



Kara Ware: [\(00:00\)](#)

This is Good Medicine *On The Go*.

Nathan Morris: [\(00:11\)](#)

So, Kara, in episode three, we heard from Ashley how an in-person salaried health coach who sees the patient after the provider in a bundled new patient program, which is brilliant, a great approach, really good approach. And this week, I am super excited because we are going to share an approach that is almost entirely the opposite, and that is our approach, Kara. And I've just been so excited to actually be able to discuss this.

Kara Ware: [\(00:35\)](#)

Yes, me too. We have been working together on our health coach integration for six years. And so, like you said in episode one, it takes a little while to figure this out. It did not come overnight, but through numerous practice iterations, we have learned so much. And in this episode, we are going to share behind the curtain, our approach to integrating a health coach in your clinical practice. We will share our workflow, ways of communicating, and our compensation model. And our approach to all of this is pretty radical, but we flip the typical model for implementing a health coach on end. And we are excited to share that with you today.

Kara Ware: [\(01:32\)](#)

Hello, and welcome. I am Kara Ware, a national board certified health coach and business advisor.

Nathan Morris: [\(01:39\)](#)

And I'm Nathan Morris, a medical doctor who's also certified in functional medicine. So, patients want the medical provider, that is the one thing we really learned, Kara, is that when we started this whole process, we have met some resistance because there is just that I want to get started now, we really do not want to go through all this of learning the basics. [crosstalk 00:02:02]...

Kara Ware: [\(02:01\)](#)

Yeah. Why do I have to see a health coach? I just want to see the doctor.

Nathan Morris: [\(02:04\)](#)

How many times have you heard that, right?

Kara Ware: [\(02:05\)](#)

Yeah, exactly. Exactly. And I get it. I understand that, yeah.

Nathan Morris: [\(02:09\)](#)

Yeah, but a wise provider, with that I would guess I'm putting myself-

Kara Ware: [\(02:14\)](#)

Like you.



Nathan Morris: [\(02:15\)](#)

... in that category, right? Knows they also need a health coach to assist patients with confidence and confidence to successfully implement the provider-patient plan. And I think that is what I have just become such an advocate of. I have gone through this process over the last six years, and I am happy to get the spotlight, that role we have created for you in my practice, and why it has been such an effective provider-coach collaboration. I know you will, Kara, and we will share with our listeners a bit about your background and what your experience has been that led you to creating this health coach integration model.

Kara Ware: [\(02:51\)](#)

Yeah. I have been working on the health coach integration model that you and I have been perfecting for the last six years really for 20 years now. My story starts back in 2002, and coincidentally, that is the same time that Margaret Moore, who you heard from in episode two, Margaret, or also known as Coach Meg, she noticed in 2002, there is a missing intervention in healthcare, and that was the health coaching role that is working alongside medical doctors and medicines and other interventions. And if you haven't heard Coach Meg's episode just yet, you will want to go back and listen to episode two of the season.

Kara Ware: [\(03:26\)](#)

So back in 2002, I was hired as a community health outreach worker, and they called us CHOW for short. I was hired into a rural insurance based medical clinic in Scarborough, West Virginia called New River Health, and this was back before health coaching and lifestyle medicine even had a name. And the idea to do this was brand new, right, the idea to add the lifestyle conversation as part of the medical plan. And so the question that we were answering was how are we going to help an at risk, low income, low engagement population turn their lives around?

Nathan Morris: [\(04:08\)](#)

Not easy task.

Kara Ware: [\(04:10\)](#)

And I got to be a part of the team that answered that. And so New River Health, they had me trained in Stanford University's Chronic Disease Self-Management program, that what coaching was called back then, self-management. And they sent me to the Highlander Education and Research Center in Tennessee to be trained in social change, and plus, New River Health sent me to Asheville Yoga Center in North Carolina for my 200-hour yoga certification.

Kara Ware: [\(04:38\)](#)

And so the first thing that we did to integrate me into the medical plan was that I began to see patients in the exam room while they waited to see their provider so to use their time wisely. Sometimes, they were in the exam room for quite a while waiting for the provider. And so I would go in and I would inquire about nutrition and exercise and hydration and stress management, all those modifiable lifestyle factors, and to understand, well, where's their baseline, where are they at right now, and what are they



interested in, right, small, incremental steps that they felt confident and then we could build their skill base to implement more healthy lifestyle choices.

