Disclosures

None

"Do you solemnly swear to listen to my advice?"

A day in the life

- Well visit – physical
- Well visit with acute
- Diabetes
- Anxiety/Depression
- Abdominal pain
- Menstrual changes
- Fatigue
- Insomnia
- Heartburn
- Hypertension

- Upper Respiratory VIRAL
- Autoimmune
- Thyroid
- Fibromyalgia
- IBS
- SIBO
- Back pain
- Osteoarthritis
- Dyslipidemia

- Obesity
- Medication requests
- ADHD
- Peri-Menopause
- Hair Loss
- Chronic pain
- Cancer
- Osteoporosis
- Pregnancy
- Well child

Lifestyle Medicine

- Exercise
- Stress Management
- Nutrition
- Social Support
- Avoid Risky Behaviors
- Sleep

Nutrition
- Diabetes
- COPD
- Hypertension
- CHF

Exercise
- Asthma
- MS
- Chronic pain
- Autoimmune conditions

Stress & Sleep
- Insomnia
- Depression/Anxiety
- Trauma
- Substance use
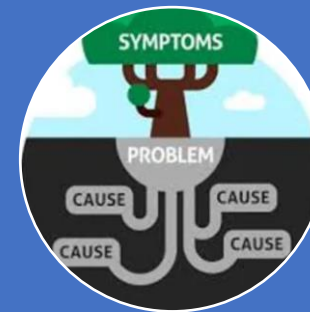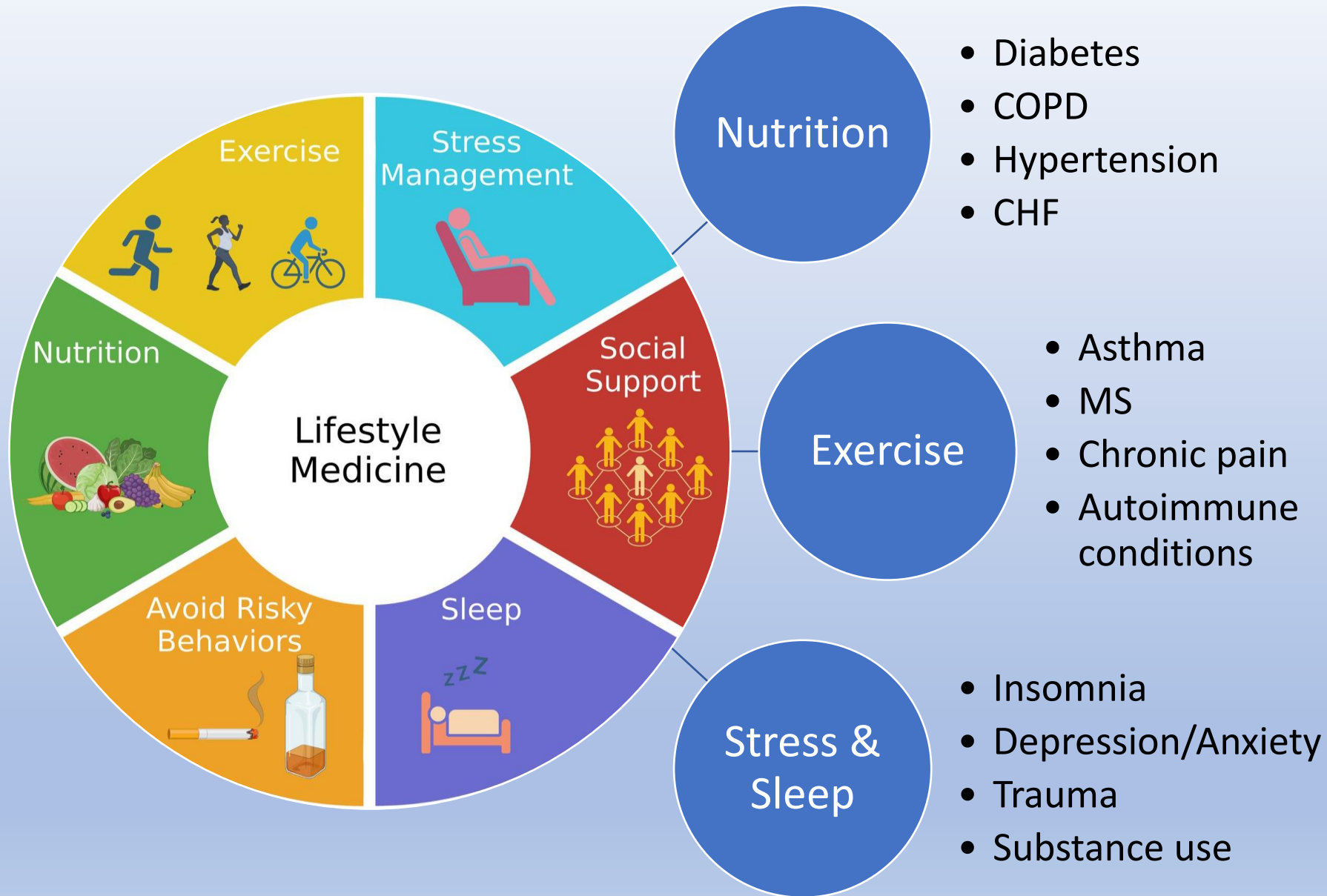
Leading causes of death in perspective

- terrorism
- war
- pregnancy & birth
- medical complications
- murder
- undetermined events
- mental health disorders
- transport accidents
- suicide
- musculoskeletal disorders
- diabetes
- non-transport accidents
- infections
- kidney disorders
- digestive disorders
- nervous system disorders

heart & circulatory disorders
cancer
respiratory disorders

NHS
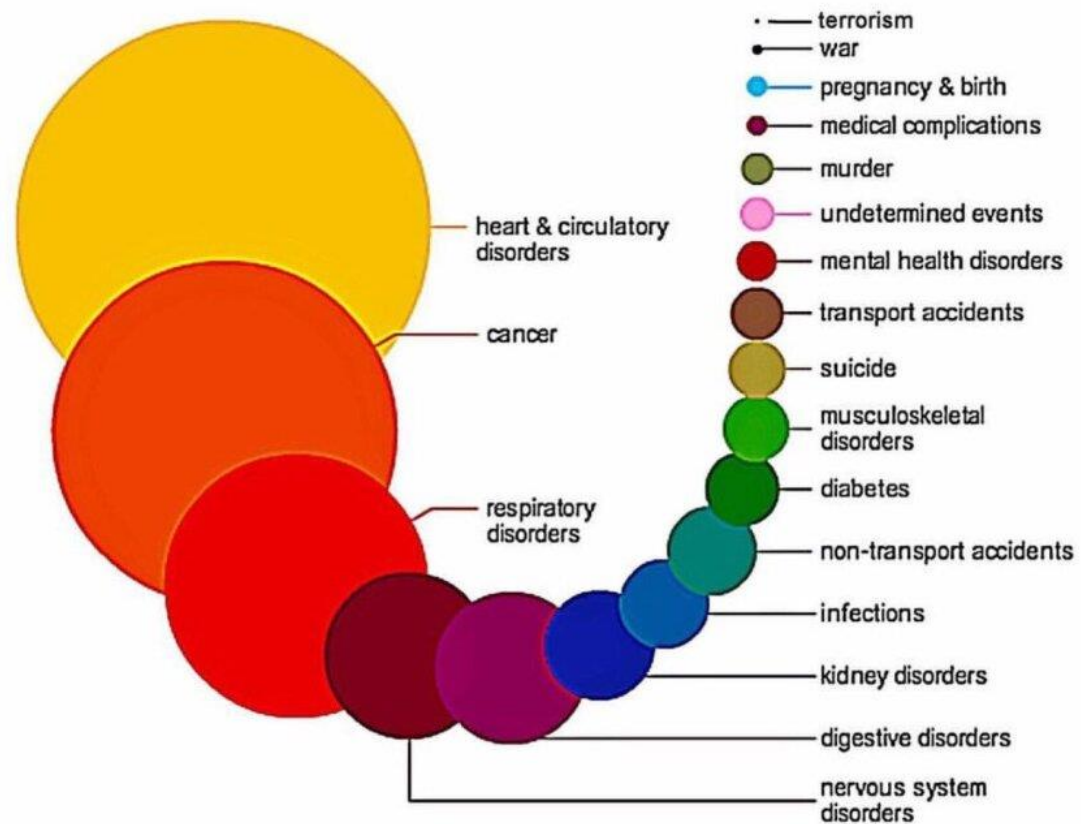
Risks leading to death in perspective

