



Focus Section

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Gyms feel burn of unhealthy economy

BY MIKE SILVESTRI
Special to The Daily Record

It had been several years since Butch Bowker worked out, and while he needed to get back in shape, he couldn't afford to rejoin the massive gym to which he used to belong.

"I didn't want to pay the money because they have the pool and this and that. All you need is the treadmills and the basic machines to work out," says Bowker, who is retired and lives in Bel Air. "If you're not using all that equipment, why pay for it?"

So he didn't. Bowker instead paid about one-third what he used to pay, joining **Anytime Fitness**, a small gym open 24 hours every day with treadmills, stationary bikes and an array of weight machines. The club in Forest Hill is one of nearly 1,000 in the country, half of which have opened in the past year.

Many gym-goers view working out as an essential, stress-relieving part of their lives, but as the ailing economy continues to struggle, they are trimming costs and adjusting their exercise routines. The number of people in the country with a gym membership has held steady recently, according to the **International Health, Racquet & Sportsclub Association**, but the type of customer seems to be changing as more people are leaving mega gyms and moving to smaller, cheaper clubs, working out at home or hiring personal trainers.

At **Gold's Gym** in downtown Baltimore City, officials said the economy has caused laid-off workers to cancel their memberships, and the collapsing economy forced **Merritt Athletic Clubs** last year to close its Annapolis gym, a popular workout spot for state lawmakers.

Meanwhile, the **Y of Central Maryland** has seen a massive increase in business. Memberships at the nonprofit centers in the Baltimore area have increased 20 percent in the past year, says spokeswoman Sara Milstein. She attributed the jump to the Y's family-oriented atmosphere and consistently low prices.

"People are trying to cut back expenses, but they're also getting back to basics and re-assessing everything in their lives," she says.



Carrie Lang, owner of Anytime Fitness in Forest Hill, Md., says that low monthly prices and 24-7 gym accessibility keep her membership numbers strong — despite declining numbers elsewhere in the industry.

The nation's unemployment rate recently reached its highest level in 25 years, but in tough economic times, many people find solace at the gym.

Dave Esposito was laid off this past December from his job as an electrical engineer, but he continues to go to the gym three times a week. At the gym, the Millersville resident finds a sense of community and works out frustrations over the way companies have outsourced jobs in his field.

"It's my chance to talk to other adults and socialize for a few hours," Esposito explains.

Kenneth Reed, who runs a personal training business in Windsor Mill, says working out is more important in a recession because it helps people to think positively.

"I'm not in a recession," he says. "There might be one going on, but I'm not in it. I

think if you just keep thinking about it, you'll be in it."

Personal training offers a more intimate setting than massive gyms, and trainers often double as therapists, Reed says. Customers come in to exercise their bodies, but they also talk about how they lost their job or are afraid they will soon.

Personal trainers often give one-on-one classes, but when the economy began to tank, Reed began offering more group classes to make better use of his trainers' time, and business has remained steady.

For some, such as Lindsay Hoehn, working out at the gym is too much a part of life to give up. The 33-year-old Hampden resident quit her job in August to go to graduate school at the University of Maryland Baltimore and is saving money by cutting out some luxuries; refusing, for instance, to buy expensive lattes and drinking coffee only when she brews it at home. Working out, however, is "like eating and sleeping."

"It's a huge outlet for me," she says while walking into the Merritt gym in Canton. "It's something I don't really consider a luxury; it's a necessity."

The sagging economy, along with soaring health care costs in the state, has even prompted a state lawmaker this year to introduce a bill in the General Assembly that would give Marylanders working to improve their health a break on their income taxes. According to the New England Journal of Medicine, Maryland spends \$4.3 billion every

year in additional health care costs, but the added motivation of a tax break would help residents reduce that cost, says Delegate Jon Cardin, D-Baltimore County.

And in a recession, he adds, people lose their motivation and fall further out of shape.

To get the tax cut of several hundred dollars, residents could join and work out at a gym or quit smoking, Cardin says. Of course, they would have to be able to document their efforts.

At Anytime Fitness in Forest Hill, the gym's convenience and affordability have helped it beat back the recession. The club opened less than four months ago, but business has been strong. Memberships cost \$43 per month, but other family members can join for \$29 per month. Many of the club's members live in the surrounding neighborhoods.

In addition, members use a pass to enter the gym whenever they want. On a recent Sunday, a day when most gyms are open only a few hours, Anytime Fitness had its first customer at 6:44 a.m. The last came at 11 p.m.

