

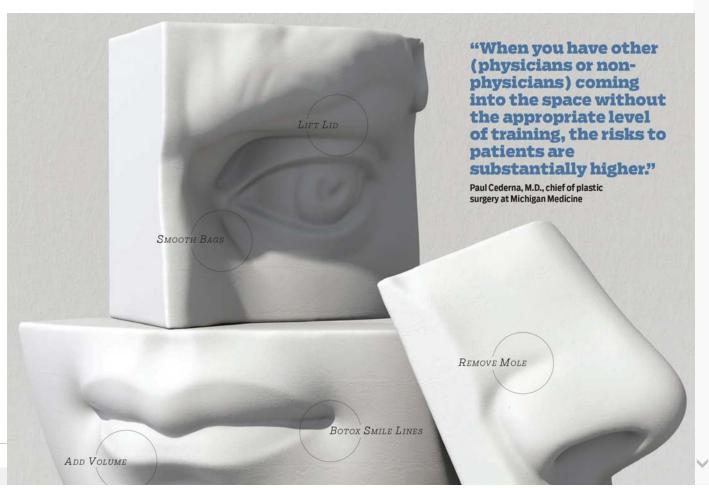
Special report: Health care

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An industry facelift

As dentists, doctors and private businesspeople invade their turf, plastic surgeons say they're increasingly fixing others' shoddy work







As celebrities drive up demand for plastic surgery and other cosmetic procedures, more doctors, dentists and even businesspeople who aren't plastic surgeons are getting in the game.

That's raising questions about whether the procedures are properly supervised and complaints from plastic surgeons that they're increasingly being called on to fix others' shoddy work.

The "increasing democratization of cosmetic surgery" is causing problems in plastic surgeons' business models and bad medical outcomes for some patients, said Vikram Reddy, M.D., a plastic surgeon and chief of clinical integration at Henry Ford Macomb Hospital.

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- Payment challenges multiply for plastic surgeons

In the 1980s and 1990s, plastic surgeons conducted the vast majority of all cosmetic surgery — reaching a record high 17 million procedures in 2016, up 3 percent from 2015.

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But the past decade has seen an increase in gynecologists performing vaginal rejuvenation, general surgeons conducting body contouring procedures after bariatric surgery, emergency physicians doing breast reconstruction, and ear, nose and throat doctors performing facelifts, Reddy said.

"There is nothing inherently wrong with this, but, while there are strict standards for surgeons performing something like joint replacements, the oversight on cosmetic surgery is minimal to none," Reddy said. "Infections or emergencies happen quite often. If a doctor doesn't have hospital privileges, for a tummy tuck or rhinoplasty, patients can get infections, and go to a hospital or ER for care."

Reddy regularly sees patients in the St. John Macomb emergency room for botched plastic surgeries. Some are performed by physicians in their offices and some by nurses or technicians working for nonphysician owners of medical spas.

It's legal in Michigan for nonplastic surgeons to perform these procedures. Physicians are licensed to perform a wide variety of medical services and can legally treat patients for any condition in office-based settings. Hospitals can limit physicians for inpatient services based on board certification or other professional reasons.

Paul Cederna, M.D., chief of plastic surgery at Michigan Medicine, said physicians who want to become stic surgeons should become board-centilities because that includes seven years of residency training, followed by oral and written examinations.



"When you have other (physicians or nonphysicians) coming into the space without the appropriate level of training, the risks to patients are substantially higher," said Cederna, who also is on the board of the American Board of Plastic Surgeons, which certifies plastic surgeons.

"The reality is that someone trained in emergency medicine may be exceptionally good in their specialty, but no matter how gifted and how good their hands are, they have areas of deficiency and inexperience when it comes to plastic surgery," Cederna said.

And using nurses, medical technicians or non-plastic surgeons to conduct cosmetic procedures or minor surgeries can sometimes cause problems for patients, said Mark Komorowski, a plastic surgeon in Bay City and chairman of the health policy committee with the Michigan State Medical Society, especially when providers stray from their main area of expertise.

"There is a buyer beware attitude out there. We need a 'truth in training' bill," said Komorowski. "To be able to do an office procedure, you need privileges at a hospital to do it; you need to be board certified."

"Before there was the lady on a bus who told me about" a plastic surgeon and a hot new procedure. "Now, Google is the lady on the bus" and prospective patients are getting medical procedures done based on advice of online advertisements or paid news stories, he said.

William Stefani, a plastic surgeon and owner of Spa Renaissance & Renaissance Plastic Surgery in Troy, said he could be in favor of some rules to control types of surgery performed in offices by physicians not on a hospital medical staff.



