

# HEALTHY LIVING

## Patient privileges

### Concierge medicine allows greater access to physicians, for a hefty annual fee

BY ANDY MILLER  
Cox News Service

Frank Simon was tired of the medical waiting game. Waiting for days to get a doctor's appointment. Waiting for hours in the doctor's office before a physician was free to see him. Then, in the exam room, says Simon, "I felt rushed," as the doctor moved quickly to the next patient.

So Simon, 63, and his wife, Irene, 64, switched to the leisurely world of concierge medicine, where an annual per-person fee buys greater access to a physician.

Concierge medicine — the name itself implying highly personalized services — has sprouted as a rebellion against what's perceived as assembly-line medicine. The doctors flee the frenetic pace and hassles of traditional practices and limit their practice loads. Patients, in exchange for \$1,500 or more a year, get 24/7 convenience and added face time with a doctor.

In the past five years, concierge practices have gained a small foothold in major cities. But these arrangements — also known as boutique practices — raise tough ethical questions:

In a system that already has a shortage of primary-care doctors, does concierge medicine siphon off valuable resources? Does it create a two-tiered medical system, one for the well-off and one for everyone else?

#### 'Peace of mind'

For the Simons, it wasn't a philosophical debate; they were looking for better access to a doctor.

About a year ago, they signed up with Dr. Laura Beaty, a Sandy Springs, Ga., family medicine doctor who has practiced concierge care for three years.

At Beaty's office, the Simons each got a comprehensive physical exam. They were given Beaty's cellphone number and can call if they have a question — and she'll call right back, even when she's out of town. Their appointments now are on time and can run 30 minutes or more. When Frank stepped on a nail, he got right into Beaty's office.

The cost: a discounted \$2,200 per year for both of them. They still carry health insurance and are responsible for office-visit co-pays. Beaty's office still bills their insurance company for the remainder of the covered costs.

The annual fee "is a lot of money," says Simon, who runs a financial services firm

in Marietta, Ga. But he adds: "It's been such peace of mind to us. It's worth every dollar. She's the first doctor in a long time that really cares."

Five of Simon's business clients have signed up, too.

Beaty is one of an estimated 15 doctors in the Atlanta area — all specializing in family or internal medicine — who have drastically cut their patient volume, lengthened their appointments and handed out cellphone numbers and e-mail addresses.

They say it's about practicing medicine the right way.

Beaty admits growth has not been as strong as expected. But she also says: "I'm able to spend more time with patients. I worked in a busy medical practice. I was getting frustrated with the [short] amount of time spent with patients."

#### Varied business models

Medical experts say concierge care is a symptom of an underlying disease: a sick health-care system.

"Physicians are frustrated; patients are frustrated," says Dr. Rick Kellerman, board chairman of the American Academy of Family Physicians. The current payment system — with declining reimbursements from insurers — puts pressure on doctors to increase their patient volume, he says.

It's increasingly difficult for a family doctor to do a good job, he says. Concierge practices are a very small part of the primary-care world, Kellerman says, estimating that fewer than 1 percent of family doctors nationally have taken that route.

"But there are a lot more physicians thinking about it," he says. "They're just exasperated."

As for concerns that concierge care creates two tiers of medical treatment, Kellerman says, there already are disparities in care, with 47 million Americans lacking health insurance.

Doctors are moving to other business models. Some do a cash- and credit card-only practice: charging a flat fee for an office visit and taking all comers, including people without health insurance. The insured patients file for reimbursement themselves.

One Boston-based company, Inn-House Doctor, sends physicians to hotel rooms to treat ailing travelers. The hotel guest typically pays \$300 to \$350 for the visit — much less than a trip to the emergency room, says Inn-House founder Walter Krause.

Ten of the concierge doctors in Atlanta are affiliated with MDVIP, a national company based in Florida that helps set up and support such practices. Each physician has a maximum of 600 patients, instead of the typical 2,500. After paying their annual fee of at least \$1,500, patients can use their insurance plan, with its co-pays and deductibles, for office visits.