high blood pressure
smoking
high cholesterol
obesity

- war
- pregnancy & birth
- medical complications
- murder
- illicit drug use
- transport accidents
- non-transport accidents
- infections
- alcohol
- physical inactivity
- low fruit and vegetables
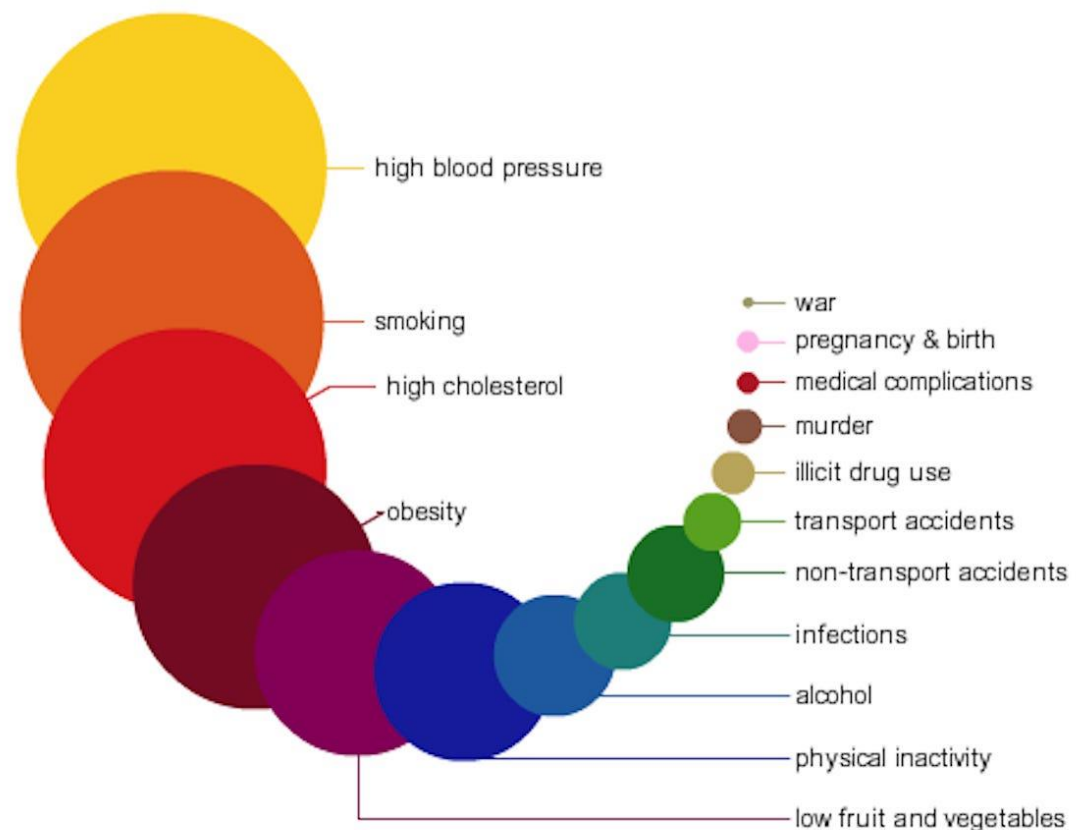
Sustainability

?

1 patient
per 1 visit

New plan?

Think outside the rooms?

Harvard Vanguard Medical

Yale Health

Kaiser Permanente

VA Medical Centers

University of Wisconsin Health

Cleveland Clinic

Traditional Visits VS. Group Visits
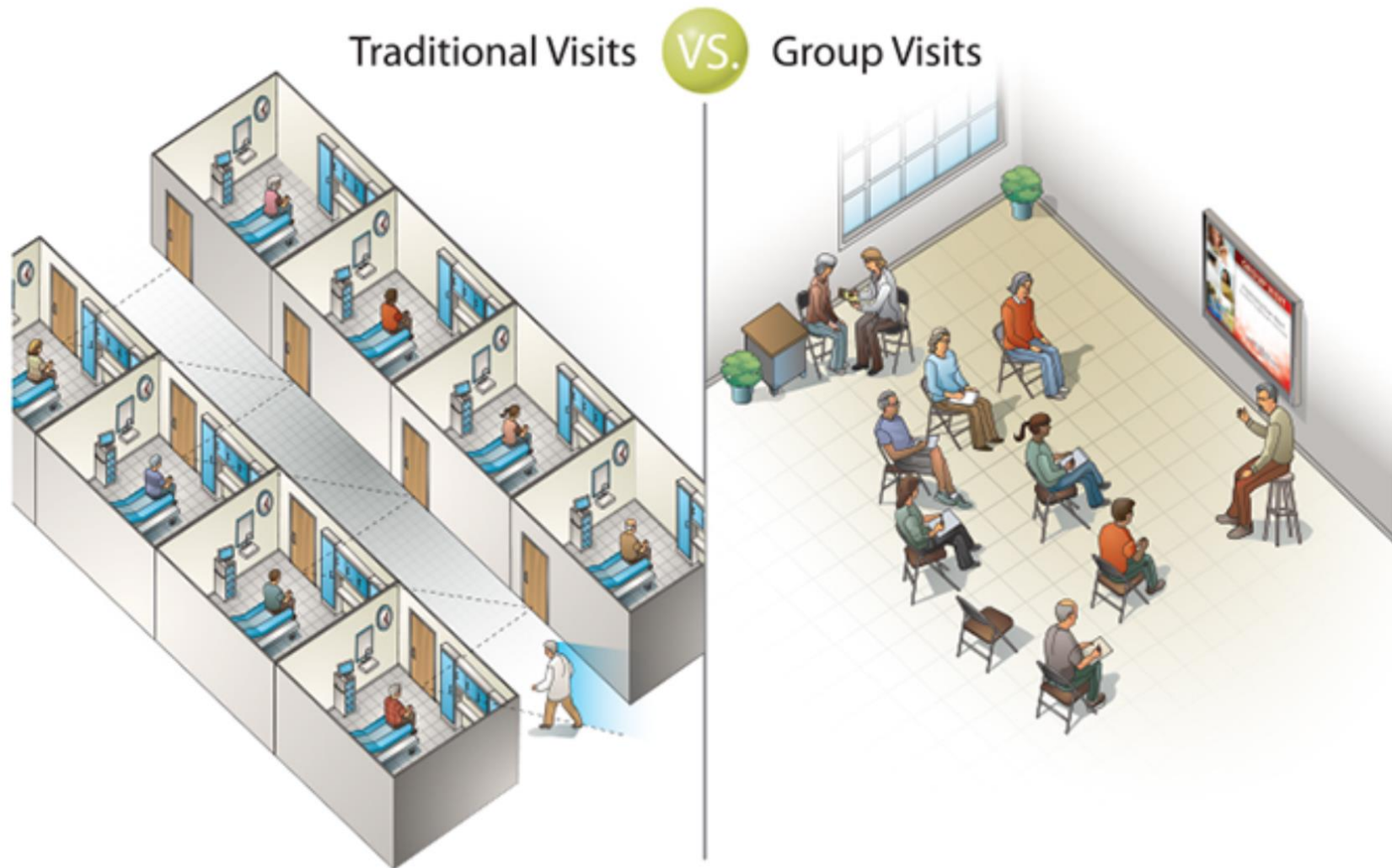
Tried for Diabetes care – Patient care improved

Sadur et al. (1999) Kaiser Permanente

- RCT 16-75 yo, A1c > 8.5%
- Visit clusters of 10-18 people monthly
- After 6 months
- 1.3 % vs. 0.2% decrease in A1c
- Lower rates of hospitalization
- Multidisciplinary approach
- Increase self-efficacy for DM care
  - Diet
  - Reduction in hypoglycemic events
  - Blood glucose

Trento et al. (2004) – 5 year RCT

Control Group

⬇ in control, knowledge and quality of life

SMA Group

⬆ in control, knowledge and quality of life

Clancy et al. (2007)