Owner Carrie Lang put everything she had into opening the gym, but she's confident she made a healthy investment.

"Believe me, I've had plenty of nights waking up at 3 in the morning, going, 'What am I doing opening a business in this economy?'" she admits. "But I think this is the right kind of business."

“It's something I don't really consider a luxury; it's a necessity.”
Lindsay Hoehn



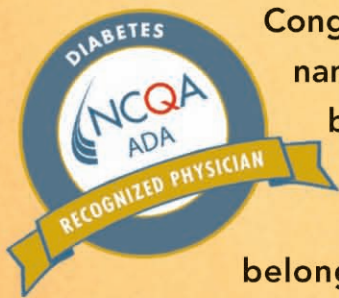
Since being laid off in December, electrical engineer Dave Esposito finds that his trips to the gym offer not just physical but also mental health benefits. "It's my chance to talk to other adults and socialize for a few hours."

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Can 'concierge' doctors save primary medicine?

BY ALAN DESOFF

Special to The Daily Record

Fed up with health insurance companies, burdensome record-keeping and low payments for the care they provide to their patients, more Maryland doctors appear to be following a national trend and adopting a retainer-based practice that allows them to avoid insurance hassles, provide quality care to fewer patients and make more money for themselves.

In the retainer model, doctors charge patients an annual fee, usually \$1,000 or more, which covers a comprehensive range of services as well as the doctor's personal attention whenever a patient needs it. The practice replaces the traditional fee-for-service arrangement, with patients paying for each office visit or service they receive.

It also is called "concierge" or "boutique" medicine, with fees reportedly up to \$10,000 or more in some affluent communities in California and Florida. But Maryland doctors bristle at those characterizations, which they think suggest that only wealthy patients can afford their services and that the doctors will become rich as well.

"It's not about money. It's about taking care of patients and not working for the insurance companies," says Robert P. Fields, M.D., who practices internal medicine on a retainer arrangement in Olney.

"Patients who come to me say they can't get in to see their doctor and when they do, they get eight minutes and their concerns are not addressed adequately. It comes down to a value decision for patients. Do you value your health and want access to an unhurried doctor or not?" asks Thomas F. Lansdale III, M.D., an internist with a retainer-based practice in Baltimore.

Alan Sheff, M.D., a primary care doctor in Bethesda who converted his practice in 2003, says he wanted to spend more time focusing on prevention and wellness for his patients. Before he made the change, he says he was like a fire-

man. "[I was] always putting out the fires but never having a chance to talk to people about how to prevent the next fire from breaking out. I felt I had moved away from the core values that attracted me to medicine in the first place," says Sheff.

"Physicians who are doing this really aren't trying to make more money. Because of low reimbursements from the insurance companies and other problems, they're just finding it more and more difficult to practice medicine the way they were taught," says Gene M. Ransom III, executive director of MedChi, the Maryland State Medical Society.

But some Maryland medical authorities see a downside to retainers. "From the physicians' point of view, we understand why it is happening. From the patients' point of view, our concern is that it's going to make a bad situation even worse," says Nancy Fiedler, senior vice president of communications for the Maryland Hospital Association (MHA).

She cites a serious shortage of physicians in Maryland that already is having an impact on hospitals and consumers in the state. Maryland is 16 percent below the national average in the number of physicians in clinical practice, with the shortage most severe in rural areas, and indications are that the situation will worsen, according to a study conducted last year for MHA and MedChi.

According to testimony at a hearing the Maryland Insurance Administration



Four years ago, Dr. Thomas Lansdale III, opened a concierge-based practice — where patients pay an annual fee for comprehensive primary care and unlimited doctor access. Since then, he has never looked back. 'I'm very happy. I can't tell you how much I love my job.'

held in December, Maryland primary care physicians have 2,500 or more patients and see 20 to 25 a day in 15-minute intervals. As more of these doctors limit themselves to a few hundred patients who are willing to pay their fees, it becomes even more difficult for other patients to find new physicians, Fiedler says.

Maryland has about 25,000 licensed physicians, but approximately 40 percent of them are teachers, researchers or administrators who do not provide direct patient care. Of those who do, there is no data on the number who have opted for retainer-based arrangements, but it is believed to be growing. MDVIP (the VIP stands for Value

in Prevention), a Florida-based company that helps physicians convert their practices to "personalized and preventive health care," lists 26 in Maryland among 280 nationwide. The practice also has its own national professional organization, the Richmond, Va.-based Society for Innovative Medical Practice Design.