MDVIP says patients can use a health-care spending or savings account to pay for some or all of the annual fee.

Dr. Bill Gower, an internist in Sandy Springs, joined MDVIP two years ago and



PHOTO BY CURTIS COMPTON / COX NEWS SERVICE

More face time with the doctor is one benefit associated with concierge medicine. Dr. Bill Gower, an internist in Sandy Springs, Ga., schedules 30-minute medical appointments with his patients.



In exchange for \$1,500 or more a year, patients such as James Nelson Osborne can get 24/7 medical convenience and added face time with a physician in a "boutique" practice. "This is such a better way of practicing medicine," says Dr. Bill Gower.

says his income is about the same as at his previous practice. But the pace is remarkably different.

"We'll see [patients] within 24 hours," Gower says. "We spend 30 minutes for a regular appointment. The average time a doctor spends with a patient is six to eight minutes."

"I see eight to 10 patients a day. I used to see 25 a day."

He says MDVIP practices retain 96 percent of patients from year to year.

"We must be doing something right," Gower says. "This is such a better way of practicing medicine."

#### Safety net for poor

A longtime Gower patient, John Thornton of Atlanta, 65, says the \$1,500 "is not that big of a deal for me. Some people don't think it's worth that, but I do."

Since Gower converted to the new model, Thornton says, "He's in a lot better mood, and I am too. I feel like I'm not rushed. It's a better situation for the doctor and the patient."

Still, the concierge trend comes at a time when the health-care system is more brittle than ever, especially for indigent and uninsured patients.

Dr. Lawrence Sanders, associate dean of clinical affairs at Morehouse School of Medicine in Atlanta, compares concierge medicine to a private school.

"That does not remove the need for access to public education," Sanders says.

Concierge medicine "reinforces the need for a strong safety net" for the poor and uninsured, he says. Concierge doctors "probably don't contribute as much as other physicians to the safety net," he adds.

Sanders, an internal medicine physician, says primary-care doctors still can do a good job without resorting to a boutique practice.

"Most physicians know how to balance their time to meet their patients' needs."

#### Better care at what cost?

Dr. Don McCanne, a retired California

family medicine doctor, is critical of boutique practices. Concierge doctors have bailed out of the current system, perhaps to make more money, says McCanne, senior health policy fellow with Physicians for a National Health Program, which advocates a Medicare-like system for all Americans.

While he says he understands why doctors switch to concierge practices, McCanne adds, "I condemn it. I think all physicians should be involved in improving our health-care system."

If concierge medicine spreads, he says, "it would put a further strain on our primary-care infrastructure."

Currently, the ideal geography for concierge medicine is the affluent urban ZIP codes.

Still, Arthur Caplan, director of the Center for Bioethics at the University of Pennsylvania, points out the wealthy always have enjoyed special treatment in health care.

Concierge patients are paying "for what you should expect anyway," Caplan says. "Why shouldn't I receive a callback [from a doctor], an e-mail?"

Yet he doesn't blame doctors for switching. "Concierge medicine, in its current form, is a symptom of a broken system," he says.

Caplan adds, "I do hold [doctors] responsible if they don't continue to highlight the problems the system has."

A Suwanee, Ga., physician, Dr. James Criner, straddles the two worlds of medicine. Ten percent of his practice is concierge, with the rest in a traditional format.

"Traditional patients get the same great care; they just don't have the same ease of access," Criner says. "My traditional patients are very, very happy."

Criner and a partner started a concierge business right out of residency.

"I would see how much primary-care doctors didn't enjoy their lives and their practices," he says.

"I had a taste of it in residency. I didn't want to lose my interest in medicine because I was overwhelmed by patients." ■

## THE VIP TREATMENT

Here's a sample of what some doctors are offering patients for an additional \$1,500 or more a year:

- Physician availability, at least by phone, 24 hours a day, 7 days a week.
- General physical exam and health-risk assessment, including family and social history.
- Same- or next-day appointments.
- Unhurried office visits. ■

Source: MDVIP

