

The Free Lance-Star

Doc, MediCorp in virtual battle

A doctor's plans for a virtual colonoscopy service have run into opposition

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BY JIM HALL

Dr. Frank DeTrane describes his disagreement with MediCorp Health System as a David vs. Goliath battle: a lone doctor going up against a health care giant.

But the dispute is more complicated than that--perhaps Goliath vs. Goliath, a challenge to the status quo by a competitor with means and connections.

DeTrane wants permission from the state to spend \$767,000 to do virtual colonoscopies at his Fredericksburg office. The service would be in addition to traditional optical colonoscopy. Both types identify cancers or pre-cancerous polyps on the walls of the colon.

MediCorp, the parent company of Mary Washington Hospital and Stafford Hospital Center, opposes DeTrane, as does Radiologic Associates of Fredericksburg. Radiologic Associates is group of 24 radiologists who are business partners with MediCorp and the region's principal diagnostic and interventional service.

The dispute has simmered offstage until recent days, when DeTrane began the lengthy process of obtaining a state Health Department permit. That application and a hearing last week opened a public door on the normally private dealings of local health care businesses.

DeTrane, 49, is a gastroenterologist who has worked in Fredericksburg for 15 years. He leads Gastroenterology Associates of Fredericksburg, the largest of the region's four gastroenterology groups. His practice has four doctors, soon to be six. Last year they did 7,000 diagnostic procedures, including endoscopies and colonoscopies.

DeTrane has been one of the physician leaders at Mary Washington Hospital, serving as chairman of the Endoscopy Committee and helping to develop the hospital's Endoscopy Center.

In 2005, he and his partners purchased land on the hill behind the hospital for a new office building. They opened that office last year. Soon after, they built their own endoscopy center in the basement. Now DeTrane does about 40 percent of his procedures in that office, instead of at the hospital.

Early this year, DeTrane met Dr. Mark Baumel, who operates Colon Health Centers of America in Delaware. DeTrane said he liked the way Baumel had integrated virtual colonoscopy with conventional colonoscopy. He and Baumel agreed that if DeTrane could get a state permit, they would do something similar in Fredericksburg.

A VIABLE OPTION

DeTrane and other gastroenterologists believe that virtual colonoscopy, which uses a a CT scan, is a viable option for many patients. The CT version is quicker, cheaper, less invasive and sedation-free. Studies show that it's comparable to traditional colonoscopy at identifying polyps. Both techniques require a day-before cleansing of the bowel. Many private insurers pay for the CT procedures, but Medicare does not.

One of virtual colonoscopy's selling points--that no probe is inserted in the patient--is also one of its disadvantages. If the CT scan identifies a polyp, the patient must get a traditional colonoscopy to remove the polyp. About 85 percent of patients who get a virtual colonoscopy have no polyps.



Under traditional setups, those who do have polyps must come back another day for the second procedure.

"You're not right there to take the polyp out," Baumel said. "If you don't coordinate with optical colonoscopy, that unlucky person has to take another day off work, and worse, take a second prep."

Baumel and Detrane believe that Baumel has solved this problem by integrating the two services.

A patient's CT scan is read quickly at a regional center. If the scan is positive, the patient is sedated and gets a traditional colonoscopy to remove the polyps. The patient does not come back another day or take a second purgative.

"This is a novel, unique and dedicated use of an existing technology," Baumel said.

OPPOSITION ARISES

Opposition to DeTrane's plan surfaced soon after he filed his application with the state Health Department. Stuart Mills, executive director of an agency that reviews applications for the state, said that the Fredericksburg area already has 11 existing or approved CT scanners. Those scanners aren't busy enough to justify adding another, Mills said.

Then MediCorp officials produced the deed that DeTrane and his partners signed when they bought the land for their office. The deed says that without MediCorp's approval, the doctors can't perform any service on the property that would require a state permit.

"That particular location is not a viable location," said Phil Brown, a MediCorp official.

Last week in a letter, Fred Rankin, MediCorp's president and CEO, told the state health commissioner about the deed restriction, and that MediCorp opposed the plan. "Such a competitive service likely would siphon off a portion of Mary Washington Hospital's outpatient volumes," Rankin wrote.

MediCorp does not provide the kind of service that DeTrane proposes.

Local radiologists also oppose DeTrane's plan as unneeded. They have offered virtual colonoscopy for two years. Their service is not integrated; patients with polyps return later for traditional colonoscopies. But Dr. Christopher Meyer said his group is willing to work with others to integrate the service.

"We provide same-day reads on many CT scans," he said at last week's hearing. "There's no reason we can't do that for virtual colonoscopy." But Dr. Michael McDermott, a radiologist, said local gastroenterologists don't seem interested in an alliance.

"The fact is, we don't see many referrals from gastroenterologists because they don't make any money off of it," he said. "They make their money off of optical colonoscopy."

Despite the opposition, DeTrane found support in the first stage of the state approval process.

A citizen panel, the Rappahannock Health Advisory Council, voted 7-5 to recommend his project to the health commissioner. The next step is a regional review in Culpeper in July.

Council members said that patients will benefit from the integrated approach. But it's unlikely to come to Fredericksburg, they added, unless there is a "competitive challenge" such as DeTrane's.

Reader Comments:

Charleston SC (posted by [HannaM](#) , June 17, 2009 11:09 am)

If Washington DC is really interested in improving healthcare they should tap into the good sense and caring heart of Dr DeTrane. He is the kind of person I would want to represent me in Washington DC.

