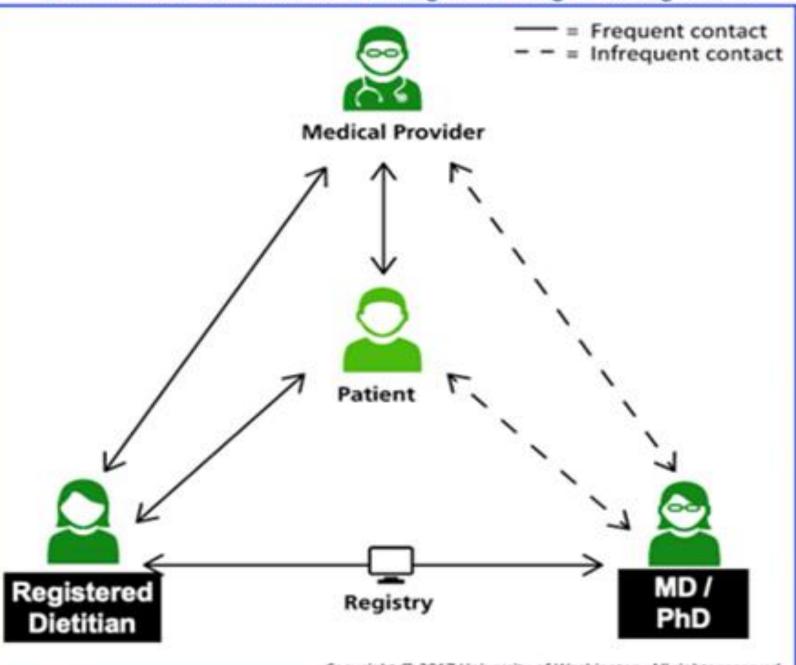
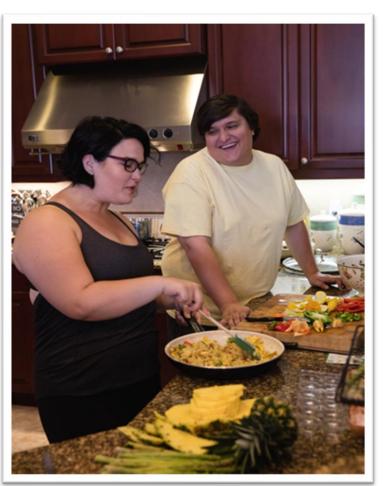


#### Collaborative Care Model for Integrated Weight Management



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# Telehealth Integrated Weight Management Expansion including GLP-1 Receptor Agonists Laura B. Langston, MHA and Sarah B. Hales, PhD, LISW-CP, CSOWM Medical University of South Carolina, Charleston, SC

## **OBJECTIVE**

This Integrated Weight Management (IWM) program was the first to adapt the Collaborative Care Model (CoCM) for weight management supporting its goal to better integrate treatment into primary care with a multi-disciplinary group of physicians, registered dietitians (RD), and administrative staff. As GLP-1 receptor agonists have had broad indications for obesity and cardiovascular disease, the FY2026 expanded, packaged, and entirely virtual, CoCM IWM service offers access, adherence, and program expansion.