- Increased trust in physician
- Better at adhering to recommended screenings for both breast and cervical cancers

Overall patient benefits

Decreased ED use

Improved Quality of life

Improved self efficacy

Increased knowledge

Trust in Medical System

Physician satisfaction

- Repetitive education
- Provider scheduling flexibility
- More face to face
- No addition expertise needed
- Decrease patient wait time
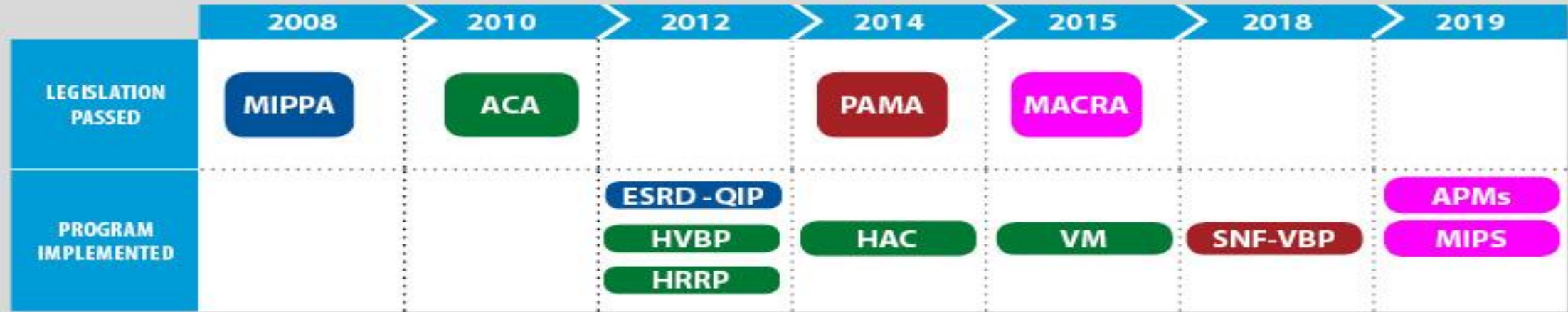- Patient satisfaction scores
- Patient activation
- Improved quality measures
- Population health status improved – values based reimbursement

VALUE-BASED PROGRAMS

	2008	2010	2012	2014	2015	2018	2019
LEGISLATION PASSED	MIPPA	ACA		PAMA	MACRA		
PROGRAM IMPLEMENTED			ESRD-QIP HVBP HRRP	HAC	VM	SNF-VBP	APMs MIPS

LEGISLATION

ACA: Affordable Care Act
MACRA: the Medicare Access & CHIP Reauthorization Act of 2015
MIPPA: Medicare Improvements for Patients & Providers Act
PAMA: Protecting Access to Medicare Act

PROGRAM

APMs: Alternative Payment Models
ESRD-QIP: End-Stage Renal Disease Quality Incentive Program
HACRP: Hospital-Acquired Condition Reduction Program
HRRP: Hospital Readmissions Reduction Program
HVBP: Hospital Value-Based Purchasing Program
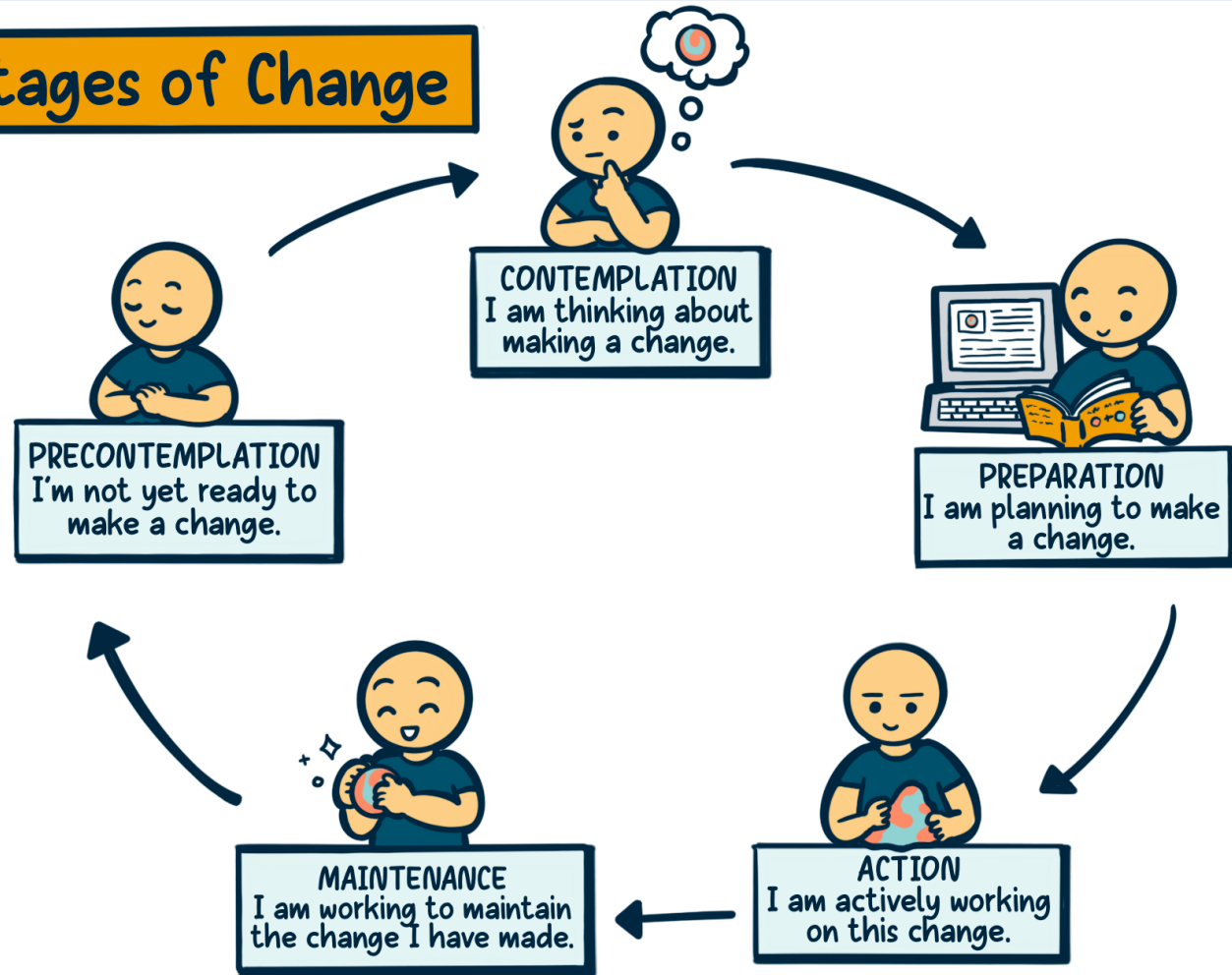**MIPS:** Merit-Based Incentive Payment System
VM: Value Modifier or Physician Value-Based Modifier (PVBM)
SNFVBP: Skilled Nursing Facility Value-Based Purchasing Program

Patient activation

Patients who feel competent to manage their own health or navigate the health care system.

