Health Coaches in Ames, Iowa

Incorporating Health Coaches in a Family Medicine Practice

2 Vignettes

- First-Who am I?
- Starting in Ames-10/1993.
- Consoling Grieving Patient

Essence of Health Coach

- Allow family physician to spend maximal time with patient in efforts of diagnosing, treating, and counseling.
- Accomplish the multiple tasks both medical and clerical that are necessary to create a medical home for patients which follows their health needs: preventative and per their chronic illnesses.
- Engage the patient in formation and completion of health goals.

Current Format for Use of Coaches Within Health Care Team

- Team consist of head nurse, 2 health coaches, roomer, "shot" nurse.
- Head nurse: oversees operation of office, first person to look at e-mails, phone call requests, and new lab/radiology findings, address request for refills and prior authorizations, assists for female exams and procedures.

Current Format for Use of Coaches Within Health Care Team (cont.)

- Roomer-rooms as well as orders labs/radiology per protocol for the 25-40 patients a day that I see as well as the 20-30 patients a day that my hall mate sees. Cover for head nurse regarding phone calls when either my hall mate or I are out of office and acts as head nurse when either head nurse is gone. Stocks rooms.
- "Shot" nurse-administers vaccines for 5 providers, performs EKG's, ear washes, and nebulizer treatments. Orders supplies.

My 2 Health Coaches

- Anita former executive assistant for University manager, Colonel in Civil Air Patrolhead of Iowa Division, started doing clerical work for me, obtain Health Coach training and designation.
- Diane RN, recently retired Oncology floor nurse for 26 years; named one of the best 100 nurses in Iowa by the state leading paper, Des Moines Register.

Anita

- Works Mondays and Fridays.
- Health coach as well as more clerical oriented tasks
- Preps chart in anticipation of diabetic rechecks, hypertensive rechecks, all adult annual exams.
- Oversees preparation of registries-diabetics, substance use, Medicaid Health Homes, Medicare Chronic Care Management

Anita (cont.)

- Sees diabetics before me to obtain fingerstick
 HGB A1C as well as asks and records recent blood sugars and follows up on patient's health goals.
- Sees all Medicare annual exam patients administering both written questions and oral questions done for Wellness exam.
- Was clerical assistant for PCMH re-cert.
- Handles necessary preparation for hospice and death certificates.

Anita (cont.)

- Preorder labs/mammograms for upcoming annual exams as well as notifies patients of normal lab results.
- Trained as Certified Application Counselor(CAC) and for the last 2 years, assisted patients for my entire clinic signing up on the Exchange for health insurance or Medicaid.
- Signed patients up for "MyChart" our clinic's web portal.

Anita (cont.)

- Form therapeutic, healing relationships with my patient.
- Arrange for photos of lesions to place in patients' charts.

Diane

- Works Tuesdays, Wednesdays, and Thursdays
- Similar to Anita, sees all diabetics prior to me seeing them.
- Similar to Anita, sees all Medicare patients prior to Wellness exams.
- Signs patients up for Medicare Chronic Care Management; fills out care plan.

Diane (cont.)

- Contacts poorly controlled diabetics on a weekly basis by phone.
- Teach new diabetics the use of fingerstick accuchecks as well as teach appropriate diabetics how to administer insulin injections.
- Fill base on protocol prescriptions for a year after patients' annual exams with me.
- Fills in for head nurse.

Diane (cont.)

- Does necessary reporting on computer for Department of Transportation(DOT) physicals.
- Assess state database for patient's use of narcotics for my patients on my substance use registry.
- Form therapeutic, healing relationships with my patients.
- Arranges for photos to be placed in EMR.

- Diabetic Registry
 - 189 patients
 - HGB A1c-7.08
 - BP-129/72
 - 2 patients with HGB A1c > 10.0.

Medicare annual exams/total Medicare patients-

361/452 (79.87%)

- highest percentage in clinic with 75 primary care providers.
- only 9 providers over 50%.
- 11th highest number of total Medicare patients.

Results - Value Index Score (VIS)

- Primary and Secondary Prevention
 - Breast cancer, Colorectal Cancer, Well Child Visit-Infant and 3 to 6 years.
- Chronic and Follow-Up Care
 - Potentially preventable readmissions, discharge follow-up, chronic care visits.
- Tertiary Prevention
 - Potentially preventable ED visits and admissions
- Continuity of Care
 - Physician visits, PCP visits, Continuity of Care Measure

- Value Index Score(VIS) -98.6%
- VIS(clinic average) -77.2%
- Work RVU's 2013 -8,261
- Work RVU's-MGMA -7,286
 (2013-Family Medicine without OB)

Overall-professional satisfaction - highest in 31 years

 Total Gross Charges (Production) -\$1,029,679

Summary

- Health coaches add to the quality, patient/professional satisfaction, and productivity of my practice.
- As always, personnel is everything.
- Cost accounting allows for proper use of personnel in terms of the practice needs and dynamics.

CONTACT INFORMATION

David Carlyle, MD

E-mail: dcarlyle@mcfarlandclinic.com

Blog: "Conversations with Dr. David Carlyle"