the study.

**Randomization at the PCMH Team Level**

**ARM 1: Enhanced Usual Care**
- Baseline Study Visit
  - Baseline Survey
  - "Healthy Living Messages"

**ARM 2: GEM**
- Baseline Study Visit
  - Baseline Survey
  - GEM Goal-Setting Tool
  - Health Coaching

**Regular PCMH visits**
- (EMR reminder to 5As counsel)
- + Telephone coaching

**Follow-up in-person study visits at 6, 12, and 24 months**

Inclusion Criteria: Age 18-69, BMI ≥ 30kg/m or BMI ≥ 25kg/m with obesity comorbidity (e.g. sleep apnea, metabolic syndrome, high cholesterol), within primary care team care with at least one prior visit with their provider in the past 12 months, access to a telephone, and ability to travel for in-person evaluations at baseline, 6, 12 and 24 months