## Discussion

In this real-world study, a multidisciplinary team of key opinion leaders (KOLs) identified best practices, challenges, and solutions for implementing and sustaining treat-to-target (T2T) strategies based on patient-reported outcomes (PROs) when caring for patients with rheumatoid arthritis. Key elements of T2T were assessed by performing a targeted literature review. The results were used to design a moderator-led meeting in which KOLs shared experience, feedback, and ideas on how best to implement T2T and PROs as part of RA management. To mirror real-world practice, KOLs came from a wide range of clinical professions and practice types and had varying degrees of experience with T2T.

KOLs who already used PRO-based T2T when caring for patients with RA valued its benefits for improving both patient outcomes *and* the productivity and efficiency of clinic workflows. KOLs emphasized that PRO-based T2T can improve satisfaction among patients as well as clinic staff—patients see that their experience is centered and their outcomes improve, and clinic staff are able to directly lead and participate in collecting PROs as part of their daily work. Satisfaction, however, hinges on the incorporation of PROs into the electronic medical record (EMR) such that PRO collection does not increase clinic workload or consume appointment time.

Despite robust evidence for PRO-based T2T strategies, rheumatology practices are often slow to implement them. KOLs identified several possible reasons for this, including lack of provider incentivization, limited bandwidth due to existing administrative burdens, failure to integrate PRO-based T2T measures into the EMR, and patients not understanding why PROs are important (leading to nonparticipation or dropout). Several solutions were proposed, including 1) using charts to match patient "phenotypes" to clinical pathways, 2) documenting T2T processes for training and quality assurance, 3) designating staff to serve as "champions" of T2T, 4) using remote therapeutic monitoring to collect electronic PROs (ePROs), 5) automating ePROs in the EMR to avoid manual data entry, 6) educating patients about how PROs facilitate shared decision-making, 7) and supporting patients in PRO questionnaire completion.