"I see some patients, not a whole lot, who require revisionary work" because of bad outcomes, Stefani said. "I feel bad for the patients, because they are facing double or triple the costs of the original surgery."

M. Azhar Ali, M.D., a plastic surgeon at Amae Medical Spa in Bloomfield Hills, said medicine and state regulators need to focus more on the concerns of the well-being of patients instead of protecting clinic business owners.

"This is a very sore subject," Ali said. "I see nonphysicians conducting procedures that cause problems, but recently one lady went to an ENT surgeon for liposuction. He



William Stefani, M.D.

(accidentally) made five holes in her intestines. She had to go to the ER a was in ICU for a week."

Ali said because of the cash nature of cosmetic procedures, nonphysicians and physicians alike are "enticed into business." He said insurance-covered procedures have more safeguards and rules on who can do them.

"I tell people to ask the doctor (or

technician) if they can do this procedure in the hospital. If they make up excuses, go elsewhere," Ali said.

Ali said another concern of his is the growing number of businesspeople who are opening medical spas. "My biggest issue is patient safety. (Businesspeople) hire a physician as medical director who has never been to the office. They have nurses doing procedures without (physician) supervision," he said. "Michigan needs to change or enforce their laws."

Big money

Over the past several decades, dozens of medical centers have sprung up under the ownership of nonphysicians and are billing Medicare, Medicaid, private payers and individuals for medical services, according to the Michigan Radiological Society in a lawsuit filed last year against Oakland MRI Center in Oakland County Circuit Court.

The Oakland County trial court ruled in favor of Oakland MRI last December, and the case is before the Michigan Court of Appeals. A decision in favor of the radiologists could spur massive regulatory and enforcement changes in Michigan and possibly the nation, legal experts said.

Although the Michigan State Medical Society does not advocate limits on physician scope of practice for any medical specialty, the MSMS in 2016 issued a statement demanding Michigan enforce the state's corporate practice of medicine laws for nonphysicians who own medical clinics and employ physicians or advanced practice nurses.

Under several state laws and attorney general opinions, only licensed physicians may own and manage medical service businesses, several health lawyers told *Crain's*. Hiring physician contractors at these businesses is also not allowed. There is an exemption for nonprofit hospitals.

"If you are a lay, for-profit corporation, you cannot employ physicians to furnish medical services," said Mark Kopson, chair of the health care practice at Plunkett Cooney P.C. in Bloomfield Hills. "The public policy behind the prohibition against the corporate practice of medicine is to prevent profit motives of for-profit corporations from affecting how medical care is delivered."

Kopson said, however, Michigan laws are unclear on whether business owners can hire advanced practice nurses to conduct procedures at their businesses. For some procedures, such nurses must affiliate and have a practice agreement with a licensed physician.

"If a business employs other types of mid-levels or advanced practice providers, such as PAs, who negally require physician supervision, it raisesoftee such states the involvement of the physician cross the line into the corporate practice of medicine?"



Jason Moon, a spokesman for state Department of Licensing and Regulatory Affairs, said the state encourages anyone who believes there is a violation of the law to file a complaint with LARA.

Moon said LARA has not taken a position on the Michigan Radiological Society case.

"To help protect Michigan consumers and grow the economy, LARA works to ensure that businesses offering covered medical services are incorporated according to state law," Moon said in a statement to *Crain's*.

"When we discover or receive information that a business entity has unlawfully incorporated, we first attempt to bring the business into compliance," he said. "LARA may then refer the matter to the Michigan Attorney General's office, which has enforcement authority on these issues. We encourage anyone who believes that business is incorporated unlawfully to file a complaint."

Charles Mok, D.O., founder of Allure Medical Spa in Beverly Hills, said he knows of many medical clinics owned by businesspeople that are in clear violation of the state's corporate practice of medicine laws.

Mok completed his residency training in emergency medicine and runs one of the largest physicianowned cosmetic surgery practices in the state with five clinic locations and a sixth opening this fall in Beverly Hills.

Nurses are often employed at medical spas that are owned by nonphysicians and many work under the medical license of a physician who may not be present at the clinic, Mok said.

Stefani said he often gets offers from businesspeople who own cosmetic clinics asking him to serve as their medical director.

"We don't have time for it. They sometimes hire retired doctors, but I don't believe they can offer effective supervision of the practice. They aren't there all the time like we are if there are questions about a procedure or problem," Stefani said.





Larry A. Peplin

Spa Renaissance & Renaissance Plastic Surgery in Troy has three physicians and offers a variety of procedures.

At Spa Renaissance, Stefani said three trained nurse practitioners and a physician assistant perform various Botox injections and other minor cosmetic procedures, all with onsite physician supervision.

