

Doctor specific questions

... I don't take meds, why should I join?

We specialize in preventive care so think of visiting the office like getting your annual visit with your mechanic. I do a comprehensive search through all of your cancer risks and labs. I review any needed x rays or other imaging and then go a step further with ultrasound imaging here in the office. This is a once a year screen looking deeper for hidden problems across the spectrum from stroke risk to growths on your organs. The next issue is the convenience of easy access and longer hours. I have a cough and fevers... should I come in? A non issue here; heck, I will probably yell at you for not coming in!

... What is Dr Holtrop's training/experience?

After graduating Cal Poly I spent the next 8 years in medical training. Medical school was 4 years at St George's university school of medicine. I have trained at University of Maryland, Hopkins, Michigan, UC San Francisco and University of Texas. After training I spent nearly 20 years doing critical care, cardiology, pulmonary and office based medicine.

... Is he board certified?

I have board certifications in Internal Medicine and was the first class to earn board certification in Hospital Medicine.

... What is his patient satisfaction rate?

I hover at a high 95% rate, you can view the last 2 years of my Press Ganey scores on our website myTEAMmd.com.

... What is the patient turnover?

Less than 5%. Patients leave the practice for a multitude of reasons. I can't help but take it a little personal when someone leaves but I firmly believe that if a patient is not satisfied they need to see a new physician so they are comfortable. I will always help you establish a new physician, that is our duty. If times change and you would like to return, the door is always open. We only see 400 patients a year so I may have a wait list.



... I have multiple medical issues and many physicians, what can Dr Holtrop do for me?

Multiple complex issues is my specialty. I have advanced training in critical care, pulmonary and cardiology so advanced issues are fairly straightforward for me. I generally can take care of all your issues in the office but if needed I will discuss consultations as needed. If you have established consultants I work closely with them and guide you through the process.

... Does Dr Holtrop get money from drug or insurance companies?

Zero. That is the beauty of this practice, I have no one to answer to but you!

... What are Dr Holtrop's hobbies?

Anything on 2 wheels (desert racing, mountain/road/gravel/bmx bicycles) windsurfing, hiking, running, stand up paddling, camping, flying, woodworking

Office questions

... What is the new patient waiting time?

If I have no wait list I will see you in a few days to a week for your new patient visit. I limit the practice to 400 patients and in general the practice fills within a year. If we are full I keep a wait list. If demand is high we may have a second physician in the future.

... Does he do urgent care/ emergencies?

Yes and no. I may not be able to see you the moment you come in, that would be unfair to the patient who is on the schedule. What I will do is find time, even after work, to take care of you. True emergencies should bypass the office and go to the ER. I will take care of all sick visits the same day one way or another.

... Can I just walk in?

You can but you may not be seen right away. If there is a slot open we will put you in there or I will see you at my lunch/after work.

... How long does a sick patient wait to see the doctor?

Same day. I feel strongly that I need to take care of anyone sick that day. Come in and we will work it out. If the schedule is full I will make time at lunch or after hours.



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... How long are the appointments?

30 minute follow ups, 1 hour physicals. It really depends on your needs.

... Does he consult or work with my current consultants?

I work closely with all your consultants. I review their notes and findings before every visit and let you know what is going on. I also will guide you if the consult is still needed and if they are doing the right things. Most of the time I can take care of the consultation process in the office and you don't need to go anywhere else.

... What procedures does he perform in the office?

Skin cancer resections, suturing, nitrogen therapy for skin lesions, joint injections for pain control

... How many patients total does he see daily? Yearly?

A full day in the standard office is 25-30 patients, I see about 10 per day. I max out at 400 patients in the practice total, a normal practice sees 3000 patients a year. A side note is that even if the schedule is full I will take care of whatever your issue is that day. I might have to see you at lunch or after work but we will come up with a solution that day. My work ethic is that every patient/lab/phone call/message is completed every day.

... After hours calls?