Patient Activation and engagement

Odds of Hospital Use for Ambulatory Care-Sensitive Conditions After One Year, by Patient Activation Level
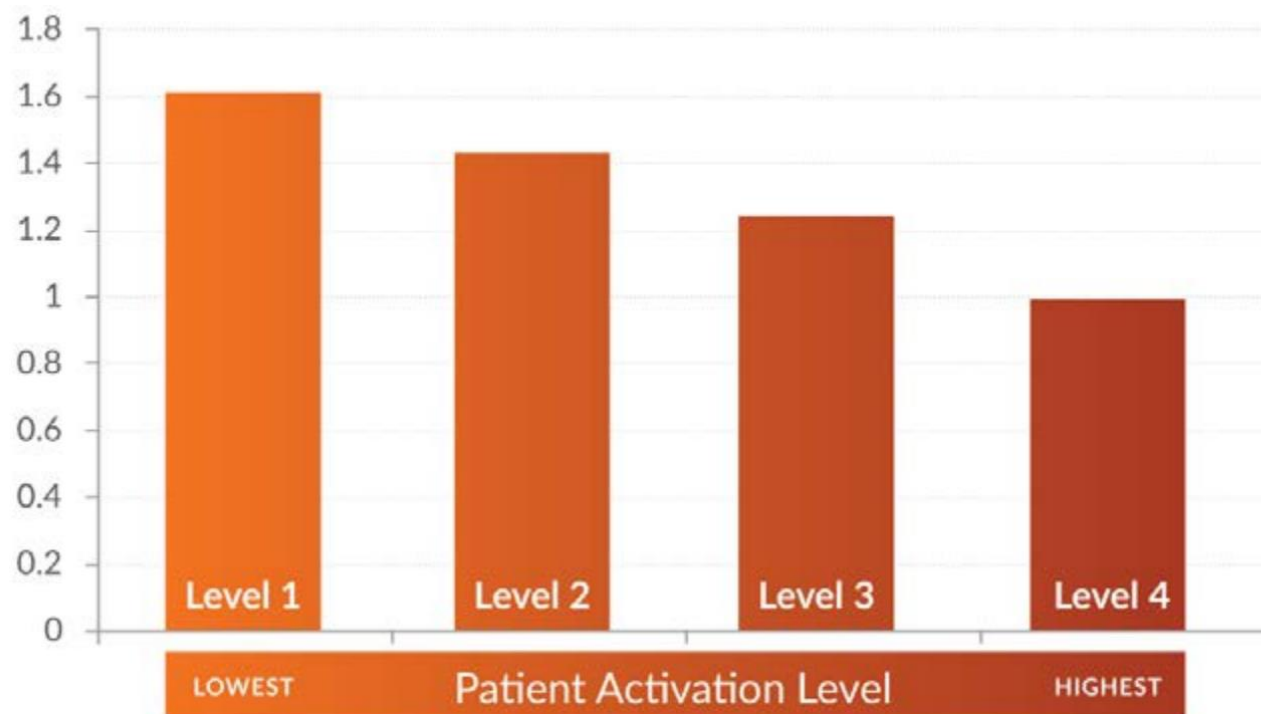
SOURCE Adapted from J. H. Hibbard, J. Greene, R. Sacks et al., "Improving Population Health Management Strategies: Identifying Patients Who Are More Likely To Be Users of Avoidable Costly Care and Those More Likely to Develop a New Chronic Disease," *Health Services Research*, published online Aug. 23, 2016.

Patient Activation scores

Lowest activation level - 25% more likely to develop a new chronic disease in the next year, compared to the highest activation level

Two years after baseline, 31% difference between the lowest and highest

62% greater likelihood of having an avoidable hospitalization compared to the most activated group one year later

Shared Medical Appointments

Details!

These rates are based off of the 2024 Medicare Physician Fee Schedule. Thanks to Reimbursement MIG leader and ACLM Diplomate, John Gobble

Billing Scenario for a Practice with a Physician and/or a Registered Dietitian Nutritionist (RDN)

Description	CPT codes	Unit Type	# Visits	RVU	Total RVUs	Team RVU	CF (CMS)	$ per visit	Arrived Cohort	Revenue for all visits	Income Hours	Rate/hour
group alone, without the help of another billable clinician. The physician billing scenario below is based on using either 99213 or 99214 E&M codes or a 99412 preventive medicine counseling code.												
E&M based SMA led by Physician, DO or MD	99213	Encounter	4	2.68	**10.72**		34	$364.48	10	$ 3,644.80	8	$ 455.60
E&M based SMA led by Physician, DO or MD	99214	Encounter	4	3.79	**15.16**		34	$515.44	10	$ 5,154.40	8	$ 644.30
Preventive Counseling SMA led by Physician, DO or MD	99412	Time based per hour	4	0.75	**3**		34	$102.00	10	$ 1,020.00	8	$ 127.50
Medical Nutrition Therapy (group) led by RDN	97804	Time based per 30 mins	8	0.425	**3.4**		34	$115.60	10	$ 1,156.00	8	$ 144.50
The cells below should be used to calculate potential revenue from an SMA when there is a Physician and Dietitian team who are co-leading the SMA. The billing scenario is based on a 99213 E&M visit by the physician and a 30 minute Medical Nutrition Therapy (MNT) group visit by a registered dietitian nutritionist (RDN). Both the physician and RDN bill for their services, but time cannot be double-billed.												
E&M-based SMA led by Physician with support of RDN	(physician) + 97804	Encounter	4	2.68	10.72	**12.72**	34	$432.48	10	$ 4,324.80	8	$ 540.60
	RDN	Time based per 30 mins	4	0.5	2							
Preventive Counseling based SMA led by Physician with support of RDN	(physician) + 97804	Time based per hour	4	0.75	3	**6.4**	34	$217.60	10	$ 2,176.00	8	$ 272.00
	RDN	Time based per 30 mins	8	0.425	3.4							

Billing Scenario for a Practice with a Non-Physician Provider, NP, PA, ND (SMA) and/or a RDN

Practice with Non-Physician Provider	CPT codes	Unit Type	# Visits	RVU	Total RVUs	Team RVU	CF (CMS)	$	Arrived Cohort	Revenue for all visits	Hours	Rate/hour
The cells below should be used to calculate potential revenue from an SMA when there is a Provider (NP, PA, ND) or a Dietitian leading the group alone, without the help of another billable clinician. The Provider billing scenario below is based on either 99213 or 99214 E&M codes or a 99412 preventive medicine counseling code												
Physician Provider, NP, PA, ND (SMA)	99213	Encounter	4	2.278	**9.112**		34	$309.81	10	$ 3,098.08	8	$ 387.26
Physician Provider, NP, PA, ND (SMA)	99214	Encounter	4	3.222	**12.888**		34	$438.19	10	$ 4,381.92	8	$ 547.74
led by Non-Physician Provider	99412	Time based per hour	4	0.6375	**2.55**		34	$ 86.70	10	$ 867.00	8	$ 108.38
Medical Nutrition Therapy (group) led by RDN	97804	Time based per 30 mins	8	0.425	**3.4**		34	$115.60	10	$ 1,156.00	8	$ 144.50
The cells below should be used to calculate potential revenue from an SMA when there is a Non-Physician Provider (NP, PA, ND) and Dietitian team who are co-leading the SMA. The billing scenario is based on a 99213 E&M visit by the provider and a 30 minute Medical Nutrition Therapy (MNT) group visit by a registered dietitian nutritionist (RDN). Both the physician and RDN bill for their services, but time cannot be double-billed.												
E&M-based SMA led by Non-Physician Provider with support of RDN	99213 MD/DO	Time based per hour	8	2.278	18.224	**21.62**	34	$735.22	12	$ 8,822.59	8	$1,102.82
	and 97804 (RDN)	Time based per 30 mins	8	0.425	3.4							
Preventive Counseling based SMA led by Non-Physician Provider with support of RDN	99412 MD/DO &	Time based per hour	8	0.6375	5.1	**8.5**	34	$289.00	12	$ 3,468.00	8	$ 433.50
	97804 (RDN)	Time based per 30 mins	8	0.425	3.4							

