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## **Concierge Medicine: Professionalism vs. Entrepreneurism**

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In a recent advertisement for one company which promotes concierge medicine, the concept of “old-fashioned medicine” was raised as an ideal. The suggestion was made that concierge medicine is a form of “old fashion medicine.” There are a number of businesses which are attempting to “cash in” on patients’ wiliness to pay thousands of dollars for the privilege of immediate access, twenty-four-hours a day, to a particular physician.

“Old fashion medicine” is well known to those of us who are over seventy. That is the kind of medicine we had when we were children. It WAS marked by physicians who knew you well and who cared about you personally. But, it was also marked by costs which generally were \$1 for an office visit; \$1 for a prescription and \$1 for a shot. It was marked by physicians who could not do a great deal for you but their personal care made up for what they couldn’t do.

These characteristics were why medicine was considered as one of the three major professions. Medical professionalism began to change when doctors, who at one time “bartered” for payment – a chicken or vegetables instead of cash for payment – but who with the advent of Medicare, began to be paid for the care they once gave for free. Under that “old fashion medicine” no one was turned away and the poor and penniless received the same care that the well to do received.

### **Entrepreneurism replaced professionalism**

Entrepreneurism replaced professionalism as physicians began to see how much money could be made by ordering more tests and by doing more procedures. Specialty care became the vogue as physicians realized that the ‘big money’ was in procedures. Medicare which was supposed to cost “x” in its first 25 years (1965-1990) cost almost 10 X. The reason; entrepreneurism invaded healthcare and supplanted professionalism. Other issues drove costs up, such as technology and more treatment options, but none that added costs like entrepreneurism.

In 1979 and more in 2009, doctors began trying to reverse this process with patient-centered, medical-home care. It is having an effect, but the decrease in cost is not done by eliminating

care for the poor but it is done while attempting to expand care to all. But just as we have tried to reverse the tide of excessive cost and decreased access to care, along came concierge medicine. Masquerading as patient-centered care, this ultimate expression of entrepreneurship showed doctors how to work less and make more. Concierge medicine has even had the hubris to suggest that their entrepreneurial method is a “better” plan of care, as if we can’t figure out that if you fire your sick and poor patients that your quality of care measures improve as you eliminate the needy and ill from your practice.

It is amazing how many healthcare leaders, who see the profitability of caring for the wealthy and well, are endorsing this healthcare fraud. Doctors like the personal wealth and patients like being courted by the doctor, but if every doctor chose concierge medicine which is a self-centered – not patient-centered – form of healthcare delivery, we would have tens of million more patients who do not have access to care.

### **Healthcare by the Numbers**

Concierge practices boast that their “method” of healthcare delivery is superior because their quality metric performance and preventive care metrics are “the best.” The question is, “How can a healthcare provider improve his/her performance scores?” The best way is with quality improvement initiatives where all patients in the practice are receiving excellent care. The “concierge way” is to eliminate patients with meager assets, financial, educational, sociological, etc., from the practice and “Viola,” the metrics improve magically.

SETMA achieved quality improvement without firing the majority of our patients, which every concierge physician has done. We achieved excellence in care and outcomes over a large population, most of which cannot afford a \$5 co-pay, not to speak of a large annual fee. At [www.jameslhollymd.com](http://www.jameslhollymd.com) under Public Reporting, we post all of our providers’ performances for the past seven years by name on over 250 quality metrics. At every patient visit, we tell each patient the standards of care they personally need and deserve. We give them a personal summary of what they HAVE received and of what they still need.

You can, as the concierge practices do, improve your numbers, simply by leaving thousands of your patients behind and out of your measurement. This is not quality improvement; it is quality manipulation.

### **Validation by Stories**

Concierge doctors post “their stories,” which consist of how much patients “love” their concierge doctor. Unfortunately, they have not reviewed what happened to the hundreds of thousand of patients who were fired from the concierge practices as they morphed into a concierge care model. One concierge company boasts of 250,000 “customers” who are satisfied customers. If the typical doctor culled 1,500 or more patients from the practice, which means that over 1,500,000 patients were fired by the practices which joined this one company. . One wonders if these patients love concierge medicine and what would their concierge story be.

SETMA posts some of our stories at <http://www.jameslhollymd.com/medical-home>. There are no stories by patients fired from our practice for financial reasons. And, the rare patient who leaves our practice is interviewed to see if we were not meeting their needs. There has never been a wholesale firing of patients. SETMA's stories are about poor, sick and disenfranchised people who have been nurtured and cared for by SETMA.

### **Personalized Care**

All of our patients, not just the wealthy and privileged, have 24-hour access to personalized care with all of their records available whether in the hospital, emergency department, nursing home, hospice, home health, etc. SETMA has staff including physicians available at all times to create continuity of care and coordination of care for All of our patients. You can read a contrast and analysis of concierge medicine with PC-MH at the following link:<http://www.jameslhollymd.com/Letters/the-fraud-of-concierge-medicine>. At the bottom of this linked article are other articles which address the problems with concierge medicine.

The following tells you more about SETMA: <http://www.jameslhollymd.com/in.../vital-signs-examiner-publication>. By the way my home telephone number has been publicly listed for 50 years and most of my patients have my cell phone number which they received at no charge.

Increased access to care is one of the principle goals of healthcare policy today; concierge medicine exists for the personal benefit of the physician and for the convenience of a few fortunate people. The concierge model turns the goal of increased access to care on its head as the concierge physicians sees only a few patients. Concierge medicine is not helping solve our healthcare needs; it is creating greater need.

### **Debt of Gratitude**

And, as a public policy issue, the physicians who were mostly educated in state subsidized schools (no matter how much their tuition it did not cover the cost of their medical education) take the benefit and blessing of that education and exclusively uses it for their personal benefit without regard to the community which gave them this opportunity. Every doctor owes a debt of gratitude for the opportunity to be a doctor; concierge physicians just choose to ignore that debt and the community which gave the opportunity to them.