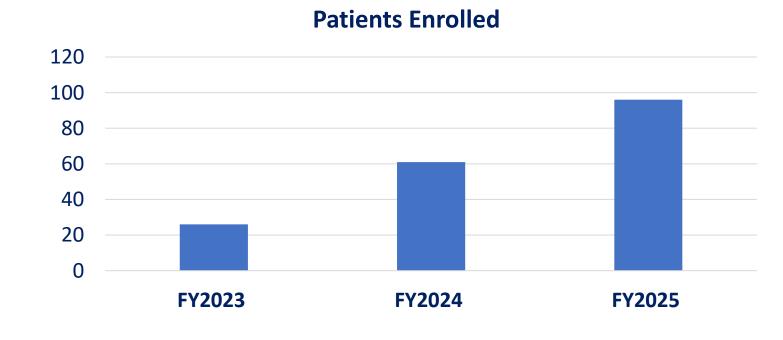
# **EVIDENCE**

As rates of overweight and obesity remain significantly higher (7th highest) in South Carolina (SC), compared to other states nationally, and the rural area population is at an increased risk of experiencing obesity with limited access to nutrition counseling for lifestyle change. The demand is not surprising in a state where 35% of adults and 17% of youth have overweight or obesity with obesity-related diseases taking a heavy toll. MUSC RDs and the PCP collaborate to counsel and educate both pediatric and adult patients on controlling portion sizes, tailoring healthy meal plans to the patient's personal and cultural food preferences and socioeconomic concerns, and incorporating physical activity.

# **BACKGROUND**

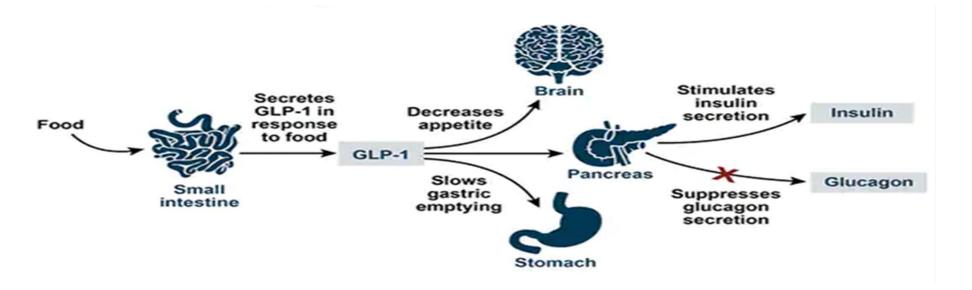
IWM program initiation was in April 2022 with patient enrollment at community-based outpatient primary care clinics following in January 2023. The program expanded from a pilot program serving four rural primary care clinics to 17 rural and urban primary care locations. Program results showed a patient engagement increase of 135% FY23 to FY24 and an increase of 57% FY24 to FY25.

FY2023	26
FY2024	61
FY2025	96



## **EXPANSION**

Patient access and quality improvements are underway with offering packaged care solely virtually (both primary care providers and care delivery) to reach underserved populations. For FY26 the service includes usage of GLP-1 receptor agonists prescribing. The multi-disciplinary group of care providers expands with pharmacy staff supporting both patients and the Virtual Primary providers prescribing. Pharmacy providers will offer patients administration of medication education in a learning style of choice, such as Teaching, Reading, or Watching, further supporting patient adherence.



# CONCLUSION

Among engaged patients, the Primary Care IWM program demonstrates promising, preliminary results to support weight management. Yet, more work is needed to consider patient readiness for behavior change to encourage improved uptake and sustained participation in dietary counseling. The packaged expansion including GLP-1 receptor agonists with entirely virtual care delivery offers increased patient convenience and thereby adherence further expanding access and care for decreased disease conditions for at risk SC patient populations.

# REFERENCES

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SCDPH Nutrition, Physical Activity, & Obesity Prevention accessed on September 23, 2025, <a href="https://dph.sc.gov/health-wellness/nutrition-physical-activity-obesity-prevention">https://dph.sc.gov/health-wellness/nutrition-physical-activity-obesity-prevention</a> Adapted from GLP-1 Agonists Presentation. Jesse Kadlec, MUSC PharmD Candidate 2023 Mikayla Yaskulski, MUSC PharmD Candidate. December 2022.

Learn more about the CoCM Programs for Nutrition & Mental Health

Hales, S., Koob, C., Harvey, J., Kruis, R., McElligott, J., & Ford, D. (2025). Implementing a virtual, collaborative care weight management program in rural primary care: Pilot results and insights. In press: Telemedicine Reports.