"Many doctors do cosmetic and usually not bad," he said. "They don't do as many as we do. You develop an expertise over time."

Michigan laws are clear in that only physicians can own a medical practice and hire or contract with other doctors, Mok said. "Hiring a medical director cannot overwhelm that," he said. "It is done because physicians are trained to treat people and know what it takes to maintain good quality care."

Mok said non-physician-owned clinics hire physicians as medical directors to write prescriptions for patients like for Botox.

"When something terrible happens in our state, then the AG will look into it," Mok said.

But Stefani, Mok and Ali said unsupervised nonphysicians can sometimes run into trouble and patients end up desperately searching for help.

"Each one of us gets three to four (patients) we have to clean up for folks that don't do the procedure right," Stefani said. Ali, Reddy and Komorowski also say they see several patients each month for botched procedures.

For example, earlier this year a woman in Dearborn Heights responded to an advertisement for a Juvederm lip injection from a local spa, the European Tanning Club and Hair Design, according to WXYZ.

The injection to enlarge her lips was less than half the price a typical plastic surgeon charges. No wonder; the woman's lips were injected with silicone. Almost immediately, the woman began having problems and soon had to have the silicone injection surgically removed. *Crain's* withheld the name of the patient.

Moon told *Crain's* that the European Tanning Club investigation is still open. He said LARA may have received a few similar complaints, but the department doesn't track complaints by that issue.

Stefani, Ali and Komorowski said they feel bad for patients who had a poor outcome, but they will evaluate those patients and come up with a plan to fix their problem.

"We used to use silicone, but we went away from it years ago because it is prone to contamination," Stefani said. "There are much better fillers now where you don't get bumpy lips or face."

Mok said his practice treats patients who have received botched procedures all the time.

"We are the No. 1 injector of Botox in the Wishigan We set all the complications and take care of the no charge," Mok said.



Mok, who said he limits his own practice to unusual cases, supervises a team of eight nurse practitioners and physician assistants, two general surgeons, a family physician, a vascular surgeon, a dermatologist and a plastic surgeon.

Some fellow physicians have criticized Mok's practice for the volume and outcomes of some procedures, but he says he is proud of the clinic's patient quality and safety record. He said his practice is often criticized for its rapid growth, but he said many patients have given his practice good reviews.

But Mok said he understands why some plastic surgeons feel like too many cosmetic and plastic surgery procedures are performed by other physician specialists. The bulk of work at Mok's Allure spa is performed by advanced practice nurses and general surgeons, he said.

"Parts of their business are being picked away from their specialty," he said. "Physicians and surgeons are allowed to change our specialties. A radiologist can change into an emergency physician by taking boards or by going into urgent care."

For instance, Mok said general surgeons routinely conduct mastectomies. "Plastic surgery is to correct anomalies. Cosmetic surgery is to improve physical appearances. It is not a stretch for a general surgeon to do a breast lift. It happens all the time" at Allure, he said.

Beware of low prices

It is usually a good idea to shop around for lower-priced medical procedures, but physicians warn quality and experience of the practitioner must be taken into account.

And shopping for medical services is not the same as shopping for cars or refrigerators, plastic surgeons say.

"Quality is very important. Because of high-deductible health plans, people are shopping around. I don't give prices over the phone. I give a free consultation if they come in. My price is good for six months once they walk out the door," Komorowski said.

"I try to give them an education on my dime and hopefully they are convinced of my truthfulness. They may go to another person. That is fine," he said.

Komorowski said patients often come in with incomplete or misleading information they have found on the Internet.

"Sometimes (patients play a game called) 'Stump the Chump,'" Komorowski said. "I sit down with them and go over the pathology."

Stefani said too many people are using the Internet for price shopping cosmetic procedures and end up at nonmedical-oriented clinics with staff who lack the proper training and experience.

"I know of a (woman) who went to Mexico to get her preasts done. She went there for the low price.

Could Stefani, adding that the woman ended to the word of the low price. Infection and many medical problems that required additional medical procedures to fix.



Komorowski said he often is asked to fix problems caused by patients who have traveled a distance to get a lower price.

"But what if they get an infection? I am the one who sees them," Komorowsky said. "I ask. 'Who did this? Is it a general surgeon or a bariatric surgeon you went to for a lowball price?' Insurance will cover it."

"We are seeing the same guys having the same issues," Stefani said. "I don't know how they survive."

Sometimes physicians and nonphysicians will take weekend or online courses and then call themselves experts, Komorowski said.

"How can they take a weekend course and know how to do liposuctions or labiaplasties to remove lesions?" he asked. "It takes more than a weekend to learn how to do it."

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