

04.26.25 POLICY PROPOSAL 9

Title: Augmenting Self-motivation for Improving Cardiometabolic Risks with Professional Coaching, eCoaching and Using Tools of Medical Cybernetics - Thoughts How SCMA Could Support Medical Practices to Set Up Diabetes Prevention and Lifestyle Improvement Programs

Full Name*

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Designation*

Physician

Are you submitting on behalf of a county medical society, specialty society, or other member?*

No

If YES, please indicate the name of the county medical society, specialty society, or other member(s) for which you represent.

(If NO, you may skip.)

Submission / Idea*

Research has shown that professional coaching significantly improves engagement in lifestyle interventions, leading to better cardiometabolic risk profile and outcomes /1/. Current professional Coaching used with eCoaching can achieve better results than eCoaching alone /2/. It is expected that eCoaching will develop fast and will help empower individuals to reach their full potential and achieve their goals by fostering self-awareness, developing skills, and facilitating personal growth through a supportive and collaborative relationship. The essence of eCoaching includes a continuous process of personalized data collection, decision-making, and personalized hybrid recommendation generation combining AI-results and query rules. Applying principles of Medical Cybernetics including mathematical modeling of trends /3/ can add additional values such as:

- Providing real time metrics of cardiometabolic health to monitor and support healthy aging
- Promoting education
- It can connect all participants in local health care services and related entities of the nutrition, fitness and wellness industry, fostering community health
- It could ignite social entrepreneurship and unite activists, local small businesses and other entities related to health to build health-conscious communities

- Insurance companies could learn more about risks with implications for value-based reimbursement of services.

By fostering high-quality motivation and self-efficacy, health and well-being coaches help patients become more internally motivated and confident in their ability to make meaningful health changes and maintain them over time /1/.

/1/ <https://www.acc.org/Latest-in-Cardiology/Articles/2025/02/01/42/Prioritizing-Health-Journey-of-the-Health-and-Well-Being-Coaching-Profession#:~:text=Research%20has%20shown%20that%20HWC,Encourage%20behavior%20change>.

/2/ Spring B, Pfammatter AF, Scanlan L, et al. An Adaptive Behavioral Intervention for Weight Loss Management: A Randomized Clinical Trial. JAMA. 2024;332(1):21–30. doi:10.1001/jama.2024.0821

/3/ Ori Z (2024) Reaching for Cardio-Metabolic Fitness and Resilience through Self-Healing and Guided Individualized Cyber-Therapy: An Opportunity to Reenergize Primary Care. Quality in Primary Care ISSN: 1479-1064, Volume 32 • Issue 03 • 012, <https://www.primescholars.com/archive/ipqpc-volume-32-issue-3-year-2024.html>, 10.36648/1479-1064.32.3.14

Evidence / Support for Proposal*

Professional Coaching along with eCoaching is structured, evidence-based, and increasingly delivered via telehealth /4,5/. These programs begin with the enrollment and risk assessment process using patients' health data from electronic medical records along with laboratory and/or biometric results. This information helps tailor professional health coaching/ Coaching (session length, frequency, time frame). Patients then work with coaches to set personalized health goals and create evidence-based action plans focused on improving cardiovascular disease risk factors like diet, exercise, and stress management. Evidence strongly supports the value of diabetes prevention through coaching and lifestyle interventions, with studies showing a significant reduction in the risk of developing type 2 diabetes /6/. A high-intensity, lifestyle-based treatment program for obesity delivered in an underserved primary care population resulted in clinically significant weight loss at 24 months /7/.

/4/ Gordon NF, Salmon RD, Wright BS, et al. Clinical Effectiveness of Lifestyle Health Coaching. Am J Lifestyle Med. 2016;11(2):153-166.

/5/ Maddison R, Rawstorn JC, Stewart RAH, et al. Effects and Costs of Real-Time Cardiac Telerehabilitation: Randomised Controlled Non-Inferiority Trial. Heart. 2019;105(2):122-129.

/6/ Diabetes Prevention Program Research Group. Long-term effects of lifestyle intervention or metformin on diabetes development and microvascular complications over 15-year follow-up: the Diabetes Prevention Program Outcomes Study. *Lancet Diabetes Endocrinol.* 2015 Nov;3(11):866-75. doi: 10.1016/S2213-8587(15)00291-0. Epub 2015 Sep 13. PMID: 26377054; PMCID: PMC4623946.

/7/ Katzmarzyk, P.T., Martin, C.K., Newton Jr, R.L., Apolzan, J.W., Arnold, C.L., Davis, T.C., Price-Haywood, E.G., Denstel, K.D., Mire, E.F., Thethi, T.K. and Brantley, P.J., 2020. Weight loss in underserved patients—a cluster-randomized trial. *New England Journal of Medicine*, 383(10), pp.909-918.

Requested Action: What action is required to achieve this idea?

*(i.e. Enact legislation, have a state agency review an issue, enact an SCMA policy statement on a topic, or other action?)**

Consider making legislators aware of the importance of using eHealth tools for diabetes prevention and management of developing cardiometabolic risks with lifestyle interventions. Consider asking legislators to fund the needed eHealth tools Consider asking legislators to fund the educational programs needed to train the next generation of professional health coaches Consider promoting rural health practices by integrating eHealth tools into their practice specifically for diabetes prevention, obesity management, and cardiovascular disease management.

Why is the Requested Action important?*

After a decline in diabetes mellitus + cardiovascular disease-related mortality for a decade, there has been a reversal in trends, with rising mortality starting in 2014/8/. The worsening trend is largely driven by modifiable lifestyle-related risk factors. Lifestyle improvements play a pivotal role in preventing and managing cardiometabolic disease and many other chronic diseases like cancer and neurodegenerative diseases, including dementia. The health and well-being coaching field has evolved over the past decade into a well-respected partnership of coaches and patients focusing on physical, emotional, and behavioral health to improve cardiovascular and metabolic health and well-being /4, 9/.

/4/ Gordon NF, Salmon RD, Wright BS, et al. Clinical Effectiveness of Lifestyle Health Coaching. *Am J Lifestyle Med.* 2016;11(2):153-166.

/8/ Jain, V., Minhas, A.M.K., Ariss, R.W., Nazir, S., Khan, S.U., Khan, M.S., Al Rifai, M., Michos, E., Mehta, A., Qamar, A. and Vaughan, E.M., 2023. Demographic and regional trends of cardiovascular diseases and diabetes mellitus-related mortality in the United States from 1999 to 2019. *The American Journal of Medicine*, 136(7), pp.659-668.

/9/ Sforzo GA, Gordon NF, Peeke PM, Moore M. Health and Well-Being Coaching
Adjuvant to GLP-1 Induced Weight Loss. Am J Lifestyle Med. 2024; Nov
19:15598276241302273.

**If there are additional details not addressed above that you would like to share,
please provide them here.**

(If you feel that the above information is sufficient, you may skip.)