Planning

When to start and continue

Who are selected

Where will it be done

What will be discussed
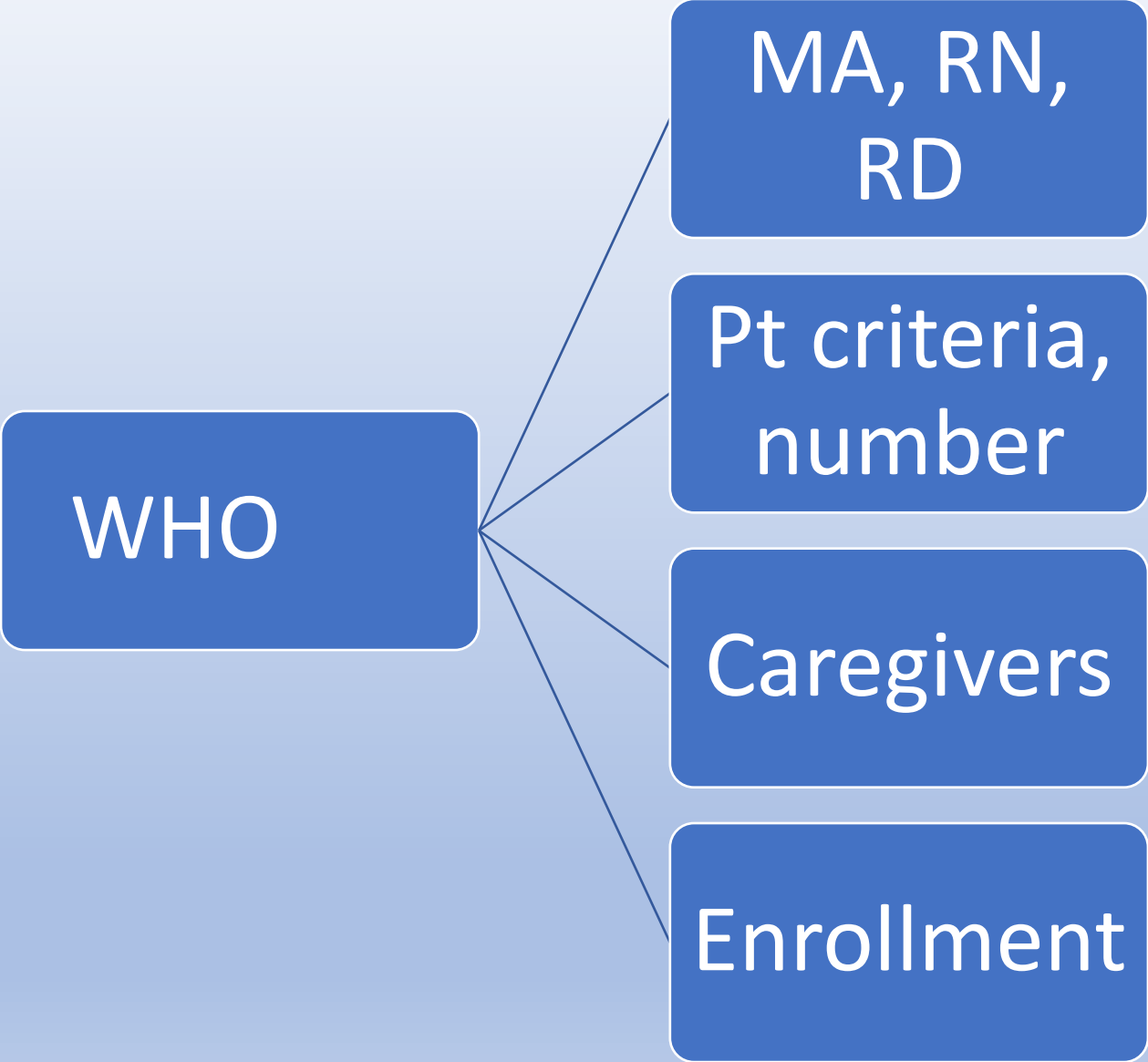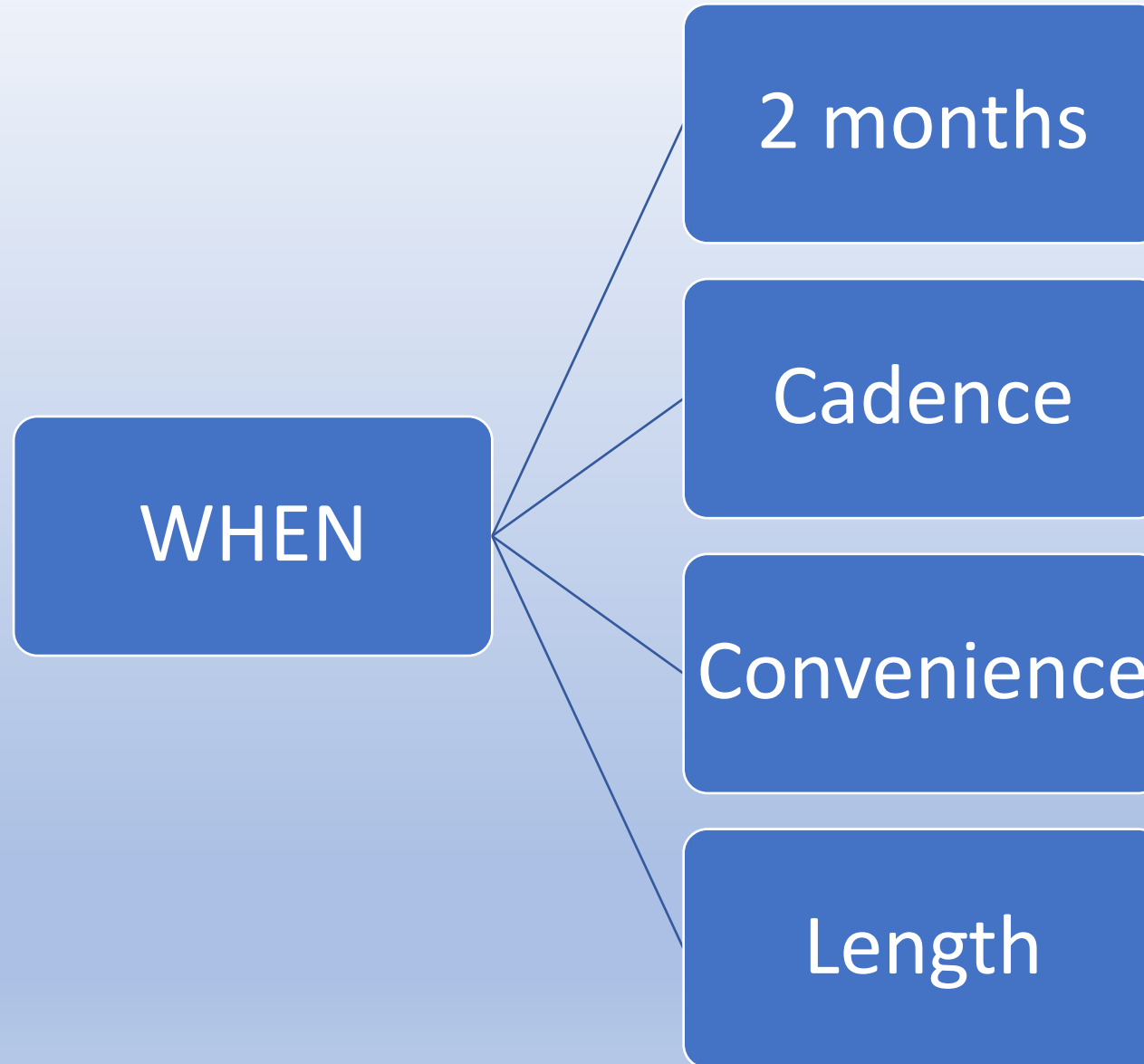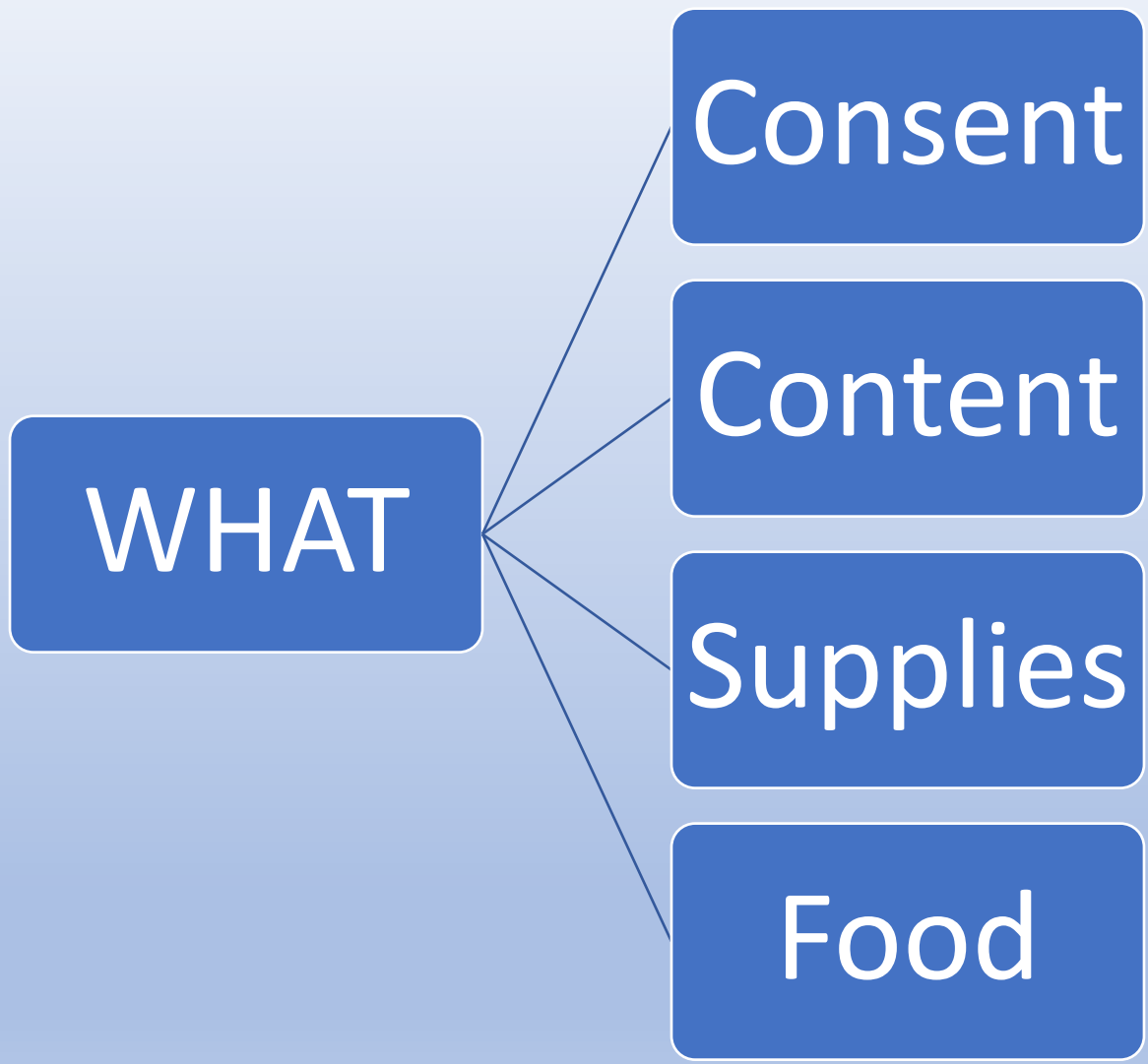
Components of the visit