Kara Ware: [\(05:18\)](#)

And so we began that conversation, and then I would write notes on the patient's paper chart. Remember how we used to have paper charts outside the exam door?

Nathan Morris: [\(05:29\)](#)

Yup.

Kara Ware: [\(05:29\)](#)

And the provider, before walking into the exam room, would take out the chart, overlook the patient's notes and my notes so then when the provider would go in, he or she would pick up that lifestyle conversation with the patient and begin including it as part of the medical plan. And then we added on, and we started some group coaching events that we called Help Yourself based on the Stanford University Chronic Disease Self-Management curriculum. And that became provider prescribed. We created these prescription pads that the provider handed to the patient as part of the patient's plan. Like, here, you need to enroll in this group coaching event.

Kara Ware: [\(06:09\)](#)

And I also created a chair yoga program called Easy Does It Yoga, based on the work of Alice Christensen, so that the providers prescribed the Easy Does It Yoga program as an answer to seniors living with limited mobility to incorporate movement into their lives. So what we saw was a reduction in the use of pharmaceuticals and an improvement in the quality of the patient's life and engagement, and we found, hey, this infrastructure really works.

Nathan Morris: [\(06:37\)](#)

Yeah, Kara, this is really the basis of the workflow you and I still use today, and it's really cool to see how it all began and how you first saw the benefit of positioning the health coach first, which is what you showed me, which was just like this light bulb going off in my head. And I think it's just amazing, your story, and how it led to how you've been able to implement that into a functional medicine practice, and it works so well.

Kara Ware: [\(07:03\)](#)

So, thank you, first. I know you had to see what I was doing, as you mentioned in episode one, before you could really understand how our two skillsets worked as a complement. But this model was so effective in 2002 and those years that Marshall University hired me to be a consultant, to teach more rural healthcare clinics and healthcare professionals on how to implement these coaching outreach programs, like the ones I just mentioned, regionally. So then I started to scale this health coach work integration workflow across the Appalachia region.

Nathan Morris: [\(07:40\)](#)



That's so cool.

Kara Ware: [\(07:40\)](#)

I know. I cannot even... this really found me. I was approached and asked if I wanted this community health outreach worker position by a mentor of mine. And so, she just ushered me into my calling. I can't be more grateful.

Nathan Morris: [\(07:54\)](#)

Yeah. It is scalable. And that is what is amazing about this whole process is that this is such a program that has kind of been tried and tested since 2002. It is not like this is something that we just invented. It has been a work in process, something that we have been fine tuning. And from that, what I found interesting, and just, of course, me and you became instant friends, as often we say, we just met each other, it was on, and I figured out that you had opened your own practice and we had first lectured together, and then I saw your chalkboard, which I just think is amazing that you'd put and basically figured out functional medicine without taking functional medicine, how everything connect, and this is a multifactorial practice that you had created.

Nathan Morris: [\(08:43\)](#)

And then we decided, hey, you know what? We would be good working together. And so, we took your Integration Connections and we combined it with my practice, and at the time, I had an insurance-based practice, and we recreated this infrastructure in Oxford, and then we transitioned to cash and now, we are in Good Medicine Colorado. But the thing that really stands out to me is that even as we transitioned from an insurance based model to this cash based model, the work you did beforehand became even more relevant because it was so much more important I think to show people that when they're paying with their own money, that we could institute so much more change so much more quickly by having you in that front position so they were a lot more satisfied with what they were spending. And the money they were spending with you was so much less than they were with me, and it just really became a wonderful collaboration.

Kara Ware: [\(09:40\)](#)

It does expedite the patient's care. I hear what you are saying. And that chalkboard Nathan referred to and my story at Integrated Connections, a functional medicine practice I opened back in 2013, you will hear about all of this in previous episodes. Remember, this is a season, and each episode is building upon the one that comes previously. And this episode four is the second of a two-part series of work integration workflows in a medical practice. So, I want to remind our listeners of that. And for two decades now, through insurance, hybrid, and cash practice models, I have been perfecting this health coaching integration infrastructure. It's definitely been more than a passion of mine.

