The Northwest Metro Alliance is an accountable care organization (ACO) partnership between Allina Health and HealthPartners. It was established to address specific health needs in the northwest metro area of Minneapolis/St. Paul. Compared to statewide averages, Anoka County has higher rates of smoking, obesity, physical inactivity and other factors associated with chronic illnesses. To meet these needs, the Alliance has implemented more than 60 programs and care model changes. These include:

**Treat chronic pain while reducing the use of opioids**

In 2015, the Alliance created a multi-disciplinary pain medicine clinic. The HealthPartners RiverWay Pain Clinic provides exercise, rehabilitation, physical and behavioral health therapy in one location with proven results:

- More than 1,100 patients treated.
- Pain levels decreased 50 percent as patients tapered off all opioids.
- Costs were between 20 percent lower (commercial insurance) and 8 percent lower (Medicaid) compared to costs from care at other clinics.

*July 2015-June 2016*

**Increase access to care for mental illnesses**

People experiencing a mental health crisis account for more than 5,000 visits to the Mercy Hospital Emergency Department each year.

A 2016 study by the Minnesota Hospital Association found that among patients who are receiving care for mental health, nearly one third of days in the hospital could have been avoided if a more appropriate treatment setting had been available. Another challenge is that patients must wait weeks for a follow-up appointment after leaving the hospital.

The Alliance addressed these issues by:

- Integrating mental health clinicians into primary care clinics and collaborating with community providers.
- Working with Anoka County to open a short-term residential facility for mental health with 16 beds.
- Expanding Mercy Hospital’s partial hospital day-treatment mental health program to serve more than 4,500 patients each year.

1. County Health Rankings and Roadmaps
Reduce unnecessary hospital admissions for chest pain

Each year, approximately 3,400 patients visit Mercy Hospital's Emergency Department with heart problems. Research shows that most patients who come to the hospital with chest pain, shortness of breath or other heart attack-like symptoms do not have a life-threatening condition and do not need to be admitted to the hospital.

Working with Metropolitan Heart & Vascular Institute and the Emergency Physicians Professional Association, the Alliance implemented guidelines to identify which patients could safely go home and come back the next day for a stress test. In the first four years, this program prevented an estimated 300 unnecessary admissions allowing patients to sleep safely in their own beds.

Prevent hospital readmissions

An estimated one in five patients in the United States is readmitted to the hospital within 30 days of discharge, according to an analysis of Medicare patients. To prevent avoidable readmissions, the Alliance improved the transition from hospital to home by:

- Ensuring that resources are in place to support high-risk patients.
- Making follow-up clinic appointments before patients leave the hospital.
- Improving communications to ensure primary care clinicians know recommendations from the hospital.

These improvements reduced preventable readmissions by more than 25 percent (2012-2015), helping hundreds of patients remain at home, and avoiding an average of $11,200 to $13,000 per readmission.

Improve the health of high school students.

The Healthy Student Partnership includes Anoka-Hennepin Schools, the YMCA, the University of Minnesota Extension Program, Headway Emotional Health and Anoka County Public Health and other community organizations. Services in all six Anoka-Hennepin high schools help 2,200 students annually maintain a healthy weight, blood pressure and cholesterol, manage stress and be drug and alcohol free.

Increase prescriptions for generic medications

Prescriptions for generic medications have increased from 75 percent to 91 percent. This makes needed medications more affordable for patients and saves an estimated $3.4 million per year in drug costs.

2. JAMA Internal Medicine, May 18, 2015
3. Health Policy Brief; Health Affairs; November 12, 2013