Helping Bodies in Motion Stay in Motion Through a Unique Model of Care

Abstract: *There are many inherent challenges associated with the development of an effective lifestyle medicine practice that is financially viable. There exist numerous proposed practice models, many of which show promise. Inertia Medical represents a model of combined care through which services related to musculoskeletal and lifestyle medicine are offered in a part-time, self-pay, solo practice. Central to the framework of Inertia Medical is simplicity. The small practice structure allows patients to feel closely connected to the provider and directly involved in their own health care. Minimal overhead costs and limited administrative tasks allow more time, energy, and resources to be focused on what matters most—delivering high-quality patient care. The simple design has become a distinguishing characteristic of this practice and could allow other health care providers to adopt a similar model.*

Keywords: physical medicine; lifestyle medicine; practice model; musculoskeletal medicine; inertia medical

Many of the fundamental tenets of lifestyle medicine are ultimately what drew me to health care.

With an appreciation for the ways in which therapeutic use of lifestyle can influence the course of chronic disease, I became particularly interested in the importance of lifestyle within the practice of physical medicine and rehabilitation (PM&R). The field of physiatry emphasizes holistic, quality-of-life care, and patient autonomy. This felt congruent with lifestyle medicine and appeared to stand in contrast to the often-criticized and calcified paternalism of many doctor-

Inertia Medical is located within a private athletic training facility in Cincinnati, Ohio. Our* tagline, “helping bodies in motion stay in motion,” emphasizes the role our practice plays in fostering lifelong health and wellness.

It represents a paired practice in which musculoskeletal medicine and lifestyle medicine occupy the same clinic space. As captured in the practice name, a body in motion stays in motion, that is, until acted upon by a force. That “force” could

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patient relationships.¹ Physiatry, however, is not immune from many of the limitations of traditional care structures, which often preclude effective implementation of enduring lifestyle modifications. Recognizing this obstacle, I sought to establish a part-time practice that would allow more freedom to facilitate patient education and deeper discussion vis-à-vis the most foundational rudiments of health. This unique practice, Inertia Medical, was intended to be a model of health care rather than disease care.

result in a torn rotator cuff, a hamstring strain, or an ankle sprain. Often these injuries represent an opportune point of entry for lifestyle intervention, as underlying nearly every musculoskeletal malady are dietary habits, means of rest, and patterns of movement that in some way contribute to the patient's primary

*Although Inertia Medical is a solo practice, *our* and *we* are used to recognize the contributions of my wife, for without her Inertia Medical would remain no more than a floating idea.

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presenting problem. Whether a patient presents to our clinic with musculoskeletal complaints or a primary interest in lifestyle behavior change, patients can similarly expect a global approach to their care.

Inertia Medical Practice Model

Overview

During a time when the complexities of health care have resulted in soaring costs, mounting confusion, and loss of patient engagement, a principal goal in constructing the framework for Inertia Medical was to remain committed to a model of simplicity.

A patient usually becomes familiar with Inertia Medical *viva voce*, by way of a local health fair, or through online and social media marketing (eg, Instagram and Facebook). When the patient contacts our office, the call is routed to an offsite assistant. All patient visits (new or return) are allotted a 60-minute timeslot on either Thursday or Friday. When a patient schedules an appointment, it is explained to them that they will be charged 1 of 2 base fees at the time of the visit—a new patient or follow-up fee. When the patient arrives at our facility, they complete intake paperwork, which was developed to explore the patient's past medical history and lifestyle habits. During the visit, patient education is aided with anatomic models, white-board illustrations, sample nutrition plans, and even exercise demonstration on the gym floor. Each patient leaves with an itemized bill in hand, and a comprehensive understanding of his or her diagnosis and available treatment options. On their way out, patients are often encouraged to pick up a dumbbell and do a few repetitions, or to spend a couple of minutes in the Inertia Medical “farmacy” where they can pick fresh vegetables in the adjacent garden to cook for their evening meal. By creating an environment that encourages healthy habits, we seek to inspire our patients.

Visit Details

Patients are seen on Thursday, Friday, and sometimes weekends (as I choose) at Inertia Medical. The first part of my week (Monday through Wednesday) is spent working with a hospital-based outpatient PM&R practice. I have found that splitting my time between the traditional PM&R practice and Inertia Medical has afforded me the opportunity to grow Inertia Medical organically. The predictable income from the part-time hospital-based position has quelled the sense of urgency to focus on profitability too quickly, as this might otherwise have led to a compromised model of care—exactly what this model was designed to avoid. Additionally, practice variety has helped prevent burnout, allowing me to give the most to my patients.

Currently, we see an average of 6 patients per day between the hours of 8 AM and 3 PM. However, the size of our clinic allows for flexibility in scheduling—occasionally an evening or weekend visit is scheduled in order to best accommodate patients. Approximately 70% of the patients that present to our clinic do so with musculoskeletal complaints. The other 30% come with a definitive desire to discuss nutrition, exercise, stress-reduction, sleep patterns, and overall health optimization. This is in large part due to the way in which we have marketed the Inertia Medical clinic—focused on musculoskeletal issues that patients are traditionally used to. As our practice evolves and familiarity with lifestyle medicine increases, we anticipate that the number of patients who are primarily interested in lifestyle medicine will continue to grow.

