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We May Not Have the Same Goals Remembering Mark A. Wilson, MD By James L. Holly, MD Your Life Your Health The Examiner March 22, 2012

Last year, I thought, "this will be the last.' It had been two years since SETMA's co-founding partner Mark A. Wilson, MD, passed away. I had written a number of articles about him and I thought that it was enough. Alas, as March 23, 2012 approaches -- the third anniversary of Mark's death -- his father has announced that on that day at 3 PM, there will be a graveside memorial to celebrate Mark's life and the placing of the beautiful markers on his grave and on the Wilson-cemetery plot.

A number of memories surround this event for me. The first occurred in 1983. Mark had moved to Beaumont in 1982. He and his partner started the Mei-Quick, Inc. (If you Google Medi-Quick, Inc., it still yields results) chain of clinics and had created controversy in Southeast Texas. I first saw Mark in a Baptist Hospital Medical Staff Executive Committee Meeting. I remember how young he was. He was not yet thirty years old and he seemed like a teenager.

In 1995, I got to know Mark well as we began discussing the formation of SETMA. On August 1, 1995, we launched SETMA. The general opinion was that Mark Wilson and Larry Holly could not work together successfully. When Mark passed away, we were the only two founding partners left in SETMA. Through hours and hours of conversations, sometimes loud and contentious, but always resolved with understanding and collegiality, Mark and I came to understand that we had common interests and common goals in healthcare.

In October, 1997, we attended the Medical Group Management Association annual meeting in Washington, D.C. In a day-long pre-conference session on Strategic Planning, Mark and I continued our dialogue. As we walked out of a session, Mark said, "You know Larry, you and I may not have the same goals." I agreed and asked him, "What are your goals, Mark." He stated his goal in what has become SETMA's Mission Statement. After he told me his goals, I opened my notebook and in a box outlined in ink, I had written, word for word, Mark's goals, which was entitled, "My goals."

On March 30, 1998, we signed our first check for electronic health records. It was for \$675,000. I remember that our accountant told us that we had lost our minds and a physician who was not a part of SETMA told us that it was a waste of money with no benefit for patient care. We believed it was the future of healthcare. But it was hard.

In May, 1999, Mark was emotionally down and I asked him what the matter was. He said, speaking of our progress with electronic records, "We're not even crawling yet." Remember, we purchased the EHR in March, 1998, but it was an empty box. It took us until January 26, 1999, to

build the functionality which allowed us to start using the new tool. During that ten month period, we were paying for the transcription service we had developed with which to document a patient encounter; we were paying for the EHR and we were paying a number of staff to develop the content of the EHR. Needless to say the pressure was enormous. So much so, that at the time of Mark's lamentation about health records, I was confident that we could not succeed financially. In May, 1999, I feared that we would go bankrupt. And, I could not tell anyone.

In response to Mark's comment, I said, "You are probably right, but let me ask you a question. When your oldest son first turned over in bed, did you lament that he could not crawl, or did you shout to your wife and say, "Our son just turned over in bed?" He smiled and I continued, "If in a year, all we are doing is what we are currently doing, I will join your lamentation but today, I am going to celebrate that we have started." We agreed that from then on we would celebrate what we were doing while we were accomplishing what we wanted to be able to do. Celebration became the core of our philosophy. In August, 2007, this event was the subject of an article in *Health Data Management Magazine* entitled "Vision and Celebration."

In January, 2000, the first of over 130 articles about SETMA appeared in a national medical magazine. *Family Practice News*, July 15, 2000 and then *Health Data Management* in July, 2000, wrote articles about SETMA and ours use of EHR. We were on our way. In January, 2003, SETMA was named Microsoft Clinic of the Year. In November, 2003, SETMA was named *Physician Practice Magazine*, Southwest Clinic of the Year and the next year, the same magazine named us runner up National Clinic of the Year. In 2006, SETMA was awarded the prestigious HIMSS Davies Award and the list continues to grow.

In 2002, SETMA began to receive invitations to "tell the SETMA story" at national meetings. The American Medical Association, the Massachusetts Medical Association, the Toward Electronic Patient Record Institute (TEPR), the Health Information and Medical Management Society (HIMSS) and many others began requesting SETMA's story be told. On SETMA's website at www.jameslhollymd.com under *In-The-News SETMA Presentations*, there are more than forty presentations made in the past ten years about SETMA's work.

In 2003, I gave Mark a framed poster entitled, *Priorities*. It is a beautiful picture of a little boy with hands in his back pockets looking over a beautiful lake. The inscription states, "A hundred years from now, it will not matter what my bank account was, what kind of house I lived in or what kind of care I drove, but the world may be different because I was important in the life of a child." Little did we know that Mark had less than six years to live when we hung that picture outside his office door. Mark had always been devoted to his three children but he did begin to leave office earlier and he was important in the lives of his three children and in the lives of countless other young girls who were ministered to by Girls' Haven.