Nathan Morris: [\(10:21\)](#)

Yeah. Just so exciting, Kara. I know me and your kind of cannot get over the excitement of being able to share this because we have been sitting on it and just been talking to each other how it is transformed both of our lives, but it is really transformed my practice, and I have been wanting to share this with



providers for quite some time. And it really took me meeting you to understand how you fit into my practice. But as soon as I saw the results of your health coaching and your work with your clients, I knew this was a formula for success. And we'll hear more about this radical model we have created to effectively integrate a health coach right after this.

Kara Ware: ([11:08](#))

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Kara Ware: ([11:50](#))

So, Nathan, let's talk about our provider-coach workflow.

Nathan Morris: ([11:54](#))

When we refer to workflow, we're talking about who the patient sees first in our model of the health coach, and that's just kind of become the foundation of our workflow. And where they go from there, on to see the doctor, and then maybe back to the health coach, it just depends on the patient's needs. So it is somewhat flexible, but the part that's not really flexible for us now that I've seen the benefits is that you really have taken on this super active role in being that shepherd into functional medicine as such.

Kara Ware: ([12:25](#))

Mm-hmm (affirmative). Yeah, and so just a quick overview of our bundled, our new patient program that's bundled, a sequence of coaching-provider encounters that the patient goes through, so our first iteration that we have been practicing up until now, because we've evolved it as we do because your practice is very dynamic and always changing, but our first iteration was me as the health coach, we called it a Care Plan appointment, it was a one-hour coaching appointment that was the patient's very first encounter. And then we scheduled 15 minutes, Nathan, for you to prepare, to take a look at their LivingMatrix, which we'll talk more about that digital online tool that we use later in the episode, but you review the patient's LivingMatrix timeline and health history, as well as my chart notes.

Kara Ware: ([13:12](#))

So that's actually a scheduled part of this bundle is that 15 minutes for you to prepare, which I think is genius. I talk to a lot of providers in my business advisor business, and they are doing that on their own time, and that is a drain. That is a source of stress. After that 15-minute prep, they met with you for two hours, and then they had a 30-minute follow-up coaching. So, actually, three encounters, the first, health coaching for 60 minutes, your two-hour new patient appointment, and then my 30-minute follow-up, just to check in and say what did you think, what did you take away, what did you hear, to make sure they heard all the important parts because I could read your chart notes and understand what was important to you, and then talk about how are they going to implement this.



Nathan Morris: [\(13:53\)](#)

Right. Right. And they had an advocate in you, they almost had like this interpreter in place that you could help them understand. Because inevitably, as functional medicine providers, we think we are speaking basically but we are not. And they need that advocate to be in between and say, okay, this is what he was saying, and this is how we are going to get there. And so, I thought that was just, yeah, and it was never, never any resistance for that second follow-up with you, which we just baked into our new patient program, which there was no option after we figured it out. They had to see you for that 30 minutes afterwards.

Nathan Morris: [\(14:29\)](#)

Yeah. And you know what I did not realize until I got to talking and looking at other practices is that this was kind of a radical shift in the integration of a health coach. And it's a radical shift for me because I'd always thought health coaches, yeah, after I see them, I may send them to somebody to help them, but really, this putting you on the frontline was just such a new way of thinking about it, at least it was for me, and I think it is for most providers that may be listening right now.

Nathan Morris: [\(14:56\)](#)

And it's kind of... functional medicine is like going into a counter cultural new world where there's a different language, currency, tenants, partnerships. And the thing that I took away before you came into my life and in my practice, patients had been looking at me like a deer in the headlights and that look went away when you were there because they already knew when I started explaining things, they had heard it before, they understood this language and what we were trying to do with this partnership. So it was really paradigm shifting.

Kara Ware: [\(15:27\)](#)

We were being proactive in converting a patient's emotional distress to empowerment before they even met you. Because patients coming to a functional medicine practice, they have really been put through the ringer. We have really attracted the most complex cases to come to us. And so instead of you meeting with a patient in that emotional distress, I was able to use my coaching skills to empower them as your equal partner, and that is what is so unique of functional medicine. We are operating in a mutual participatory medical model, and this is very different than the prescribe and treat medical model. And we must prepare patients to be that partner, to take ownership, to take responsibility of their healthy lifestyle and understanding medical costs, and driving healthcare decisions with you.