I give out my cell phone for after hours emergencies. Clearly the ER is the place to go for emergencies but if you have questions that cannot wait call me. In general with the rapid access I take care of all your issues during daylight hours and only receive about one call a month at night. I need time off also and patients have been great at respecting this.

... Weekend appointments?

We are closed on the weekend. Simple things I treat over the phone, complex emergent issues go to the hospital.



... Max number of visits?

There are none. A normal patient sees me 4 times a year. Once a year for a physical, once for an ultrasound screening and a couple sick visits a year. If you're sick I may need to see you every 2 weeks for a while, then taper down. It's dependent on your situation and it's all included in your monthly fee. I recently saw a patient about once a week, an hour each visit for about 6 weeks. He was sick with a potential liver failure, active heart infection, kidney failure and onset of dementia. Now he is walking every day, brain is fine and stable; it is what his case demanded.

... Email/cell phone access?

My patients have my cell phone for emergency issues. My email is pretty fast and usually you will hear an answer in a few hours. I answer 100% of my emails and calls personally before I finish my day.

... Office phone messages, wait time?

If you're leaving a message it's because we are on the line with a member or away for a moment. We return calls usually within 30 minutes.

... Does the office do workmans comp?

No but I can guide you through the process and will follow the consultants closely. If you are failing and work comp is dragging their feet I step in and fix the issue (case dependant and patient always decides)

... Does he take vacations?

Of course. I love vacations with my family and take them every year. Even when I am away I will be answering messages every day and taking care of issues. If someone needs to be seen they will go to urgent care. My office will be staffed when I am out to keep me up to date. In 20 years this has not been an issue. The main idea is you and I maintain continuity.

Ultrasound questions

... Does this cost extra?

No. I do this every year as an extra layer of cancer screening, stroke analysis and heart health monitoring. If we were to order these tests at the hospital my last quote was \$4700; It's free every year in your membership.



... **Does he have any experience with ultrasound?**

20 years of hands on experience

... **Does it hurt?**

Nope, the gel is a little cold but no pain

... **What if he finds something?**

If we find an abnormality I will arrange an official test at the hospital. The goal is better screening and if needed we do a more invasive and expensive test.

... **Why not just do yearly CAT scans or MRI?**

CT scans have 250 chest x rays of radiation so doing that every year will start to bring out cancers. Both MRI and CT are far too expensive to perform on a yearly basis for every patient.

Stress testing

... **What is his experience?**

I have run multiple stress labs in the past and have 15 years experience doing them.

... **Is this a yearly exam?**

No. I will explain why but this is a test for select patients, we don't want to do this one every year for every patient. It sounds like a good idea but I will explain why it's actually a mistake when you're here.

... **Does this cost extra?**

No



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Preventative care

... Heart attack?

On a yearly basis I will go over your risk factors for stroke and heart attack and come up with an individualized plan for you. The majority of prevention comes from you and lifestyle changes, I will detail what I can offer and then help you achieve your goals on what you can improve on.

... Stroke?

A yearly cardiac and blood flow assessment to make sure stroke risk is low. Identify the items to change and come up with a plan for success.

... Skin cancer?

Skin cancer is the number one cancer in the world now. I perform yearly head to toe examinations and if needed can perform any needed procedures here in the office.

... Breast cancer?

After the age of 30 I teach a clinical breast exam and train you with a technique I developed for finding more breast cancer. (checkontheGIRLS.org) The goal is a solid yearly exam, monthly exams at a high level at home by yourself and mammograms according to radiology recommendations

... Prostate cancer?

This is now done with lab work and I will discuss individual goals and how to monitor on a yearly basis

... Colon cancer?

I currently have a ZERO % colon cancer rate in my office. This is not because I do anything special, I make sure every patient every year has correct follow up with the proper test at the proper time. I also point out sham therapy as it comes around, as in any of the ads on TV stating they have a colon cancer test that is useful.

... Other cancers?