Check in → Private vitals and triage → Introduction, consent forms → Provider → Education → Wrap up

SMA Flow

- Patient should arrive at least 20 minutes before
- Start the vitals process and triage
- Patients have a chance to settle and review forms, discuss with people around them
- Food and drinks
- Leave time for 1:1 appointments – can't be a separate visit
- Program begins promptly and ends promptly
- Wrap up

Setting the mood

- Start with a thought-provoking comment
- Goal is to get the patients talking to each other
- Avoiding a lecture style presentation
- Conversation style – semi circle and sitting with the patients
- Ask for stories – round robin participation
- Balancing participation of patients within and also the educator

Motivational Interviewing

- Learning outcomes
- Behavior change outcomes
- Clinical outcomes
- Quality of life outcomes
- Satisfaction outcomes
- Cost saving outcomes

Provider and Education

- Individual E/M visit – done somewhere in the vicinity of the group
- Few minutes
  - Assessing vitals
  - Reviewing the to do card
  - Asking patients how they feel about the program
- Education
  - Presentation with collaboration and discussion
  - Offering ample time for questions
  - AV use of powerpoint, videos and or hand outs

Post SMA

Documentation

- Scribe service
- Diagnosis and appropriate coding ONLY for EM time of physician
- Recommendation of OTC product, medication – ONLY then level 3
- Education portion DOES NOT count

Patient packet

- Evaluation
- Possible topics
- Was this useful

Team Plan

- Focus on patient – group relationship

- Goals to accomplish

- Dedicated leader to help guide things back to normal

- Avoid lecturing and taking the conversation away

- Keep it prompt

- Planning team

Commons issues

- Space

- Staffing

- Admin support

- Patient pool

- Data and charting

- Lackluster information or lecture like

- One patient takes over

- Poor planning

Lifestyle Medicine Pilot at Troy

Shared Medical Appointment

Program Invitation Letter

Dear [NAME]

I hope this letter finds you in good health and high spirits. We are excited to extend a special invitation to you to participate in our upcoming Pilot Lifestyle Medicine Program.

At Henry Ford Health we are committed to promoting holistic well-being and empowering our patients to achieve optimal health through evidence-based interventions. Our Lifestyle Medicine Program is designed to address various aspects of health, including nutrition, physical activity, stress management, and overall healthy living.

Program Details:

- **Format:** Small Group Sessions
- **Duration:** 4 weeks
- **Frequency:** 1 session per week
- **Location:** Henry Ford Troy
- **Start Date:** April 4th 9:00 am – 11 am Thursday (please arrive 15 minutes early)

This program is part of our ongoing efforts to explore innovative approaches to healthcare. By participating in the pilot program, you will not only receive personalized guidance from our experienced healthcare professionals but also contribute valuable insights that will shape the future of lifestyle medicine initiatives.

Here are some key highlights of the program:

- **Interactive Sessions:** Engage in interactive discussions and activities with a small group of like-minded individuals who share similar health goals.
- **Expert Guidance:** Benefit from the expertise of our healthcare team who will provide personalized advice and support throughout the program.
- **Goal Setting:** Establish achievable and personalized health goals to improve your overall well-being.
- **Community Support:** Connect with a supportive community that fosters motivation and accountability.

To confirm your participation or inquire further about the program, please reply via MyChart. Space is limited for the pilot program, but we intend on having more programs in the near future.

We believe that this program has the potential to make a positive impact on your health journey, and we would be honored to have you as part of our pilot group. Thank you for considering this opportunity, and we look forward to embarking on this together.

Wishing you continued health and wellness.

Sincerely,

Dr. Aarthi Chandarana

Global Health Form – Promis Adult Short From V1.0

Promis Adult Short Form V1.0 Global Health

Question	4/2/2024 5:17 PM EDT - Filed by Patient
In general, would you say your health is:	Excellent
In general, would you say your quality of life is:	Excellent
In general, how would you rate your physical health?	Excellent
In general, how would you rate your mental health, including your mood and your ability to think?	Excellent
In general, how would you rate your satisfaction with your social activities and relationships?	Excellent
To what extent are you able to carry out your everyday physical activities such as walking, climbing stairs, carrying groceries, or moving a chair?	Completely
In general, please rate how well you carry out your usual social activities and roles. (This includes activities at home, at work and in your community, and responsibilities as a parent, child, spouse, employee, friend, etc.)	Excellent
In the past 7 days	
How would you rate your pain on average?	1
How would you rate your fatigue on average?	Mild
How often have you been bothered by emotional problems such as feeling anxious, depressed or irritable?	Sometimes
PROMIS Adult Short Form-Global Health Score (Physical) (range: 16 - 68)	57.7
PROMIS Adult Short Form-Global Health Score (Mental) (range: 21 - 68)	59

Lifestyle Med Pilot at Troy

Month of April – Thursday morning 9-11 for 4 sessions

Team of MA, RD, PT, BH and Case Management(Different days)

Week 1: Introduction – PowerPoint on lifestyle medicine

- Six pillar education
- Trial of Tofu scramble and hibiscus tea
- Nutrition Goals for week – one plant based meal per day
- Group discussion of their thoughts on WFPB, barriers

Week 2: Nutrition with RD

- Go over what they experienced
- Wins and difficulties

Week 3: Physical Activity

- Physical Therapist – Yoga educator as well
- Laughing Yoga
- Chair Yoga
- Current lifestyle concerns
- Improving joint strength
- How to set up a daily/weekly/monthly routine

Week 4: Stress and Support

- Behavioral health provider
- Stress
- Sleep
- Tips and tricks
- Case Manager – RN

Group Medical Visit Co...

Group medical visits are medical appointments co...
patient discuss the patient's personal medical cond...

Because each patient will be disclosing personal he...
in group medical visits and the release of personal ...
not required in order to receive treatment from (IN...

Consent, Authorization to Dis...

