

The Concierge Revolution: A Primary Care Physician's Perspective

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As a daughter of two physicians, I was exposed to medicine at an early age. I would listen to my parents on late night phone calls with the hospitals and patients, and our dinner time conversations often focused on their day's work. As I watched my father work 7 days a week it taught me the passion, sacrifice and compassion needed for the profession of medicine. Choosing to become a physician was an easy decision for me. My parents laid the foundation and I had the same desire to help others to the best of my abilities using the best medical therapies available. What I was not prepared for nor encouraged to observe were the changes in the medical field that have taken place over the last 20 years that I have practiced.

I have always worked in one form or another in a traditional medical practice which basically consists of a physician accepting insurance plans as a method of payment. As it has been handled for years, after I have seen a patient, our office would file the necessary paperwork with the patient's insurance directly. We would then get paid the amount set forth by the insurance company for the procedure or level of visit charged. This differs from a concierge model where no insurance is accepted. Instead, an annual membership is charged which usually includes all office visits, hospital visits, emergency home care and office procedures for that year. It is important to note that concierge models may vary.

Over the last several years, the insurance companies have become more demanding upon what physicians are required to do in order to be compensated, including preapproval for specific tests ordered and for many prescribed medications. Insurance companies have also set guidelines for documentation requirements and if not done correctly, a financial penalty may be assessed by the insurance company. In other words, I may spend 40 minutes with a patient and do a very thorough examination, but if I forget to write one guideline point in my notes, I could be financially penalized. These audit penalties can run into the thousands of dollars if a full audit is done. As a result, the focus of physicians is shifting from talking and listening carefully at each visit to documenting. Due to time constraints, some physicians are now forced to spend the office visit typing away on their laptops in the exam room instead of communicating eye to eye with the patient. It seems as though the focus of insurance companies has shifted from quality patient care to that of documentation and pre-authorizations.

The insurance companies continue to cut services covered for patients while also cutting the amount of payment to the physicians. Each year, it seems as if the reimbursements drop yet the cost of running an office increases. In order to compensate for this, there is increasing pressure to see more patients daily. In order to increase patient volume, less time is allotted to each appointment. In my practice, the average patient age is in the 70-80s and many of them have multiple complex medical conditions and over 6-10 medications being taken. It isn't realistic for me to be able to see a patient for 10 to 15 minutes and cover all their conditions. I am not willing to compromise quality care nor will I accept the increased chance of making a medical error in my rush to see the next patient.

On top of a full day of appointments, time also has to be set aside for reviewing lab results, radiology imaging, doing pharmacy refill requests and answering patient phone calls. All of this is done during lunch breaks or after work hours in the evening. Chart documentation also has to be completed usually within 24 hours, and this is on personal time which is also not financially compensated, and family time suffers. Physician burnout is increasing as a result.

My last employer suddenly closed their doors without notice in October of last year. It was a terribly handled process that was difficult for the patients as well as the staff. It did however make me realize that something had to change. I was not going to be placed in that position again so it was time for me to be my own boss. I looked at the concierge model and realized that this was the solution. It removes the insurance companies completely from the equation. Patients keep insurance for hospital care, seeing specialists, lab tests and radiology orders. By doing so, I am able to fulfill my mission of seeing patients and treating them as if they were family members. I am able to be detailed oriented and thorough while not being worried about running to the next exam room. There is a misconception that concierge is about making money. It is truly about standing up to the present state of medicine filled with time limits and rushed care and saying that this is not acceptable. It is about making quality of care the goal. My focus is the patient, not the insurance. My patients now have the ability to contact me 365 days a year by my cell phone, text and personal email. If they are part-time we still have office visits with tele-medicine.

In a traditional practice, a primary care physician may have as many as 5000 patients. Most physicians have no time to do anything but focus on outpatient care only. They rely on their staff to call patients back and follow-up on issues for them. In a concierge practice, there is usually a maximum of 300 patients, a vast difference. As a result, availability increases. Time for appointments increases to 1-2 hours if needed. Complete personalization of care is accomplished and detailed because of the additional time. I have time to visit my patients at the hospital and care for them at their home for emergencies. I have the time to call all of my patients back to review results, see how they are doing in general, and answer any questions that they have.

There is a fallacy that concierge care is reserved for the wealthy. Many of my patients are not wealthy but simply realize that this is the type of care that they want. They also have had enough. They are frustrated with not hearing back from offices, not being able to get an appointment, and for having rushed appointments. They realize that by investing in their health, they are investing in their wellness.

It is important to make clear that I am not saying that concierge physicians are better physicians. We are equals to our traditional model colleagues. We simply have the luxury of more time. I stand tall next to my traditional model colleagues remembering what they are going through, but I am thoroughly grateful of the present path that I have chosen. If a concierge approach would better suit your medical needs, please consider seeing one of the concierge physicians in your local area.