This is very individualized depending on your personal exam, your habits, your medical issues and medications. Everyone is different and I will guide you through any needed testing



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... **Depression and anxiety?**

This is stressed to every patient and the basic idea is I am here for you. If you have issues I can generally get you through them without medications. If meds are needed (about 25% of the time) we will discuss the best options for you.

... **Dementia?**

This is done through intermittent screening but also through family visits. I encourage the spouse to join in because their perspective is invaluable in the workup of memory loss. The majority of times it is an innocent, reversible issue.

... **Diabetes?**

Every year I screen for diabetes. If you show signs of prediabetes I will give you proven non medical therapies to keep you from progressing to diabetes. These revolve around diet, exercise and weight loss. I don't simply tell you to do this, I coach you through the process. If this fails then we start meds, but I still have the goal of getting you healthier and stopping the meds in the future

... **Osteoporosis?**

Depending on your family history this begins at 60-70 years old. Some diseases put patients at increased risk for osteoporosis and if needed we will screen at an earlier age

... **Vaccinations?**

I screen you yearly for this and then make recommendations. I use evidence based decision making, I make sure you are completely informed and then let you decide.

... **Does Dr Holtrop do alternative medicine?**

Yes and no. I always attempt to address issues with no medications if possible. If that fails then OTC medications (if applicable) are attempted. The idea is to start therapy slowly and increase if you're not responding. Some alternative medical therapies work in select patients and I am fine with this if there is no harm. What I won't prescribe is sham therapy or sell you my latest "wonder pill" for \$40 a month to fix your current issues. I will also counsel you heavily if I notice one of your consultants or other providers is leading you down a path of making personal gains with no evidence it will improve your medical issue.



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... **What is evidence based medicine?**

This is a process of using multiple large scale studies to guide your care. If large study after study points to a certain therapy I will start to recommend this because I have solid evidence to support our plan. What I won't do is use "one off" or non supported studies to offer you care. Your health is too important to give up to chance.

What if I'm hospitalized?

... **Does he come to the hospital/nursing home?**

I do but only to consult on your case. You will be followed by the Hospitalist service and I will visit as needed. Hospital care is 24/7 and requires my full attention; I cannot run an office and expect to provide you with excellent hospital care. I will consult with your hospital doctors and review everything. If I see problems that are not addressed I will discuss them directly with your hospital doctors. I will also be available to discuss care with your family and arrange for your recovery after you leave the hos[pital]. I worked in the intensive care unit for 20 years so I know my way around a hospital

... **Does he have privileges?**

I do, they are called "consulting" privileges. I can come in, see you and discuss your care but I am not the 24/7 doctor admitting you or taking care of the minute by minute needs you may have.

... **Home visits?**

This is not common but rarely a home visit is exactly what is needed. I had one the other day; after 6 weeks in the hospital and rehab he was discharged home but too weak to see me. I saw him at his house, found a number of issues and got him back on track.

What if I'm traveling?

... **In the US?**

Call me. A lot of times over the counter meds will fix a ton of issues. If it is something more serious and antibiotics are needed just give me the name of a local pharmacy and I will call in a prescription. Sleeping medications and narcotics have a federal monitoring mandate, even things like this we can work around. I had a patient recently who wanted to travel the country but didn't because every 3 months he was required to see me and run his federal monitoring. I



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worked out a travel schedule with him, made sure at month 3 he was camping for a week close to a CVS and called his meds across state lines. We did the federal monitoring portion over Facetime. He toured the country for 6 months; and gave me a nice gift of Michigan cherry jam in return!

... International?

Again, just call. I had a patient in the Dominican Republic recently with infectious diarrhea. Since all the medications were available without a prescription I told him the 2 medications to ask for and finished the workup when he returned. I had a patient in Central America get ill and got her on a private jet, arranged an ambulance at our little local airport and met them in the ICU. She would have died; she walked out a week later. Again, if the local care is questionable just call.