By signing this Agreement, I consent to participate ...
(INSERT PRACTICE NAME). I authorize _____
physicians/allied health professionals conducting t...
my personal health information and other private i...
participants attending the group medical visit. I al...
family members, who attend the group medical vis...
disclosing such information. I acknowledge the po...
participants in group medical visits contrary to the...
risks associated with such disclosure. I understand...
dated and signed letter to _____
revocation will not prohibit _____
disclosures already made or taking any actions alre...
of such revocation. Further, I understand that such ...
_____ (INSERT PRA...
from receiving other types of treatment from ____
If not earlier revoked, this authorization will expire ...
_____ (INSERT PRA...

THE INFORMATION AUTHORIZED FOR RELEASE M...
CONDITIONS INCLUDING, BUT NOT LIMITED TO, ...
HEART DISEASE, DEPRESSION, ANXIETY, CONSTI...
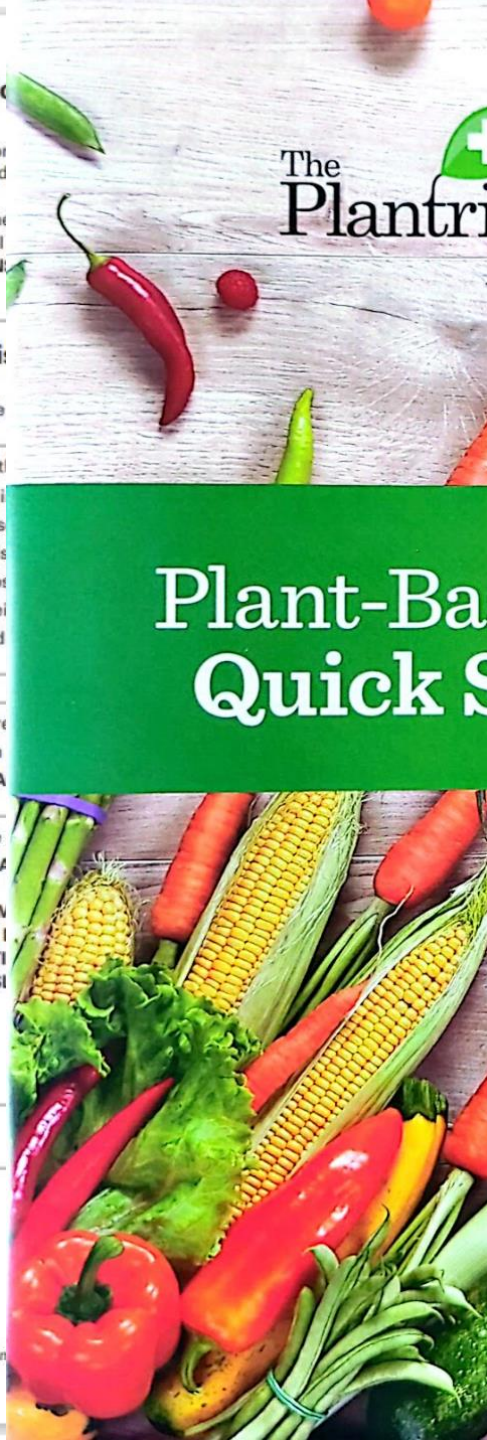CONDITIONS, KIDNEY DISEASE, OBSTRUCTIVE S...

PARTICIPANT:

_____
(SIGNATURE)

_____
(PLEASE PRINT NAME)

Date: _____ / _____ / _____
(Rev. 8-10-18)

AMERICAN COLLEGE OF
Lifestyle Medicine ©2018 Am...

The Plantri...

Plant-Ba...
Quick S...

El *plato*

Frutas

Legumbr...

Benefi...

- Enfermedades cardía...
- Supervivenci...

Concéntrese en llenar el plato co...
granos enteros y legumbres, en ...

Pruebe El plato beneficioso y descubra u...
ComitédeMe...

Protein Sources: A Head-to-Head Comparison

A food's worth is not judged by grams of protein alone! Look at the bigger picture.
Each serving below is 100g (about ½ cup or 3.5 oz).

Chicken
Breast, meat only, baked

Nutrition Facts
Serving Size 100g (½ cup)

Amount per serving		
Calories 164	Calories from Fat 32	
		% Daily Value
Total Fat 4g		5%
Saturated fat 1g		5%
Cholesterol 85mg		28%
Sodium 74 mg		3%
Total Carbohydrate 0g		0%
Dietary Fiber 0g		0%
Protein 31g		

Salmon
Atlantic, baked

Nutrition Facts
Serving Size 100g (½ cup)

Amount per serving		
Calories 208	Calories from Fat 121	
		% Daily Value
Total Fat 13g		21%
Saturated fat 3g		15%
Cholesterol 55mg		18%
Sodium 59mg		2%
Total Carbohydrate 0g		0%
Dietary Fiber 0g		0%
Protein 20g		

Steak
Trimmed to 1/8" fat, baked

Nutrition Facts
Serving Size 100g (½ cup)

Amount per serving		
Calories 189	Calories from Fat 100	
		% Daily Value
Total Fat 11g		17%
Saturated fat 4g		22%
Cholesterol 41mg		14%
Sodium 53mg		2%
Total Carbohydrate 0g		0%
Dietary Fiber 0g		0%
Protein 21g		

Nutrition facts from www.NutritionData.com

Beans
Black, boiled

Nutrition Facts
Serving Size 100g (½ cup)

Amount per serving		
Calories 132	Calories from Fat 5	
		% Daily Value
Total Fat 1g		1%
Saturated fat 0g		1%
Cholesterol 0mg		0%
Sodium 1mg		0%
Total Carbohydrate 24g		8%
Dietary Fiber 9g		35%
Protein 9g		

Cholesterol is only found in **animal-based foods.** These foods are also our main source of **saturated fat**, which our bodies can turn into cholesterol. **Fiber** helps to lower our cholesterol and is only found in **plant-based foods.**

How much protein does the average person need each day?
Multiple your body weight (kg) by 0.66 to calculate your **Estimated Average Requirement (EAR).**

	125 lb	175 lb	225 lb	275 lb
Estimated Average Requirement (EAR)	38 g	52 g	67 g	82 g
Average intake by U.S. adults	68-86 g	96-120 g	122-153 g	150-187 g

Beth Motley M.D.
Family Medicine/Lifestyle Medicine
Greenville Health System/Univ of South Carolina

AMERICAN COLLEGE OF
Lifestyle Medicine

©2018 American College of Lifestyle Medicine

I just wanted to thank you again coming to the first week of the Lifestyle Medicine Pilot! I had hoped that at least a few people could come in such short notice, but I was blown away by you all!
I think I have figured out some of the technical issues and hope to run a smoother show next time.

Looking forward to seeing you all!
Sincerely,
Dr. Aarthi Chandarana

Week 2: April 11th 9:00 am - 11:00 am - intended to be for my established patients (if you already talked to me about a loved one, then bring them along)

Before visit: I've ordered appropriate labs - if you have done them recently (within the past 4 weeks), then no need to get them done again.