Nathan Morris: [\(16:14\)](#)

Yeah, Kara, you wrote an interesting blog post where you outline nine conversations for the first encounter, and I think that was really enlightening for me to see kind of the conversations you were having, so that as a provider, we could understand how a health coach can make your life and the patient's life easier. Be sure to read that post because I think it really sets it out what conversation, that first hour conversation's going to entail.

Kara Ware: [\(16:40\)](#)



Mm-hmm (affirmative). Yeah, it is important for providers to understand we are not replicating what you are doing in that first encounter. I am talking about entirely conversations that really sets the stage for them to even know what you are talking about, that language, that nomenclature, that understanding of being that equal partner. And it really has shifted the conversation of patients, coming to you, looking for you to fix them, right, looking for the solution outside of themselves, changing that conversation of the patient saying to you, "Well, what can you do for me?" And turning it into, "Well, what can we achieve together?" Because they understand their participatory role in this relationship.

Kara Ware: [\(17:17\)](#)

And so that blog post, How Integrating a Health Coach Can Transform Your Practice, plus many more health coach integration resources are available throughout this season on my website, karawarecoaching.com/podcast. That is K-A-R-A-W-A-R-E coaching dot com, backslash podcast. And prior to you opening your new practice, Good Medicine Colorado, Nathan, we were in several months of business development planning, and our conversations centered around answering the question how we can make functional medicine more approachable, affordable, and sustainable and open to a broader audience right when the masses need us the most. And this season, we are sharing our answer. For the past four months, we have evolved your dynamic practice, Nathan, and implemented our second iteration of the coach-provider integration workflow. And we updated your technology platforms and your front and back office systems.

Kara Ware: [\(18:22\)](#)

And so our answer was to create several different entry points based on patient readiness. And each entry point has an arch type of patient in mind, and then we designed care paths for each of these entry points. And the four different care paths are advanced care path, the introductory care path, the proactive care path, and the group coaching events. And each care path is a bundle of its own unique coach-provider series of encounters, and the number of coaching encounters vary from care path to care path.

Kara Ware: [\(18:58\)](#)

And so in episode one, we unveiled that the four entry points that we have worked to create are the advanced care path, for those patients who, this isn't their first rodeo, that's what you said in episode one. I love that. They have seen functional medicine providers, they understand the cost, this is not their first rodeo. And then there's that introductory care path, and these are patients who still maybe complex but they're brand new to functional medicine and we must be very cautious to not overwhelm these patients because this is a reason of poor patient retention is when we order seven labs and we're talking too much and the patient is sitting there in that emotional distress, not fully understanding everything because the nomenclature, the language, the concepts, the tenants have yet to really fully have time to marinate and bake and the patient to understand what are we working with here.

Kara Ware: [\(19:53\)](#)

And then we have that proactive care path for those patients who want functional medicine but up until now just have that financial barrier. They were not sick enough, right, they just want to be proactive.



And then we have that fourth group coaching event that we are going to be working on developing in 2021, so more to come on that. But these are the patients that want functional medicine but for one reason or the other, they are not ready to commit financially or emotionally to this partnership, to this commitment. So, remember we said we do not want to lose patients, this is a way we build patients. We create patients with this entry point.

Kara Ware: [\(20:27\)](#)

And so we're going to discuss a little bit about the workflow for these four entry points in a resource on the website. So, we do not continue to kind of talk about the different encounters because there are four different entry paths and that would get confusing but be sure you go to karawarecoaching.com/podcast because we have a beautiful PDF that illustrates both iterations. The first one that we talked about, that new patient bundle of coach-provider-coach, and now these entry points and the sequence of encounters of the workflow of the patient for each arch type of patient. So be sure that you go to our website and take a look at those resources.

Kara Ware: [\(21:14\)](#)

Another question I hear a lot, Nathan, is communication. Well, how does the coach and the provider communicate on patient's care, right? How do we work together collaboratively?

Nathan Morris: [\(21:25\)](#)

So, it's not easy to make the perfect backend in a clinical practice, good Lord.

Kara Ware: [\(21:31\)](#)

Mm-mm (negative).

