

# PROTECTING *Private Practice*

*Maximizing Benefits, Overcoming Barriers*

Presented by  **PAC**  
Physician Association of California

*Tuesday, December 3, 2024*



## INTRODUCTION *Introduction*

On December 3 in the state Capitol, the Physician Association of California (PAC) hosted the **Protecting Private Practice symposium** to foster discussion about the important role private practice physicians play in California's health care system, and the threats these physicians and patients face in the current health care landscape.

This discussion featured a diverse set of voices: physicians in private practice, a leading patient advocate, a healthcare expert, and Keynote Speaker, Assembly Majority Leader Cecilia Aguiar-Curry. Together, these individuals shared compelling perspectives on the positive contributions independent physicians make to their communities, contrasted with the harsh realities of operating a private practice in California, and provided valuable recommendations on how the state can ease the burdens on these essential providers.

# BENEFITS OF PRIVATE PRACTICE TO PROVIDERS AND PATIENTS

Operating a private practice offers significant benefits to physicians, who are then able to provide unique benefits to their patients.

## PATIENT ACCESS

The greatest benefit private practice physicians offer their patients is access to high-quality care. Independent physicians are uniquely able to make themselves available to patients—some patients even have their physicians' cell phone number. **Dr. Omer Deen**, a Physician Nutrition Specialist who practices in Torrance says *“It’s often not an emergency medically, but to the patient, it is an emergency.”* His patients reach out to him directly for medication refills, lost medication, or concerning side effects of a medication. *“Patients in large health groups are not offered such direct access to their physicians. More often than not, these patients are forced to wait days or even weeks to hear back from their providers, whom they are often unable to reach directly.”*



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**Dr. Join Luh**, a Radiation Oncologist in Eureka, also spoke to this point, stating, *“When patients call my practice, a human being answers the phone.”* These messages are then automatically passed directly to him, so that he can tend to a patient’s needs in a timely manner. This is in stark contrast with the phone trees, hold times, and delays that patients often experience when dealing with a vertically integrated health system.

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# AUTONOMY

In private practice, physicians are afforded increased autonomy and decision-making power—efficiencies that are especially unique to private practice.

The autonomy of private practice allows physicians to make their schedule, and to tailor that schedule to fit the specific needs of their patients. In this way, physicians can often meet a patient’s urgent need when it presents last minute.

Dr. Luh shared the story of an elderly woman who came to his practice in desperation after experiencing difficulty receiving a cancer diagnosis. Luh quickly fit her into his schedule. He conducted a physical exam and was able to identify a previously undiscovered area for her to receive a biopsy, which then allowed her to receive her diagnosis. ***“Can you imagine—if we had gone with the policies that are ingrained in many integrated health systems—this patient may never have gotten the care she needed,”*** said Luh.



**Dr. Michael Leathers**, an Orthopedic Surgeon and Sports Medicine Physician in Sacramento, shared a similar story of how he was able to quickly see a patient in need because of the way he structured his practice. Leathers spoke to a mother whose son had broken his arm. The child was seen at a larger group system, where he was having a difficult time getting scheduled for surgery. Leathers told the mother to bring her son in that afternoon, and the next day he performed the child’s surgery. ***“If I was in a larger institution, I wouldn’t have the flexibility to do that.”***

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## ABILITY TO CUT THROUGH RED TAPE

Lynne Kinst, the Executive Director of the Hemophilia Council of California, shared a powerful and deeply personal example of how private practice physicians often step up to provide care for patients whom others turn away. Her father suffered from chronic inflammation caused by his bleeding disorder, which left him in desperate need of knee replacement surgery to improve his quality of life. However, his HIV diagnosis created a significant barrier to receiving care, as many physicians and surgeons refused to operate on him.

Despite the rejection from numerous healthcare providers, one private practice orthopedic surgeon had the courage, compassion, and expertise to perform the surgery. This act of dedication not only relieved her father's pain and restored his mobility but also underscored the critical role that independent practitioners play in the healthcare system. These physicians are often willing to take on complex and high-risk cases that others avoid, going above and beyond to protect and serve their patients. ***“Their willingness to take on challenges and serve patients obviously make a huge difference to their patients,”*** said Kinst.

Kinst's story serves as a reminder that private practice physicians are key to addressing gaps in the system and ensuring that even the most vulnerable patients have access to the care they need. Her father's experience highlights the indispensable value of these practitioners, whose commitment to patient well-being can profoundly change lives.

## VESTED INTEREST IN THE COMMUNITY

In addition to providing top-quality care with a nimble approach, physicians in private practice are small business owners. They value their personal and professional relationships in their community which translates into a deep commitment of care to their patients.



