

Blognosis

THE BLOG OF FAMILY PRACTICE NEWS DIGITAL NETWORK

The Better Angels of American Medicine

Nothing is more American than winning. It's so central to the American ethos that the Founding Fathers didn't even bother to scribble it into the Bill of Rights. An amendment enshrining our right to strive for victory likely would've elicited a collective "Well, duh." You might as well have guaranteed 18th-century citizens the right to wear jaunty tricornered hats. Thomas Jefferson didn't begin the Declaration of Independence by announcing that "We hold this truth to be self-evident: Just win, baby." He



TERRY RUDD

didn't need to – Lexington and Concord had demonstrated that the ancestors of future Boston Red Sox fans were in it to win it.

Despite our national addiction to sports, it's victory within the arena of politics – those well-funded bar brawls to decide who's in charge – that most enralls, unifies, and divides the nation. And even the shrine to apolitical science, the House of Medicine, enjoys intramural bouts of political pugilism.

Case in point: The campaign for leadership posts – particularly the job of president – dur-

ing last month's American Academy of Family Physicians Congress of Delegates in Denver.

All the signs and symptoms of the American obsession with political victory were there – the ardent campaign supporters, the slick, sophisticated campaign brochures and origami-esque candidate cards that likely denuded many an Oregon hillside. The three-way race to be AAFP president-elect even spawned a run-off that ended in victory for a family physician from the state of Washington. And the aftermath of the presidential election featured the requisite shock

and grumbling failure analysis within the ranks of the defeated.

But what came next were phenomena all too rare in America's favorite blood sport:

graciousness and a unifying patriotism.

The magnificent winners were almost overcome with emotion. They offered up speeches seasoned with the type of teary-eyed anecdotes usually served up by scenery-chewing Oscar winners. The losers were no less generous and prone to edge-of-weepy acknowledgments. And all professed a shared love of their career country: family medicine.



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In victory and defeat, the AAFP political competitors were tempered by Abraham Lincoln's "better angels of our nature." At that moment, those better angels of American medicine, family physicians, embodied Abe's selfless ideal of political healing.

At least at that moment.

During a postelection stroll through a chic Denver dining district, one presumed family physician was overheard declaring to his dinner companions, "They kicked him to the curb in favor of some slacker from Washington."

Apparently, even some of America's better angels prefer winning. ■

MR. RUDD is managing editor of FAMILY PRACTICE NEWS.

Hybrid Model Blends Concierge Care, Conventional Practice

BY ALICIA AULT

Some physicians looking for the steady income and slower pace of concierge medicine who have not wanted to give up their traditional practice have found a new solution: a hybrid practice that lets them devote a small percentage to the retainer side while keeping their roster of traditional patients.

So far, the full concierge model has not proven to be very popular. Only a tiny fraction of the nation's almost 1 million physicians have chosen the concierge route, according to a recent study for the Medicare Payment Advisory Commission (MedPAC).

Researchers at the University of Chicago's National Opinion Research Center and Georgetown University determined that about 750 physicians have gone to such retainer-only practices in which patients pay a monthly fee in exchange for longer appointments, same-day appointments, annual physicals, and the ability to reach the physician directly by e-mail or cell phone.

The hybrid model is being promoted as an alternative by Concierge Choice Physicians, a Rockville Centre, N.Y.-based private company. CCP says more than 300,000 traditional and concierge patients are being managed by physicians who have contracts with the company.

Dr. Gary Levinson, an internist in private practice in San Diego, is one of the physicians who has chosen to try a hybrid approach with CCP. Dr. Levinson said that he was looking for a way to spend more time with patients; besides a busy office practice, he is also on call.

After hearing CCP's pitch, Dr. Levinson says he was sold, largely because the company's model would give him an opportunity to keep his existing patients. He and his partner have 3,500-4,000 pa-

tients. Of those, less than 100 are in the concierge practice. These patients pay \$1,800 a year for an annual physical (the practice bears the costs of all diagnostics), faster and longer appointments, and direct access to the physicians.

Initially, CCP mailed letters to the practice's patients to let them know there was a new concierge option and invited them to meet with Dr. Levinson and his partner over two evening sessions. At those sessions, the physicians described why they went into medicine, and what they saw as the merits of the concierge practice, Dr. Levinson said. Some patients signed up on the spot, while others joined later.

So what kinds of patients signed up? Some have serious chronic illnesses, but others are just more proactive about their health, he said.

Dr. Levinson said that his office has a separate staff member who's devoted to concierge patients. An hour each morning is blocked for the concierge patients; if the slot is unused, Dr. Levinson takes advantage of the time to catch up on paperwork or uses it to accommodate a non-concierge patient.

He's also found that the concierge patients do not abuse the 24/7 personal access. So, while it could be a burden, it has ended up being completely manageable, he said.

Even so, to keep an appropriate balance between the concierge side and

traditional practice, he's capping the number of patients he'll enroll at 150.

Aside from the revenue boost that's come with the hybrid model, everyone – from his staff, to his patients, to himself – is happier, Dr. Levinson noted. He gets to know the concierge patients better, which makes him a sharper practitioner. The traditional practice patients reap the benefits of his lowered stress levels. "Overall, I'm happier. I enjoy my job more because I'm not beating myself up to make a living," he said.

Dr. Robert Altbaum, an internist in Westport, Conn., said that he's also been a lot happier since adopting the CCP hybrid approach. He first began looking at a concierge model about 8 years ago when Medicare physician fee cuts appeared to be something that could happen.

But he and his six partners decided to table the idea because they worried that they would lose too many patients. Ironically, a few years later, some of the practice's patients started migrating to a concierge model.

The partners started searching again for a way to fend off Medicare cuts and better serve patients. After reading about the hybrid approach, four of the seven partners decided to give it a try a year ago.

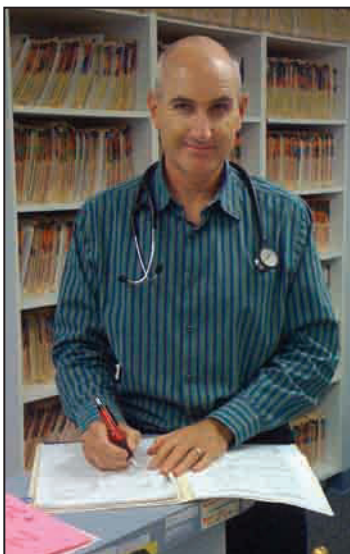
Dr. Altbaum said he's limited his concierge patients to 5% of his practice, or 100 patients. He comes in a half hour earlier and leaves a half hour later – concierge patients get the first and

last slots of the day – which has added 5 hours to his week.

He has given up what used to be a day off, but, it has added 20% to his bottom line for about 10% of his time. And, he said it's made him more available to his other patients because, in a sense, he's now seeing 100 fewer patients.

All his patients are "uniformly happy," he said, adding that he's more relaxed.

Dr. Altbaum and Dr. Levinson both reported no conflicts of interest. ■



COURTESY DR. ARI LAIOTIS

Dr. Gary Levinson has less than 100 concierge patients out of 3,500-4,000 in the practice.

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