Nathan Morris: [\(21:31\)](#)

Yeah. No, Kara, you have spent, and I have spent a little bit of time, but you have spent a tone of time helping get the backend of the clinical practice setup for this. So, all these things, and you often had to slap my hand because I am like, "That's a great idea, Kara. That's why I'm trying to implement it." And I never put the backend in place, and you are like, "Slow down, [inaudible 00:21:54]." You ought to give me a chance [crosstalk 00:21:54]. And the problem is that functional medicine doctors are often left to chart their own path when it comes to configuring technology and communicating as a team, and you and I had been through a lot of different systems together, I mean, different EMR systems, just so many things as technology has become more relevant in their practice, and now, with a lot of telemedicine and a lot of other things, and I'm so glad to have you onboard with the newest version of Good Medicine Colorado. And quite honestly, it wouldn't happen without you.

Kara Ware: [\(22:25\)](#)

Oh, thank you.

Nathan Morris: [\(22:26\)](#)

Yeah, yeah. It would have been... we would not be where we are at today. And I think this is the most



cohesive communication system we have developed so far, and Lord knows, you put a ton of work into it to make it so. So can you talk a little bit about that?

Kara Ware: [\(22:39\)](#)

Thank you. This is another passion of mine, right? Because I have been a parent of a patient, I have been a patient, I understand what it is like to work with functional medicine practices. And the technology, the communication, this is the crux of a practice is to have a well-organized back office, operational system that drives the front of the house, the front office systems, right? And it prevents patients from falling through the cracks because we have created efficiency. And that is not easy. As you said, we have spent a lot of time configuring, and we are going to talk about that here in a second. And I geek out over this stuff. I do not know. I just love it. And that is why you hired me as your health coach, but also as a business advisor for all these years. I've had a dual role in your practice.

Nathan Morris: [\(23:23\)](#)

You're really kind of one of a kind, Kara. But I am going to keep you. Nobody else gets you. Thank goodness. And there are four digital platforms that we have optimized to help our whole team, and we've kind of moved from in-house, some of these things, like our own system, which we have changed to RingCentral, which we can manage that all online now and take care of messaging and all those things. So, RingCentral has been good technology we brought in. LivingMatrix, since 2015, and I heard about them, I thought they were genius, and they are, because they took something that took me 45 minutes to an hour to go through. Now, it's done before I even see the patient.

Kara Ware: [\(24:05\)](#)

And you're talking about their intake, their health questionnaires. LivingMatrix has digitized the three-part adult questionnaire that the Institute for Functional Medicine, and so that allows the patient to log in and to place all their symptomology and medications and supplements, and then it digitizes their timeline and their matrix. So, all of that is done for you, the provider, to be able to view that in that 15 minute so you are prepared to see the patient. You are already in the conversation. And I always tell patients, that is one way you are going to use our time wisely. And every patient's like, wow, that is awesome. Thank you.

Nathan Morris: [\(24:39\)](#)

Yeah. And amazingly, it takes a couple hours a lot of times for them to fill that out, but at least I am not filling it out during the visit. Their time is so valuable, and I tell you what, the timeline, just the timeline alone is worth it to me, just to be able to see antecedents, what...

Kara Ware: [\(24:56\)](#)

Triggers, mediators, yeah.

Nathan Morris: [\(24:58\)](#)

Yeah, it's amazing. So.



Kara Ware: [\(25:00\)](#)

And it's empowering for the patient too. Real quick, I just want to elaborate on that because when they see all their antecedents and triggers and mediators accumulated over time, then likewise, they understand that, hey, this is not going to be a quick fix. This is going to be a process as a result to unwind all of what has happened because of these sources of information that have accumulated over time. And so, it is a great empowering partnership tool. So that's LivingMatrix. You are going to have links to resources in our show notes. And then the other two online tools, Nathan, are...

Nathan Morris: [\(25:33\)](#)

PureGenomics, which I'm extremely proud of, of course. I was co-creator of that. But that is another piece. And actually, speaking of LivingMatrix and PureGenomics, I put up a TV screen in my room, my exam room, so I can put these things on the screen for my patients to see it because it really helps them understand, both LivingMatrix and PureGenomics, which is a free platform for both the provider and the patients, to take their 23andMe data or ancestry data and actually see how genetics maybe playing a role in their illness and some interventions there. And it is something that after I have seen the patient, then I can go back and say this may be why we are seeing this. This is why we need to get these labs.

