

Happy May!

It seemed like this winter was dragging on forever, but Thunder and Derby seem to have brought the warm weather (and daily downpours). Even though it's pouring outside as I type this, it's still very nice to be able to see the outside after spending the last 10 years in a windowless office (not to mention having the time to write a monthly newsletter)!

Office Progress

Every month (and sometimes every day) brings new experiences at Direct Pediatrics. For example...

-Today we added an audio speaker in the front area and main hallway to provide some white noise. Now we all feel like we're at the beach with the sound of waves crashing on the shores!

-We've had our first two newborns, giving me the opportunity to make home visits to meet the new babies. Both moms had C-sections and were very happy not to have to leave their living rooms.

-We purchased a doctor travel bag for the home visits. Not exactly the old time doctor bag as I have to be able to fit a baby scale into this one

-1 hospitalization and 7 ER/Urgent care visits avoided in the last 3 weeks due to appointment availability during evenings and weekends

-I've sent 3 kids to Simon Med Imaging for X-rays. Kids were in and out in 15-30 minutes with total cost <\$50 (no one had a broken bone)!

-80% of medications have been able to be filled at our in-office pharmacy (excluding ADHD medication).

-I'm back to having time to provide therapy to kids and teens as needed

-I've even had time to do some psych testing that I haven't had time to do since 2007

-We've created an upper limit of \$500/month to make the office more affordable for our larger families

FAQ (from current and prospective patients)

1. Is Direct Pediatrics a concierge practice?

-The Direct Primary Care (DPC) model used by Direct Pediatrics is similar to concierge, with one main difference. In a DPC model, the monthly fee covers ALL services and insurance is not billed (except to pay for vaccines). In concierge practices, families pay a monthly fee AND insurance is billed for each visit (and often for labs as well) with typical co-pays.

2. Does Direct Pediatrics take insurance?

-No, families pay a monthly fee and insurance is not billed. The only time insurance is used is to cover the cost of vaccines, for medications you get at the pharmacy and for labs that we can not run in this office. So far in the first 3 months, 99% of our labs have been done in the office at no charge. Strep, flu, RSV, COVID, urines, mono, lead and CBC tests are all included in the monthly fee.

3. How many visits are included in the monthly fee?

-There's no limit. All sick visits, well visits, medication checks, consultations and therapy visits are included in the monthly fee. Plus, since insurance doesn't dictate when your child can be

seen for check ups, you no longer have to wait 365 days between check ups. You can schedule your child's check up/sports physical at your convenience.

4. Do you do therapy?

-From 1997-2007 most of my day as a child psychologist was spent doing therapy in the outpatient setting, inpatient setting and/or schools. When I left my old pediatric practice, at best I could see a child for a single session with maybe a follow up weeks to months later due to no time available in my schedule. At Direct Pediatrics, my maximum patient volume will be 20% of my patient volume at my old office, so if therapy is needed, I'm happy to provide it as part of the monthly membership fee. From my experience, I have found that in general most kids in therapy require about 5 sessions of therapy followed by as needed booster sessions- long term therapy for kids (and adults) is rarely beneficial.

5. How easy is it to get in?

-Probably couldn't be much easier. You can register in the office or via a link and in all likelihood, your child can be seen that same day. All families have my cell phone number and can use it to schedule appointments, ask questions, request med refills, and request forms. I don't think we've ever had a situation where someone couldn't get in for a same-day appointment, and usually appointments are available within 30 minutes of calling. If I can't solve a medical/mental health question by phone or text on weekends or evenings, we'll meet at the office to figure it out.

Mental Health Concerns- Get it addressed ASAP before school is out...and during the summer!

If you are concerned that your child may have ADHD (or a learning disability, anxiety, depression or other mental health issue), please get your child into the office before the school year is over. Part of any good mental health assessment (and required for an ADHD diagnosis) is a rating scale completed by your child's teacher. Once the school year is over, teachers are hard to track down and I typically have to wait until 2 months into the next school year before your child's new teacher knows him or her well enough to provide accurate rating scales. If medications are going to be started, it's way more effective to get feedback about how your child is doing on medication while they are dealing with the typical school demands rather than the less structured summer break. If assessments for a learning disability are needed, by getting your child's name on the list before the year is over, they might be able to get evaluated by the school during the summer, or at least be at the top of the list when the new school year starts. Finally, due to the shortage of various ADHD medications, I've actually been switching some kids to newer ADHD medications that I know are affordable and in stock to help parents avoid calling and driving all around Kentuckiana looking for their child's medicine. Summer is a reasonable time to switch to a new medicine as you can monitor for any side effects.

Text me with any questions, and I'd love for you to find your way over to Direct Pediatrics!