In 2005, Mark wrote me a letter. I wish I could find it; I know where I put it, but alas, it is not there. In that letter, Mark said that he wanted me to become an expert in national healthcare policy and transformation of healthcare. Mark had always had a vision of SEMTA becoming a local and regional resource for healthcare information but now he saw the opportunity for us to become national spokespersons for the future of healthcare. We were already well on our way but Mark's support was a major factor in the future of SETMA.

On April 12, 2007, two SETMA partners announced that they were leaving SETMA. They had been starting businesses which competed with SETMA for several years and without our knowledge had been going to companies with whom we had contracts and negotiating their taking over those contracts after leaving SETMA. During this "exit" meeting, they announced that others were leaving with them and that this was a "tipping point" and that within six months SETMA would no longer exist. April 12, 2012 is soon to come which will be five years since that prophesy and SETMA is stronger and larger than ever. One of the eight physicians has returned to SETMA. And three others continue to speak of SETMA as being the best job they have ever had.

The fracture of relationships is never a pleasant thing; although no one took their prophesy seriously. On July 30, 2007, eight physicians left SETMA. Four left to form a new group and four left coincidental but not related to the first four's departure. I remember thinking, now nothing could be worse than this, but little did I know: it could.

Nine days after this exodus, Mark called and asked to come to my home. This was unusual and I wondered if maybe he was discouraged and wanted to leave, also. I was not prepared for what he told me. As Mark and I sat in my living room, he said, "I have terminal cancer." At first, it was as if he had told me, "I have a cold." But as I sat silent, and for two hours listened to Mark, it sunk in. This was as bad as it could be. As Mark talked about his symptoms, diagnosis and future, only two things gave him emotional distress: his children and being a physician. He grieved over the loss of both.

I never doubted that SETMA would not only survive but succeed in the absence of the eight physicians who had left, but now.... I was not afraid that SETMA would not survive Mark's loss, but I did know that the comfort and camaraderie that we had shared would be sorely missed long after the end of his life. Our relationship, which others said could not survive, had become pivotal to both of us.

In a very real sense, the loss of Mark was like the loss of my father two years before. I was seventeen when I left home for college and I never lived again in my father's home except as a brief guest. My father had never been involved in my career or business but his presence had always been like a safety net. I felt certain that if I were about to make a mistake my father would step out of the shadows and shake his head, "No." Mark was not a father to me but we

shared a relationship that while neither of us really "needed" the other, we enjoyed the confidence that if either of us were about to make a mistake, the other would step up and say by the shaking of the head, "No."

In the five years since his diagnosis and the three years since his death, there have been numerous times that I reached for the telephone to tell Mark about some new enterprise or adventure SETMA was undertaking. I never touched the telephone before remembering but the desire was there. I often visit Mark's grave site and often stand there and talk about SETMA's new adventures.

I so want to tell Mark how far we have come and how we have fulfilled his vision of being national leaders in healthcare affairs. Mark would be thrilled that the University Of Texas Health Science Center at San Antonio School of Medicine has elected me an Adjunct Professor of Family and Community Medicine. He would be thrilled at the recognitions SETMA has received. In his last days, we had applied for Medical Home recognition. He would like the fact that we are a Tier Three (the highest) NCQA Medical Home. He would love the fact that we are a Joslin Diabetes Affiliate. The Public Reporting of quality metrics by provider name would have scared him like it did all of us, but he would have done it. Mark would be proud of the other accreditations we have received. As I prepare this article, I received an invitation to be on the Advisory Board for a conference in Washington, D.C. in September entitled *Diabetes Innovation 2012 – Connect, Care, Cure*. The six members of the Advisory Board are recognized national leaders in healthcare transformation.

Mark would have loved the note I received last night (March 13th) from the IBM's Global Director of Healthcare Transformation, who said, "Hi, Susan nice video -- Dr Holly and the SETMA COGNOS solution are now folk heroes in Australia -- sort of in "Mary Watson" folk hero - the Minister of Health loved the slides on SETMA and the empowering of the patient with data and the story of personalizing data to the individual and lots of interest in Wellby Kiosk as well Susan can you send the team in Australia the COGNOS SETMA information and the video thanks." Australia?! Mark would be proud.

The SETMA Foundation was formed before Mark became ill but he never saw it performing as it does today. I told Mark once, "Until, I met you, I had never known a man who was more generous than my father, but you are." Mark would have been overwhelmed at SETMA's partners giving the Foundation in excess of \$2,000,000 by the end of this year.

As we all stand by his gravesite on Friday, March 23, 2012 at 3 PM in the afternoon, we will remember Mark A. Wilson, MD. And, in remembering him we will be thankful that we could all be known as "Friends of Mark."