Nathan Morris: [\(26:18\)](#)

So it's just been really a transformative platform for me in clinical practice, and I think it would be for a lot of providers out there, and especially the cost entry point is so good, being free. So I really like that aspect of it.

Kara Ware: [\(26:31\)](#)

Mm-hmm (affirmative). And I am also the PureGenomics Business Integration Manager, and so in the show notes, you will be able to schedule a free business integration coaching session. And if you did not listen to season one, that was an entry point to nutritional genomics for practitioners who are new to nutritional genomics. And as a health coach, in Nathan's practice, I'm responsible for onboarding the patients to these technology platforms, so getting them started with LivingMatrix, getting them started with PureGenomics if they already have their 23andMe or ancestry.com data, and starting them on Cerbo, so that by the time Nathan sees them, they are familiar with the technology, they have all their forms completed, and they're ready to have that provider appointment solely focused on understanding their story in core clinical imbalances. So that's another way we use our patient's time wisely.

Nathan Morris: [\(27:23\)](#)

And then the final is our newest EMR iteration, which really was essential in being able to set up these back office systems. It was just so set up for it. I could not believe it, which is Cerbo, C-E-R-B-O, which is really a platform that is really designed for functional medicine. And I've just been thrilled with their support and their cooperation in helping us get this platforms off the ground.

Kara Ware: [\(27:50\)](#)

And Cerbo, it's taken some time for us to configure and learn all their features and to create these four different care paths and understand the features they have for very important practice metrics that we



want to track. For example, where are they at in their care bundle, what encounter do they have next, and what happens after their care bundle, do they have a follow-up, tracking where they are in their journey, so they do not fall through the cracks. We also want to track conversion rates and for those patients who don't become patients, we want to know their emails and reach out to them for those group coaching events.

Kara Ware: [\(28:26\)](#)

So we've worked very closely with Cerbo, and their implementation specialists are ready. If you like this integration workflow model, we are presenting with the entry points and the health coach, Cerbo's ready to work with you so you can jump that hurdle of having to configure the technology that we have just spent time figuring out, and really dive into the clinical arm of your practice which you love. So, again, in the show notes, lots of resources for this episode.

Kara Ware: [\(28:57\)](#)

This really points out, as we mentioned in the last episode with Ashley, health coaches can go above and beyond their normal roles. I brought to the table business acumen, right, in addition to my health coaching skills, and this is important to remember when you're thinking of hiring a health coach.

Nathan Morris: [\(29:15\)](#)

Right, Kara. And working together, I quickly realized that you are a great health coach, but I also realized that you are a great business advisor, and I really let you be creative in that. And a lot of these health coaches, they have a lot of other background that can really be utilized to help your practice, and discovering that is really, important as you explore who is going to be your health coach. What other ways can they help and fit in to your practice.

Kara Ware: [\(29:42\)](#)

Exactly. And in this example of a health coach workflow integration, I am a 1099, I am an independent contractor, and so I am not your employee, which really, I feel, creates a different relationship between the coach and the provider. We have always said we are business partners, but what does that really mean? I think we need to clarify that for our listeners, right? It does not mean I am a financial partner with you. I want providers to hear that. If you hire a 1099 health coach and think of this as a business partnership, I am not a financial partner, but since I am an entrepreneur, you are an entrepreneur, we have strategized projects to collaborate on that we both have benefited. And as a result, my health coaching and my business advisor platform have grown and your practice has grown.

Nathan Morris: [\(30:31\)](#)

That's right, Kara. And I would recommend the providers to really look at that. A lot of providers do not want to think about health coaches because they think they must be employee. And employees, of course, we know are associated with a lot more overhead. And that 1099 relationship is wonderful because it is a win-win situation. And I think that is really something that is important for the providers to take away is that there's different ways of doing this than just think employee. And the coaches need to understand what the provider's three, six, nine, 12-month goals are. Coaches ask permission to



provider a strategic business plan on how to collaborate and build each other's platform, and thus create this partnership.

