

Health Coaches

Mercy Clinics Des Moines

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Mission Focused

Swieskowski reports that his organization is “incredibly mission focused.” The mission: “To increase the health of the community and to help most those who are most in need”. As CEO he looks forward to taking on more risk contracts and the responsibilities of an ACO model of payment. “With an ACO we can finally align reimbursement with our mission.”

Leadership vision

“We are planning ahead for Accountable Care organizations. Along with a registry, nurse advice line, transitions in care program and chronic illness outreach, our nurse health coaches will be one of our key strategies.”

A focus on global cost savings comes at the cost of immediate revenue reduction from fewer filled beds and ER visits for the hospital within Mercy Clinic’s larger organization. But Swieskowski is taking the long view.

Future plans for accountable care include improving communication between primary and secondary care with service contracts; bringing social work, pharmacy and nutrition services into the individual clinics; and building an even more robust data infrastructure to drive decisions. Mercy Clinics will be a pilot site for MedVenture, a super registry which will interface directly with its EHR data, rather than requiring manual transfer of the data. Swieskowski also plans to use data to examine practice variations within specialties to identify further opportunities for improvement. “We have focused on projects that both improve quality and make us money.”

Change Strategies

Transparency around Data

Mercy Clinics has been ahead of the curve in terms of transparency, sharing quality data and practice tools, both internally and with the public for several decades. “We began publicly reporting our A1c data in the 1990s” says Swieskowski.

A quality committee of 5 physicians and 3 full time quality nurses meets monthly to review data reports by practice and by provider across the organization. The organizations’ 28 health coaches meet twice monthly to review data and share best practices from each of their sites. There are also patient advisory councils.

Collective Accountability

Targets are measured and rewarded at the clinic level rather than the individual physician level, to encourage communication and group problem solving. One clinic dismissed a physician who was a threat to their bonus. Eventually administration would like performance on quality goals to constitute one third of physicians’ salaries.

Swieskowski knows how difficult change can be. But he also knows that not every single physician needs catch the vision. “I need 20-30% of the physicians on board with an initiative to reach a tipping point.”

Compensation Formula that Aligns with Mission

Compensation is designed to support the vision; to avoid an excess focus on productivity the CEO has capped physician compensation at 150% of the 90th percentile of MGMA norms. For a family physician this is \$435,000. Because of the high revenue from urgent care shifts and procedures, there are 5 family physicians who would otherwise be above this cap. Another way compensation aligns with the vision of accountable care is that a portion of compensation is withheld to meet quality goals, including patients’ responses to: Can you get an appointment in a reasonable time, and Did your doctor explain things in a way that you could understand?

Health coaching

Mercy Clinic’s health coaching program, begun in 2008 with 14 health coaches, has expanded to 28 nurses, primarily in outpatient primary care. Health coaches



receive training in diabetes management, motivational interviewing registry management, and in guiding transitions from the hospital to home; they focus on improving care and reducing costs for Mercy's sickest patients.

Health coaches have also improved the clinic's bottom line in the short term. For every \$1 spent on health coaching Mercy Clinics has realized \$4 in revenue from additional appointments and tests for patients with identified care gaps.

One health coach is based in the hospital and facilitates smooth discharge planning. "When the hospital owned the discharge staff the focus was on getting the patient out of the hospital quickly; now the focus of our health coaches is on getting the patient what they need to stay out of the hospital down the line." Hospital and clinic based health coaches work together to ensure a smooth hospital to home transition.

Swieskowski cites the importance of building systems of support around clinical workers: "Physicians are too busy to provide self-management support, this should be the job of the health coaches." He also understands the volume of non-clinical work facing the nursing staff: "Clerical staff unload work from the nurse health coaches."

At Mercy Clinics East 3 RN health coaches work with 7 physicians and 5 PAs, each RN



working with the same 3-4 providers for consistency. Their responsibilities include care management: reviewing patient charts to queue up lab to be ordered by the physician at an upcoming visit. The physicians appreciate the efficiency of having the orders pre-selected and ready for their electronic signature. Later the health coach will report the results to the patients and upload the data in the organizations stand-alone registry.

A health coach will meet with diabetic patients in person and over the phone working on diet, insulin adjustment and encouraging a healthy lifestyle. Health coaches manage the registry, patients who drop in for blood pressure checks, adjust Coumadin doses by protocol, and when time allows, work with patients on goal setting.

Conclusion

Mission, vision and strategy. When all are in alignment the organization can thrive. Mercy Clinics has built the quality and data infrastructures to achieve its vision. Health coaching is a major part of the strategic plan to carry out the mission.

Looking to the future Mercy Clinics is participating in a pilot program with the Foundation for Informed Medical Decision, integrating shared medical decision making and decision aids into the flow of care. Patients are provided print and video decision aids on preference sensitive conditions such as management of osteoarthritis of the knee and hip, menopause, diabetes and management of acute and chronic back pain.