## PERSONALIZED, HIGH-QUALITY CARE

Independent physicians have a unique opportunity to provide personalized care to their patients. For example, Dr. Deen shared how he was able to tailor a referral to a specific patient’s personality and needs. The patient, who is an engineer and developer, appreciates detailed, scientific explanations from his provider—really getting into the nitty gritty details. Knowing that, Dr. Deen referred this patient to a doctor who he knew would sit down and go through things thoroughly with the patient, drawing diagrams, and devoting extra time. Dr. Deen noted that this part of what physicians in private practice can do isn’t available in other settings—often, patients just get referred to whoever is on call, without any personalization to the patient.

All of the physicians on the panel described a major benefit to their practice is their ability to treat each patient as an individual. They have the time to review each patient’s medical history, concerns and life situation and to tailor their treatment to their unique set of needs. Not only does this lead to better health outcomes, but it also provides a better patient experience and ultimately lowers healthcare costs as these patients are less likely to need expensive follow up care.

**THERE’S INCENTIVE TO PUSH TO DO THINGS IN LARGE SYSTEMS VERSUS IN OUR OFFICE—BUT THE DATA SHOWS WE HAVE BETTER OUTCOMES AND HAPPIER PATIENTS.”**

**-Dr. Omer Deen**

Dr. Deen stated he treats **“every patient the same, regardless if the President of the United States or a janitor.”** His job and oath in medicine is to deliver the best care possible to each patient, regardless of their insurance. He also spoke of the fact he and other physicians know their patients the best and have their best interest in mind, which is not necessarily what happens with integrated health systems when algorithms and insurance are dictating what care should or should not be provided. **“How dare them.”**

# BARRIERS TO PRIVATE PRACTICE

## DEALING WITH INSURANCE COMPANIES & LOW REIMBURSEMENT RATES

The biggest challenge facing physicians in private practice is dealing with the ever-increasing influence and control wielded by insurance companies. This influence and control is evidenced by the complicated contracts offered to physicians, the lengthy pre-authorization process, low reimbursement rates, and delays in payment to name a few.

Contracting with insurance companies, which physicians must do if they want to gain access to the patients utilizing those insurance companies, is a complex and confusing process. **Flo Di Benedetto**, an experienced healthcare attorney, explained this point, saying, **“these contracts are hugely complex. They’re at least 85 pages, and it takes specialists to truly understand them.”** To further illustrate that point, **Dr. Leathers** shared that to even find the rate at which a physician will be reimbursed when contracting with an insurance company requires sifting through volumes of paperwork—**“they do it on purpose,”** said Leathers.

These contracts are further complicated by the fact they are practically non-negotiable for physicians in private practice. Dr. Leathers explained when receiving a contract, an insurance company will say to a physician, **“here’s your rate,” while offering only a percentage—70%, 80%, 105%—of the Medicare reimbursement rates value.** Leathers goes on to explain, **“If I say, ‘I don’t really want 85% of what Medicare reimburses. I think I should get at least 100% or 105%, they would say, well that’s not what we’re going to offer you.”** Leathers does not attempt to renegotiate with the insurance companies because, as he puts it, **“there is no negotiation.”**

If a physician in private practice does contract with an insurance company, receiving reimbursement from the insurer can be a tedious and lengthy process. Flo Di Benedetto described this process, saying **“It’s not like they pay these physicians within 30 days. Payment can be delayed for six, eight, twelve months while they argue over line items on the physician’s bill. And then they get into a dispute about it, and the dispute can take anywhere from a year or two years to resolve.”** To further illustrate this point, Di Benedetto described her role within the American Arbitration Association and currently has a case dating back to 2018 between the provider payment and insurance company.

**Dr. Lamia Gabal**, a urologist in Tustin, has built her practice with all female physicians and employees and got into medicine so she could deliver timely and appropriate care to her patients. Gabal emphasized that health plans intentionally make it challenging and frustrating for physicians and the patients, saying, **“the ones who really suffer are the patients.”**



**SOMETIMES PEOPLE HAVE TO JUMP OVER HOOPS, AND THEY HAVE TO BE THEIR OWN ADVOCATE IN ORDER TO GET TO A SPECIALIST...**”

**-Dr. Lamia Gabal**

# PRIVATE PRACTICE MOVING FORWARD

This conversation illustrated the integral role that physicians in private practice play in California’s health care delivery system. It also illustrated the need for the state to act and protect these important providers to preserve the benefits they offer.

**Assemblymember Cecilia Aguiar-Curry**, who provided the keynote address at the symposium, expressed enthusiasm about working with PAC to tackle some of these issues.

“ I look forward to working with you and the Association on these issues in the new legislative session. We need to find ways to support our medical professionals in rural and underserved communities, and private practice physicians who choose to own and operate their own practices are an important part of the system, and an important part of our communities. I’m so glad the Physician Association of California has been established by these very same physicians so they can collaborate to support these practices and the patients they treat every day in communities like mine.”

To view the full recording of the Protecting Private Practice— Maximizing Benefits, Overcoming Barriers symposium, [CLICK HERE OR SCAN THE QR CODE.](#)