Nathan Morris: [\(31:11\)](#)

And this group coaching event is an example of a strategic business plan that we were talking and you were like, I would really like to start doing group health coaching. And I am like, that is great. You can do that. It would be a nice [inaudible 00:31:24] to my practice, but that really is your business, right? And so, I am like, I do not want any part of it, except I would love to have the patients you are going to introduce them with functional medicine. So, I just thought that was brilliant. So we're not sitting there going, oh, this is mine, or this is... we're just like, oh, you have that and it'll work, but it's just this beautiful relationship of you win, I win and the patient wins.

Kara Ware: [\(31:46\)](#)

Yeah. And I have been grateful too as I have worked on projects to fill your practice, because that is my goal. As a health coach, I feel most comfortable working with patients who have medical oversight. I have done it both ways and anymore, I will not health coach without a medical doctor supervision. That is just me personally. And so, I want to fill your practice. And something that you have then returned to me as I have helped your bottom line is that you have invested back in me. You have helped me with some continuing education that I could never have provided myself. So, that has also been a nice partnership that we have collaborated on that as your practice benefits, I also benefit. So that's kind of this partnership role that we have.

Kara Ware: [\(32:27\)](#)

And what Nathan was saying is I would often ask him, tell me your top priorities that you would like to achieve in the next couple months, and I would listen, and then I would say what I was interested in. And the I would present him, I would go and work on a Gantt, and it is just a simple spreadsheet that you list each month the tasks that need to happen to move toward your three-month goal, or your six-month goal, or your nine-month goal, what Nathan was just saying. And so, this is a way a health coach can meet with the provider, maybe if you are just having a meet and greet to see if it is a good fit to work together, and inquire, hey, what are your goals? What are you hoping to happen in this next year? And then say, okay, let me work on a plan and let me come back and see if we can be partners in this next year and what we can agree to.

Nathan Morris: [\(33:16\)](#)

Hey, Kara, can I just say something here real quick? That is a phenomenal approach because I am going to tell you, most functional medicine providers had not thought about it. We are living in the moment, surviving that day, and suddenly, the lights come on and we are like, holy crap, a plan? A three-month, six-month, nine-month plan? And suddenly, we are sold because we are like, holy crap, I am going somewhere, instead of just showing up and going, oh. So that was brilliant. When you first introduced that to me, once again, the light came on and go, hey, yeah. There is a long-term plan.

Kara Ware: [\(33:51\)](#)



And you're like, I don't even have to tell you what to do. You are helping me create my vision. We have a shared vision of what we want a functional medicine practice to be like. And we have partnered on creating that vision. And so, as a 1099, I keep track of my hours. You can use a Google plugin called Harvest, and it itemizes the tasks that I work on, and I invoice Nathan's practice at the end of every month, and I keep my own accounting software. I have a quick books account for my own LLC that I invoice the practice. So, it is very clean. And to even keep it cleaner, we created a memorandum of understanding.

Kara Ware: [\(34:31\)](#)

And so it's not a contract. A lot of providers and coaches want contracts. I understand that. You and I, we always had kind of a good faith understanding, but we knew it was important to have things in writing of what you were bringing to the table, what I was bringing to the table, what we agreed on, so that we had some ethics in place, values, priorities, and work distribution. And so that's one of the resources that you'll see a sample of a memorandum of understanding that Nathan and I would update periodically as our projects changed because of our strategic business planning.

Nathan Morris: [\(35:11\)](#)

Right.

Kara Ware: [\(35:11\)](#)

All right. So, we talked about a lot. Let us summarize that. [crosstalk 00:35:15]...

Nathan Morris: [\(35:14\)](#)

Oh my goodness. Yeah, let's unpack it.

Kara Ware: [\(35:16\)](#)

Yes, let's review all of the pearls that we've shared in this episode. So, I am 100% virtual health coach, I am a 1099 independent contractor, I see the patient before and after the provider in our bundled program. We created entry points to make functional medicine more approachable, affordable, and sustainable, and open functional medicine up to a broader audience. Each point has a design care path and each of the different care paths have their unique sequence and number of coach-provider encounters. And remember the different entry points and care paths, those are the advanced care path, the introductory care path for patients brand new to functional medicine, the proactive care path, and the group coaching events.