Recap of Week 1:
We talked about the 6 pillars of lifestyle to help manage and reverse chronic condition:
https://lifestylemedicine.org/wp-content/uploads/2023/06/Pillar-Booklet.pdf

Plant-based nutrition - Eating as much whole foods and plant based - increasing natural fiber
Physical activity - Getting at least 150-300 minutes of moderate intensive activity per week
Stress management - Maintaining mental health with activities and breath
Avoidance of risky substances - Limiting alcohol and avoiding tobacco and other substances
Restorative sleep - Getting at least 7-9 hours of restorative sleep
Social connections - Engaging in a supportive community or social interactions

Goals for week 1 include: Track if possible
  1. 2-3 rounds of 4-7-8 breathing technique - https://health.clevelandclinic.org/4-7-8-breathing
  2. 2 rounds of sun salutation in the morning - https://www.verywellfit.com/illustrated-stepbystep-sun-salutation-3567187
  3. Dance to 1 song in the morning while getting ready
  4. One plant based meal per day and/or have 3 colors per meal and 5 colors per day

Breakfast
- Hot cereals: oatmeal with cinnamon, raisins, and/or applesauce
- All-Bran or muesli with nonfat soy or rice milk and/or berries, peach, or banana
- Fresh fruit
- Pumpernickel or rye toast topped with jam (no butter or margarine)
- Oven-roasted sweet potato home fries solo or smothered with sautéed mushrooms, peppers, and onions
- Tofu scramble

Lunch
- Mixed-vegetable salad with lemon juice, fat-free dressing, or soy or teriyaki sauce
- Legume-based salads: three-bean, chickpea, lentil, or black bean and corn salads
- Grain-based salads: noodle, couscous, bulgur, or rice salads
- Soups: carrot ginger, mixed vegetable, black bean, vegetarian chili, spinach lentil, minestrone, split pea, etc.
- Hummus spread on whole-wheat pita with grated carrots, sprouts, and cucumbers
- Black bean and sweet potato burrito with corn and tomatoes
- Sandwich made with fat-free meat alternatives such as barbecue seitan, Lightlife Smart Deli turkey style, or Yves veggie pepperoni slices and your favorite sandwich veggies

Dinner
- Pasta marinara: can be made with many commercial sauces (any brand that has less than 2 grams fat per serving and is free of animal products)
- Beans and rice: black beans with salsa, vegetarian baked beans, or fat-free refried beans
- Soft tacos: a flour tortilla filled with beans, lettuce, tomato, and salsa
- Fajitas: lightly sautéed sliced bell peppers, onion, and eggplant with fajita seasonings
- Chili: homemade or vegetarian boxed or canned versions
- Veggie lasagna: low-fat tofu replaces the ricotta cheese, layered with grilled veggies
- Vegetable stir-fry: vegetables seasoned with soy sauce or other low-fat stir-fry sauce and served over pasta, beans, or rice

Snacks
- Fruit
- Carrot, celery, or other vegetables with low-fat hummus
- Baked tortilla chips with salsa or bean dip
- Air-popped popcorn or rice cakes
- Toast with jam
- Soup

SENIOR CHAIR YOGA POSES

1. Ujjayi Breathing
2. Cat/Cow
3. Circles
4. Sun Salutation Arms
5. Sun Salutations with Twists
6. High Altar Side Leans
7. Eagle Arms
8. Assisted Neck Stretches
9. Ankle to Knee
10. Goddess with a Twist
11. Warrior 2
12. Forward Fold

PHYSICAL BENEFITS OF LAUGHTER YOGA

Laughter Yoga is the Best Cardio Workout

As per the research of Dr. William Fry 10 minutes of hearty laughter is equivalent to 30 minutes on the rowing machine! (For cardiopulmonary endurance)

Laughter brings more Oxygen in the bloodstream

Laughter Yoga exercises help longer exhalation and deep breathing through the diaphragm. This helps in flushing the lungs of stale residual air and increasing the net supply of oxygen.

Laughter Yoga Increases Blood Circulation

Laughter causes 'internal jogging'. Further, it massages and promotes circulation to the digestive and lymphatic systems.

Laughter Yoga for Weight loss

Laughter Yoga reduces belly fat, which is difficult to shed even with the most intense exercise regime.

Laughter Yoga Boosts Immune System

Laughter increases the concentration of circulating antibodies in the bloodstream. Thus, it raises the resistance against infections.

Laughter Yoga a Natural Pain Killer

20 minutes of belly laughter reduces the pain for almost two hours. It also increases tolerance to pain. Laughing increases the number of T-Cells in the blood
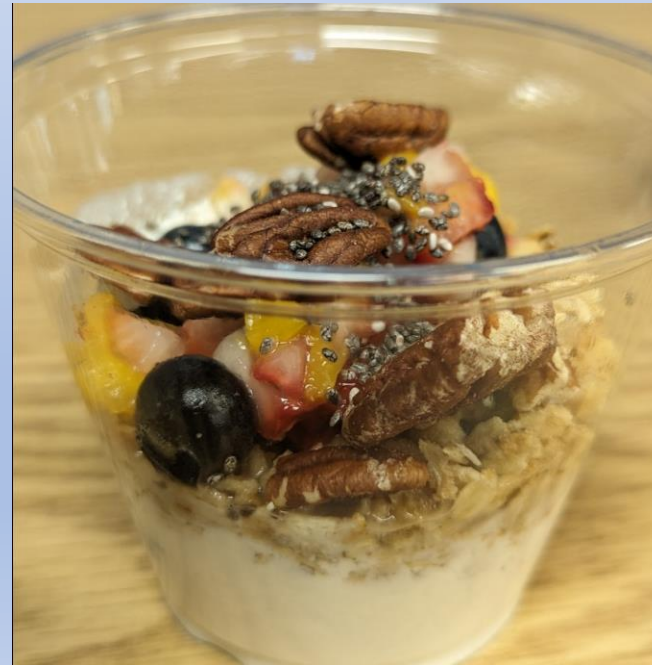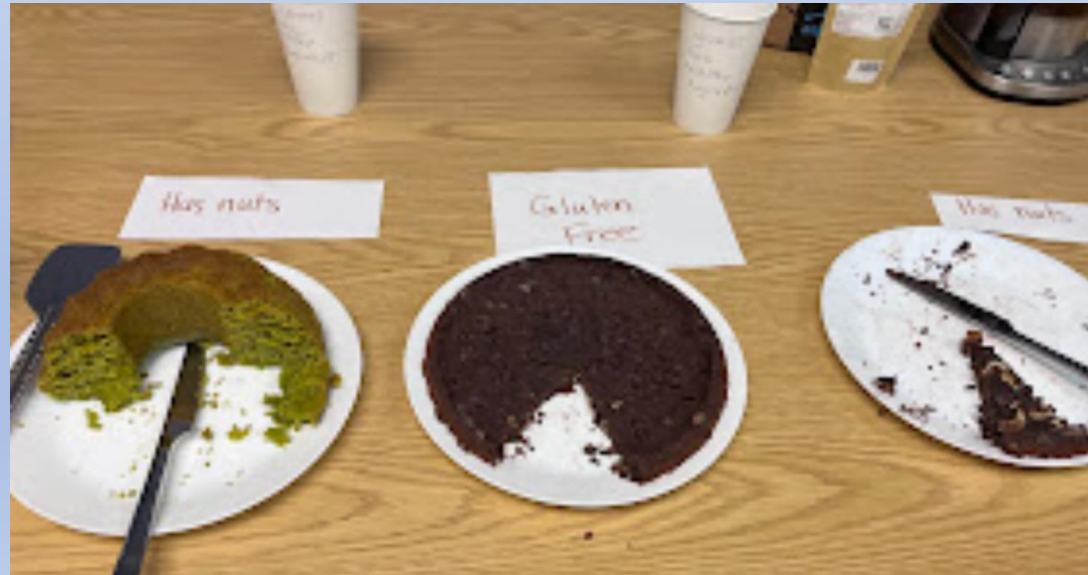
Billing and RVU generated

Primary Care visits (8:40am – 11:20am)

Dates	# Visits	RVU per day
02/01/24	7	14.51
02/08/24	7	11.3
02/15/24	7	15.93
02/22/24	7	13.21
Sum	28	54.94

Lifestyle Medicine Group (9am – 11am)

Dates	# Visits	RVU per day
04/04/24	14	23.82
04/11/24	13	21.19
04/18/24	13	20.33
04/25/24	13	21.69
Sum	53	87.03

Limitations

- Staffing
- Scheduling
- Administration
- Space
- Lofty goals
- Billing changes
- Patient adherence

Feedback

Hello Dr Chandarana,   8/10/24 12:31 PM

I hope you are enjoying the summer with your boys! Thank you again for adding me to your class - it was very informative and insightful.

I wanted to check in to let you know that I have been following the guidance from your class - I do not want to say diet because truly it is just a new way of life.

I concentrate on colors, and now for breakfast add greens which I never did before. I make it a POINT to walk during the day to get some fresh air, sunshine and apprecaite what is around me. I have cut down on meat, try to do about 2 days a week "meat free".

My joints feel amazing, truly life changing. We had to empty out the basement last week due to water I thought for sure I would be crippled in the next morning but was NOT! The stretches, my diet and walking helped me bend and move without pain or repercussions!

I always think it is important to let someone know when they have made a difference, and you have, and I am very thankful.

All the best

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