.... Snowbirds, can I join for 6 months?

Before I answer that do you plan on not being sick for 6 months out of every year? Of course not. When you are in town we will do all your labs, physicals and ultrasound evaluations. When you are out of town I will arrange meds at your local pharmacy and keep in touch with you. Things will come up (bronchitis, urinary tract infections, injury) and I will be available to help you out. Clearly if you need the hospital you're not calling me, but when you're stable call! I can sift through most hospitals and figure out what's going on, talk to your specialists and assure that you are receiving the correct care. The long answer is no; illness hits anytime and anywhere so I am ready no matter where you land.

Cost

... Is there a discount?

No. I provide the same intensity whether you're 35 or 95. I am very thorough and hopefully you will see the value in that level of care.

... Can I pay with my HSA card?

Yes, in general these payments are tax deductible and you can use your HSA account. Always make sure with your accountant but currently this is the case.

... Late fees?



Payments are due the first of every month. We offer automatic withdrawal and auto visa payments. After 7 days you are charged a \$20 late fee and after 14 days it is \$40 and you risk being dropped as a patient. Everyone makes mistakes and just call so we can work it out.; If you're stuck in Europe and forgot to pay it's a non issue if I know what's going on. I will likely demand a nice Murano glass vase if that's the case, but we will see!

... **Cancellation policy?**

Not everyone will be able to stay in the practice for a multitude of reasons. I require 30 days notice so I can have time to help you with records transfers/medications and any other pressing issues to be sure and have your new physician address. I will also write an overview of your care to your new physician so that you have a smooth transfer of care.

... **Contract?**

We don't have a contract but we will have a document for you to sign that goes over all of the policies of the office so that we are both clear that you have been informed. This is more for federal compliance than anything else.

... **Billing start date?**

First of every month. Your first month will be prorated according to what week you joined the practice. Yearly plans and Executive medicine are billed annually

... **Does this cover labs or radiology?**

No but I am working with local lab and radiology facilities to negotiate better rates for my members. More to come on this topic.

... **What is the registration fee for?**

It covers our time to get all of your prior medical records/medications/radiology reports/labs/pathology/consult notes/hospital notes to the office and sort through them. This is a process that takes me a lot of time because I sift through all of your records to make sure I am completely up to date on your medical issues.

... **If I leave the practice can I come back?**



Yes. The only issue is if we are full to our 400 patient max. If that is the case you will be placed on the waiting list. Patients leave for a variety of issues, my goal is to be impartial and if we have the space you're welcome to come back.

Insurance

... Do I need it?

Yes. We are not insurance. Your membership covers primary care issues but you still need coverage to hospitalizations/meds/labs/ER visits.

... Does the office bill my insurance?

Never. I can see you once a month or once in 6 months, the monthly fee is the same. There are no co-pays, no extra fees or other charges. If we do a biopsy or procedure your insurance will need to cover the labs or pathology fees. I am negotiating a wholesale price on immunizations for my members and that would be a fee if you choose to get shots here. The goal there is if you're forced to purchase immunizations we can provide them at the office for a wholesale price.

... What is my copayment?

Zero. We never charge a copayment when we see you.

... Can I get a bill so I can get reimbursed from my insurance?

Yes, just ask the front desk. This is called a "superbill." I will always make a chart note and bill in case you need it for reimbursement. This is never sent to your insurance but most carriers will reimburse your visit according to what I charged you.

... Can using a health care sharing ministry save me money?

Yes, and the savings can be up to 75% from traditional insurance. Read a little about this, it's a great way to bypass the money hungry insurance companies and get real health coverage.

... It's the annual enrollment time at my office. Should I pick a PPO plan?

Talk to your administrator but the short answer is YES. PPO plans mean that you can pick your Doctors (like me) and don't have to see some physician on a list to approve every order/x-ray/consultation. I am not on ANY preferred provider lists because I refuse to be ruled by insurance anymore. They may not like me but you will.



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