Kara Ware: [\(36:10\)](#)

And the technology that we use to drive Nathan's practice, Good Medicine Colorado, are RingCentral, LivingMatrix, Cerbo EHR, and PureGenomics. Remember, I am the PureGenomics Business Integration Manager and can assist you with implementing this clinical decision-making tool in your practice. Plus, we have links to talk with a LivingMatrix team and learn more about their functional medicine three-part health questionnaire intake and digitized timeline and matrix, which builds both practice efficiency and it clearly illustrates to the patient there is no quick fix when we are talking root cause resolution.



Functional medicine is a partnership and a process.

Kara Ware: [\(36:53\)](#)

And Cerbo EHR, specifically designed for functional medicine practices, they're ready for you to help you configure their technology software in a similar way that we did, that we've learned over the last couple months, of how to create these entry points and follow patients through their journey and create the step-by-step workflow and integrate all four of these technology platforms to work together in the patient's journey. And, to easily track important practice metrics. So that information will be on the website for all of these technology online tools.

Kara Ware: [\(37:29\)](#)

And then my above and beyond coaching skill is my business acumen, my entrepreneurial spirit and talent that I bring to the table. And as I mentioned, if you are a health coach and you are also an entrepreneur and you would love to partner with a provider, as I have had the opportunity to, we gave some concrete tangible suggestions to create a business proposal that you can take to a functional medicine provider. You can start by asking for a meeting and the entrepreneurial coach can hear their provider's vision and listen to their priorities and what they feel confident in doing and where they could use assistance in their business development. And then, ask permission to share what you would like to do, where can you as a coach add value and fill the fun and improve patient retention and increase patient activation.

Kara Ware: [\(38:18\)](#)

And then ask permission if you can go and make a strategic business plan, three, six, nine-month business plan that you can bring back at a follow-up meeting and determine, hey, are we good fits as business partners? And then, Nathan and I, we use a memorandum of understanding to make sure that everything is in writing, all our agreements are in writing. Because when things are in writing, then it just takes out any gray area of misunderstandings. And we update our working agreements regularly, and this has worked really well for us without the expense of legal of work.

Nathan Morris: [\(38:55\)](#)

And that was important. I mean, I think because it just lays out the groundwork so you can go back to it if there are ever any misunderstandings, which me and you are unusual, we have never had one misunderstanding. And I think it helped the provider and the business coach to understand that this is not a competitive business thing. You never took business away from... you only grew my practice, but you also grew your practice, and it was just an interesting thing. And I want everybody, if you have not heard it here in the first four episodes, hear it again, this is not a competitive thing. Health coaches only make your practice stronger because they are entrepreneurs, and they win if you win. And it was just such a brilliant thing to me. I'm like, holy cow, we really are creating something that everybody's winning.

Kara Ware: [\(39:40\)](#)

Mm-hmm (affirmative). Yeah. So, we hope that this gives you a vision of how to integrate a health coach



and tools and resources of how to get started. And remember, we are building up to an episode about how to interview, hire, train, onboard, manage and optimize a health coach in clinical practice. So please rate, review, subscribe, and tell a friend, because we are closely examining how to make functional medicine more approachable, affordable and sustainable right when the masses need us the most.

Kara Ware: [\(40:12\)](#)

So next week, we talk with Dr. Dan Kalish from the Kalish Institute about how to optimize the entrance to your practice to improve the conversion rates of prospective to paying patients. Plus, how to onboard the right patients.

Nathan Morris: [\(40:27\)](#)

Amen. So important.

Kara Ware: [\(40:28\)](#)

That was another key, right? That we've-

Nathan Morris: [\(40:31\)](#)

Oh my gosh. Yeah, I can't wait.

Kara Ware: [\(40:32\)](#)

... discussed.

Nathan Morris: [\(40:32\)](#)

I cannot wait, this conversation with Dr. Kalish.

Kara Ware: [\(40:35\)](#)

Yes, really looking forward to episode five. Special thank you to all involved in making Good Medicine On the Go possible. Thank you to our sponsors, Pure Encapsulations, Douglas Laboratories, Genestra Brands, and LivingMatrix, and to our writing team, Kelsey Stafstrom, and Paul Larkin. And thank you to our sound engineer, Isidor Nieves.

Nathan Morris: [\(41:01\)](#)

Looking forward to it, Kara.