The prospect of some type of future regulation of retainer-based practices in Maryland was raised in January in a report issued by state Insurance Commissioner Ralph S. Tyler following the hearing the insurance administration held to ascertain if retainer arrangements "constitute the business of insurance."

Tyler, acknowledging the impact of retainer practices on primary care, suggested that the General Assembly "may wish to explore" requiring them to register with a state agency and also consider "the broader (non-insurance) public policy implications" of the practices on health care delivery in Maryland.

Tyler's look at the retainer model caused at least one Maryland practice — Charter Internal Medicine, a five-physician office in Columbia — to step back from its plans to change to a retainer-based arrangement on Jan. 1. Instead, it told patients in a letter that it would continue to operate as it was. "We feel it would be imprudent to proceed with a practice change until our state government provides clearer direction," the letter stated.

Lansdale, who opened his practice in 2005 after nine years as chairman of the

Department of Medicine at the Greater Baltimore Medical Center, says he has no regrets about it. "I'm very happy. I can't tell you how much I love my job," he says.

He charges an annual fee of \$1,500 and has about 250 patients now and says he will limit his practice to about 350. He promises to provide complete medical care to his patients, including laboratory work,

and be available to them at all times, including on his cell phone, which he always carries with him.

"When I started this," Lansdale says, "my colleagues said, 'Tom, are you out of your mind? You're going to have people calling you morning, noon and night.'" But

CONTINUED ON PAGE 14A

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It's not about money. It's about taking care of patients and not working for the insurance companies.

Robert Fields, M.D.

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Hospitals extend holistic healing hand to community

BY MARY MEDLAND

Special to The Daily Record

"For years, preventive medicine has been on the backburner," says Peter Andrews, director of occupational health for LifeBridge Health. "It was always an attitude of, 'Well, it's nice, but let's treat the patients first.'"

But that approach is no longer the case. Hospitals are increasingly offering patients, employees and those from the business community the opportunity to partake in acupuncture, massage therapy, smoking cessation and healthy living programs, among other offerings. A proactive, often holistic, approach is becoming increasingly popular both for the improvement in quality of life, as well as a benefit to the bottom line.

"Franklin Square went completely tobacco-free on July 1, 2008," says Ming Tai, Franklin Square Hospital's public relations manager. "We had offered smoking cessation courses in the past, but we had to help the remaining 250 employees who still smoked," she says. "We provided classes that focused on relaxation and behavior modification and also provided everyone a free, six-week supply of patches."

For the past 10 years, The Medi-Spa at Mercy Medical Center has offered acupuncture, massage, reflexology and reiki. "About one-third of our clients are patients, another one-third are employees and the rest come from nearby businesses or from the courthouse," says Donna Chang, R.N., an aesthetician, reiki master and owner of The Medi-Spa. "Acupuncture has been accepted by the World Health Organization and by NIH. It can treat so many things, such as anxiety, depression, insomnia, stress, arthritis, tendonitis and asthma.

"Usually the symptom that has presented is superficial and the disease process initiates on a deeper level and you need to get to that level. Typically that will take four to six treatments."

Chang estimates that The Medi-Spa typically treats between 10 and 15 patients a day, many of whom come two to three times a week.

Reiki enhances the body's flow of energy, says Chang, and is directly connected to one's quality of life. "You use your hands on or over the body while the patient is fully clothed," she says. "This is especially good for people who are afraid of needles. The calming energy that is transferred from the reiki master to a student can be transferred to



The Medi-Spa at Mercy Medical Center offers a range of holistic care options — like acupuncture, massage, reflexology and reiki — to hospital employees and patients. The facility also provides skin services, like micro-dermabrasion and chemical peels.

people of all ages, while reflexology helps rebalance the body by moving the body's trigger points to help alleviate symptoms.

"We are seeing more and more people becoming increasingly open minded about these treatments ... I have a woman who is being treated for cancer and she comes for reiki before every chemotherapy session. The Medi-Spa at Mercy wants to go beyond the physical experience of typical therapies and enter deeper reservoirs of relaxation, healing and well-being."

In addition, The Medi-Spa offers a number of other services for the skin, such as micro-dermabrasion sessions, chemical peels and medical skin care.

One of The Medi-Spa's regular massage patients is Donna Landers, R.N., who works in outpatient chemotherapy at Mercy's Institute for Cancer Care. "I started doing this about once a month because it is so relaxing," she says. "You can be completely tied up in knots and having a really crazy day. It really makes a difference and the benefit carries over into other days."