Follow-up

There is no set visit schedule for which we see patients in follow-up. This results in a highly variable number of visits for each patient. Single visits often suffice for those who are otherwise attuned to their health and experience only an occasional injury or who have a specific counseling request. However, patients who present with more generalized or

complex issues often express interest in ongoing follow-up, some even on a weekly basis. On-call services are provided if there is an urgent issue that requires clarification. Calls are first answered by our assistant and then directed to me when appropriate. In general, follow-up visits are designated for expanded answers to most questions and for further conversation related to care. Limiting interval communication places a greater emphasis on the value of time spent together during clinic appointments. It also eliminates what would otherwise be unpredictable response times during other days of the week when I am at my other practice.

Pricing

The current price of an initial consultation is \$250 while return visits are \$150. Sonographic and electrodiagnostic evaluations are included in the visits fees. Additional costs are incurred if laboratory evaluations or therapeutic musculoskeletal procedures (eg, injections of corticosteroids, platelet-rich plasma, prolotherapy) are performed. Routine labs are ordered through LabCorp² and are billed to the practice account. The patient is responsible for paying the total cost of labs to Inertia Medical during the visit. This allows the patients to take advantage of the reduced pricing that has been previously negotiated with LabCorp. Alternatively, LabCorp may directly bill the patient; however, this could result in significantly higher lab fees if insurance denies coverage of particular tests. Specialty panels are occasionally ordered through Genova Diagnostics.³ For these specialty panels, blood is drawn and samples are prepared in-house for an additional fee. While each patient is provided with an itemized bill at the conclusion of their visit that they may submit to their insurer for potential reimbursement, early feedback suggests that only approximately 25% of our patients actually submit a claim.

Medication Management

There is little to no medication manipulation for most patients. Rather, we work closely with primary care

physicians who ultimately titrate or eliminate medications in response to the changes that occur as a result of lifestyle intervention. For many patients, this deepens the distinction between Inertia Medical and other care centers by placing greater emphasis on the influence of lifestyle on disease states. We also maintain close relationships with many physical therapists, massage therapists, personal trainers, dieticians, and other medical specialists for those patients that require expanded coordination of care.

Advantages

Functioning with minimal overhead and administrative costs has enabled early profitability. The start-up investment was relatively low—enough to cover diagnostic equipment, furniture for the clinic room, office supplies, and basic online services related to website development. The continuing costs of operation are also low as they include a nominal rental fee for the clinic space, part-time employment of an assistant, and additional supplies as needed. Free services such as the cloud-based electronic health information system, Practice Fusion,⁴ are used whenever possible.

While there is no definitive data to explain why patients choose Inertia Medical, below are a number of distinguishing characteristics that may attract patients to our model of care.

- *The appearance.* Except for the various diagnostic machines, our clinic is not evocative of a typical medical space. Patients have mentioned how the sterility of white-wall medical clinics and the formality of white-coat encounters have discouraged them from utilizing traditional clinics. One patient's comments humorously conveyed this to me when he was asked why he chose to come to Inertia Medical. "Because I'm comfortable here. I don't like to go to the doctor." As I raised an eyebrow to teasingly suggest that I

had been offended by the remark, he quickly followed up with, "Well, you know what I mean."

- *The visit length.* Each patient encounter lasts for 60 minutes. This is significantly longer than 13 to 24 minutes that the majority of physicians report spending with patients.⁵ Education is a cornerstone of our care and more time equals more teaching.
- *The size.* A small solo practice structure may allow for patients to feel more directly connected to their provider, whereas larger practices may present overwhelming obstacles for some.
- *The atmosphere.* Patients walk through a gym to reach the examination room. The words "HEALTH AND VITALITY THROUGH EXERCISE AND NUTRITION" stretch boldly across the back wall of the gym. The pulse of progress and self-development is palpable as people exercise and encourage one another on the gym floor—a stark contrast to the silence in most waiting rooms interrupted only by an occasional cough or moan. Our facility seeks to inspire.
- *The "one-stop shop."* Americans increasingly face high deductible health plans, which may lead many to delay or avoid care.⁶ Having made attempts to consolidate care by performing a variety of diagnostics, offering expanded education, and utilizing a range of treatments, Inertia Medical seeks to provide a modified single medical experience. This approach may be particularly compelling for patients who might otherwise require visits to multiple providers or frequent follow up for testing.
- *The complete customization.* Lifestyle assessment and the direction of treatment discussion are entirely tailored to the individual. There are no routine panels, prescriptions, packages, or programs. Patients are met at their level of understanding. Dialogue focuses on connecting to patients in a way that enables learning

and identifies opportunities for intervention. Visits are often successively layered, as if placing one brick atop another in the gradual construction of improved health outcomes. For example, if the patient expresses an interest in nutrition as a central focus of their visit, examination of the patient's dietary habits may occupy the first visit.

Recommendations may include record keeping of their meals for a set period of time using free and readily available applications such as *myfitnesspal*⁷ in order to clearly identify the patient's baseline. Each successive visit is then used to review interval changes, answer questions that may have surfaced, introduce additional dietary concepts, and to develop a new set of actionable goals.

The Future

As Inertia Medical continues to grow, we envision cultivating a community more so than a practice—a community of like-minded companies, providers, practices, as well as patients and families who have a genuine interest in health. As demand for these services grow and more patients recognize the value that this care approach offers, I plan to transition to spending the majority of my time at Inertia Medical and the practice of lifestyle medicine.

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