



GINGER PERRY/The Winchester Star

Internist Dr. Brenda Arnett listens to the lungs of a patient at her Kernstown office.

Breaking ties, building bonds

Doctors sever insurance ties for more patient bonds

By LORRAINE HALSTED
The Winchester Star

WINCHESTER — When local internist Dr. Brenda Arnett sees her patients, she sets aside a half-hour at the very least for each appointment.

It's not uncommon for her to spend as much as 1½ hours with some of her patients, depending on the complexity of their problems.

Spending time with patients as she sees fit is a luxury Arnett didn't have in her first job at a practice in Front Royal.

After she finished her residency at Georgetown University Hospital in Washington, Arnett joined the Front Royal practice and was thrust into a schedule of working long hours and juggling large patient loads.

She said it caused a lot of sleepless nights as she wondered how thoroughly she evaluated and treated her patients.

"I felt like I wasn't taking good care of people," she said.

Arnett said her decision not to be a health insurance provider has freed her from the pressure of having to make more money by taking on more patients than she can handle.

She said the extra revenue would be needed to cover administrative costs for processing claims, including the hiring of two extra employees and expenses for treatment not fully covered by reimbursements from health insurance companies.

According to a survey from the nonprofit Center for Studying Health System Change, the number of physicians nationwide no longer contracting with managed health-care plans has grown from 9 percent in 2001 to 11.5 percent in 2006.

"The number of doctors walking away from [health insurance companies] in totality is still relatively small," said Michael Jurgenson, senior vice president of health policy and planning for the Medical Soci-

ety of Virginia.

He said doctors who choose not to contract with health care companies are typically farther along in their careers and already have an established patient base.

"I think it's uncommon to do this right out of residency," said Arnett, who has been practicing medicine for 2½ years.

Although she was with the Front Royal practice for just a year, she had patients follow her when she opened her office in Winchester.

Another year later, Arnett has gained about 400 regular patients and lost about 10 who decided that they would rather deal with doctors within their health-care network.

Dr. Laura Dabinett, a gynecologist who has been practicing medicine in Winchester since 1990, said Arnett's move not to contract with health insurance companies was "gutsy," especially since she is just starting her career.

Dabinett left a shared practice with other OB/GYNs in 2001 because of the high-priced malpractice insurance associated with obstetrics and because she felt health insurance companies had too much control over what she charged her patients.

"I was tired of insurance companies dictating what I can and cannot do," she said.

Like Arnett, Dabinett said she wanted to spend time with her patients and was frustrated by the

shrinking reimbursements she received from the health insurance companies with which she contracted.

"The payments do not keep up with inflation," she said.

Dabinett also wanted time to address multiple conditions in one visit, if necessary, something that many health care companies won't allow.

"You can only bill for one problem at a time," she said, which would mean scheduling multiple visits for a patient.

When Dabinett opened her own office, she dropped obstetrics and cut ties with all health insurance companies except one, which she said is easy to work with and reimburses adequately for treatments.

When Dabinett left her previous practice, many of her patients followed her and were willing to file their own paperwork to health insurance companies.

Even though she lost about 20 percent of her patients, Dabinett, who now shares her practice with Dr. Carolyn Wilson, has a patient roster of about 3,000.

Breaking ties with health insurance companies does eliminate some headaches, but doctors and office employees don't exactly clear their desks of paperwork.

"I think they are trading one set of challenges for another," said Doug Gray, executive director of the Virginia Association of Health Plans.

While Arnett does not process claims — and Dabinett will not process any with the exception of the one company she still contracts with — they still provide the information patients need so they can take care of the claims themselves.

That means understanding the intricate code system used by health insurance companies and knowing enough about claims processing to answer patients' questions.

In addition, Medicare requires

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(OVER)

QUOTABLE

"I'll never make a lot of money, and I'll never make the money that I did in Front Royal, but I'm happy."

— Dr. Brenda Arnett
Winchester-based internist

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nonparticipating doctors, such as Arnett and Dabinett, to notify the agency annually by written letter that they are opting out of Medicare.

And if a patient under Medicare decides to seek treatment from them, they must sit down together and sign a contract indicating that the doctor will not file a claim.

"I have to have the contract readily available in case I get audited," Arnett said, pointing to her desk drawer.

Dabinett said fines for making mistakes on Medicare forms range from \$7,500 to \$10,000 per claim.

"It can wipe out your entire revenues for several months," she

said.

Gray said collecting on delinquent accounts also becomes the doctors' burden, since they are not getting a check in the mail from health insurance companies.

"It's much easier to be an in-network doctor because you get paid directly by the health insurance company," he said.

Gray also said payments to doctors from health insurance companies are fair, and not inadequate.

"[Health insurance companies] look out for a patient and decide if they think [a charge] is reasonable," he said.

Jurgenson said that while doctors who don't contract with any health insurance companies are still few, more are being choosier about

the ones they work with.

"What you see is more doctors not going with every plan," he said. "I think you're seeing doctors who are working a little smarter."

Although Arnett has received mixed reactions from doctors, she said one of her biggest supporters is her father, also a physician.

She also finds that running her practice on her own terms has meant sacrificing a higher salary and a more comfortable lifestyle.

"I'll never make a lot of money," she said, "and I'll never make the money that I did in Front Royal, but I'm happy."

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