Increasingly, hospitals are becoming aware of what they are serving — for better or worse — in their cafeterias. "We have been adding healthy foods to our cafeteria offerings and listing calories, what is in the food and pointing out heart healthy options," says Andrews. "We looked at non-healthy choices, such as cheeseburgers and fries, versus healthy offerings, like salmon and sweet potatoes. To make the salmon more affordable, we increased the cost of other items."

Of course, it is not just in the spirit of doing good that hospitals are offering these changes: Doing so has an impact on the bottom line. "If our employees are healthy, they are likely to stay with us longer and to be better workers," says Andrews, who adds that LifeBridge has been voted by Baltimore magazine the best place to work for the past three years. "We gave our employees, as well as their families and our patients, free flu shots, which will cut down on employee absenteeism and increase employee morale."

Andrews adds that a LifeBridge Health & Fitness center — which employees can use at a reduced rate — is located just outside the beltway on Reisterstown Road. In addition, the hospital has surveyed employees as to what they would like most, whether that is a walking club, yoga after work or Weight Watchers.

"Our Wellness Committee looks to see what fun things we can do to get the staff to become more aware of their own health," says Andrews. "We are in the process of hiring a wellness coordinator, which would be a full-time position. This individual will focus on five key areas — diabetes, hypertension, asthma, high cholesterol and pregnancy.

"We are also designated as a Pregnancy Friendly Workplace by the March of Dimes. Our employees who are pregnant can take advantage of parking that is closer to the building and arrange for a better choice of shift work. Plus, mothers who return to work and are breastfeeding can use a private room to pump breast milk."

As LifeBridge questioned its employees about what programs they wanted most, so did Mercy. "We had a meeting with the administrative offices and did a survey of employees as to what they wanted to see more of," says Chang. "They unanimously requested health and wellness services. Consequently, we offered our employees a discount for these services."

LifeBridge has an indoor walking path and three outdoor walking paths, all of which are marked with distance and number of steps. "Many people are able to walk the recommended 10,000 steps in about 20 minutes," says Andrews.

In addition to programs for its employees, Franklin Square is reaching out to the community. "We just launched 'Getting It Right,' which is a seminar we offer to our female employees and to women in the community," says Tai. "Getting It Right' offers education about osteoporosis, menopause and how to take care of your health."



MAXIMILIAN FRANZ

Medi-Spa also provides skin services, like micro-dermabrasion, laser treatments and chemical peels.

Continued from page 13A

so far, he says, nobody has called him "inappropriately." In fact, when he was away for a weekend recently, a colleague who covered for him "wasn't up all day and night" managing his patients.

Fields, who started his practice in 2003, also charges \$1,500 annually and is limiting his patient load to 400. Calls to his office during office hours are answered live and promptly by a staff member, not a recording. Fields even makes house calls and claims they save money for patients, Medicare and private insurance providers alike. "Every house call saves an expensive trip to the emergency room," he says.

Sheff, a MDVIP doctor, has limited his practice to 550 patients who pay \$1,650 annually. He says he has a waiting list, but rarely is able to add new patients because he has a 97 percent renewal rate. In his earlier, traditional practice, he had more than 3,000 patients. "I'm as busy as I want to be and I'm doing just fine financially," he says. But most important, Sheff emphasizes, is the time he has to put toward personalized wellness and prevention for each of his patients.

Although doctors say they will treat adults of any age, Lansdale says he doesn't have "a lot of young, healthy people." Most of his patients, he says, are in their 40s and older, who "accrue medical issues they

want someone to pay attention to."

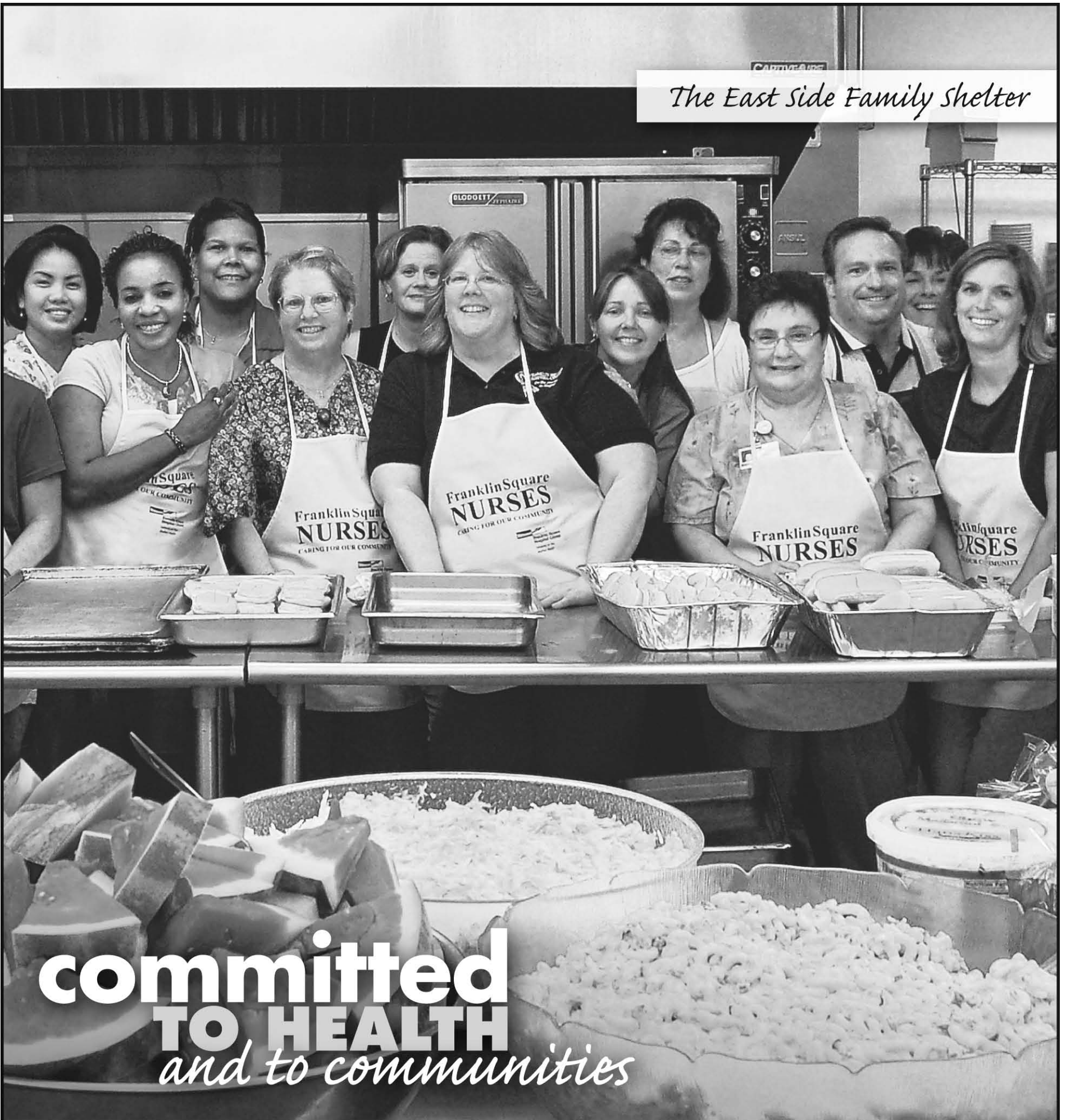
Similarly, he says, retainer-based medicine is not for young doctors just starting their careers. "Older patients are looking for experience. You have to establish a reputation," says Lansdale, who is 55.

Lansdale, Fields and other doctors reiterate that the hassle with insurance companies was a key factor in their decisions to start retainer-based practices. "The hours and hours a day, literally, that go into bureaucracy and paperwork and trying to fight for your patients; it was just so disheartening. That's what is killing primary care," Fields says.

"It's the third party, the insurance com-

pany, that drives doctors crazy," says Lansdale. "We have a professional, ethical responsibility to do our best to take care of our patients. In the old days, patients paid their doctors in chickens, potatoes, turnips and so forth. There was no such thing as sending a bill to an insurance company that might or might not decide to pay it. That's why doctors are burning out and switching their practices when they should be in the prime of their careers. They just can't stand it anymore."

As Commissioner Tyler states in his report, "Given the current economic realities of primary care practice, retainer practice is likely to remain an attractive alternative to some primary care physicians."



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MedStar Health is a not-for-profit, community-based healthcare system, which includes Franklin Square Hospital Center, Good Samaritan Hospital, Harbor Hospital, Union Memorial Hospital, Georgetown University Hospital, Montgomery General Hospital, National Rehabilitation Hospital, Washington Hospital Center, MedStar Family Choice, MedStar Health Visiting Nurse Association, MedStar Physician Partners, MedStar Research Institute and our other affiliate members.