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Note to Andrea Vassel (posted by [Tamerlane](#) , June 17, 2009 9:25 am)

the MWH Patient Relations Specialist: Looks like you have job security! MWH sure needs some good community relations work. Too bad they don't know (per Ogilvy & Mather) that word of mouth is always the best PR/Adv.

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Dr Detrane See Collins Construction in Massaponax (posted by [WoodinVirginia](#) , June 16, 2009 1:20 pm)

They have land, office buildings & other down there No subject to ANY restrictions from Medicorp! Plus they will be near the new Hospital. Nip them in the bud now...

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No the doc is a General Practitioner \$ 180 for 12min (posted by [WoodinVirginia](#) , June 16, 2009 1:09 pm)

Unheard of...to me, I just finished talking to my Insurance carrier. Now Medicorp doctors have joined some group practice called Quantum Physicians. Never heard of them before but Quantum Physicians I googled them & they are another NON-PROFIT GROUP at MWH. Non Profit my fanny... is this how these MBA's make 700k per year?

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Ask Your Self..... (posted by [BLK](#) , June 16, 2009 12:41 pm)

WHY would MediCorp/MWH want to deprive The Good People of Fredericksburg a Choice .. If You come up with anything Other than It Will take Money Out of Their Deep Pockets I would Like to Hear it... But I am Sure that is all it is. Just Like they Tried to Stop every Other Group. .. I heard that the Reason they Didn't sell the OLD Hospital is the Group that was going to Buy it turned out to Be a Group of Doctors from Northern Virginia So they didn't sell. Not Sure How True this is,, But it fits.

Anyone read the risks of the colonoscopy? (posted by [kimcmitch](#) , June 16, 2009 9:31 am)

Risks associated to the sedation, risk from improper cleaning of equipment, risk of perforating the bowel. Don't think it doesn't happen. An active member of my church spent weeks in the hospital when the doctor performing a colonoscopy tore through the colon with the scope. My dad suffered with an inflamed colon after his most recent scope. Nothing was found. A virtual one should be the option with the ability to go right then into a traditional method if something is found.

The system is broken. (posted by [02FirebirdTA](#) , June 15, 2009 11:45 am)

Read the quote below. A state agency determines whether anything related to health care can be used. Seems like an easy way to swing the pendulum in Medicorp favor. MWH has the money to back so-and-so to maintain their advantage. "Stuart Mills, executive director of an agency that reviews applications for the state, said that the Fredericksburg area already has 11 existing or approved CT scanners. Those scanners aren't busy enough to justify adding another, Mills said."

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Wait until the GOVERNMENT (posted by [Wasp52](#) , June 15, 2009 11:44 am)

starts making these decisions, if you think that this is bad. You'll end up having the optical procedure at 9:00 AM, and the virtual at 1:00 PM on the same day.... but you'll be dead after waiting 4 years for the appointment.

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Doc in battle (posted by [bucks](#) , June 15, 2009 11:37 am)

I for one would gladly submit to the virtual colonoscopy. The integration of both styles makes sense to me and I wonder why the hospital and others haven't thought of this before. Many people would rather not be sedated until absolutely necessary so this combination is great. If this could be done in a doctor's office the patient's stress level would be much less also. I will be watching how this battle unfolds and hope that money is not still the root of all evil. Kudos to the doctor.

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Mustang2 (posted by [john1315](#) , June 15, 2009 11:36 am)

You are exactly right about this being how business works but you are also overlooking what can happen when business gets big enough to squash competition and essentially become monopolies. Sure, I'd love to be the only (insert business type here) because I could charge whatever I wanted for my services, even if it was substandard, where else would the consumer go?

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So glad HCA is coming soon (posted by [FredMan1999](#) , June 15, 2009 11:05 am)

Medicorp is a pathetic excuse of a hospital....people will finally have a choice in this area. Greed is the only motivation for anything MEDicorp does...

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Childish (posted by [mustang2](#) , June 15, 2009 10:41 am)

It is uninformed to constantly accuse businesses of being greedy and encouraging hatred for them. Just stop it. Perhaps we should examine our paychecks for greed and assess their compliance with benevolence. Grow up! Hospitals and doctors provide a needed service and we should appreciate their presence. God help us if patients chose how they should be medically treated. They are not trained to do so. Just like a gov employee deciding our care would be ridiculous. BTW, prep is required for the virtual too.

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Typical Medicorp (posted by [scoman](#) , June 15, 2009 10:21 am)

Classic example of how Medicorp tries to quash anything that might take money out of their greedy pockets. Non-profit, ha! Their running scared, because with the new hospital coming, they're losing their monopoly on the medical services in this area. With Medicorp, the patient is the last thing on their minds. Go for it Dr. DeTrane!

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PATIENTS SHOULD COME FIRST (posted by [shelbybrynn](#) , June 15, 2009 9:43 am)

It appears to me that MediCorp is being a bully (no surprise there) and that this group of Doctor's wants to offer a service that is actually better for the patient. I say that what they are offering is better for the patient because if you ask anyone what the worst part of a colonoscopy is, it is the bowel evacuation. Seeing as this new procedure eliminates most of the main issues people have with colonoscopies, they should be allowed to offer this service. Who wants to do the procedure more than once?

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Costs (posted by [observer](#) , June 15, 2009 9:22 am)

It would be nice to see the cost differences between the two procedures. Since the CT scan has less pain the patient would prefer it. I wonder why 700K is needed to get the permit. Is there anything in medicine that is a bargain?

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\$300+ an hour to administer MWH (posted by [Tamerlane](#) , June 15, 2009 9:17 am)

no wonder this parasitic, in-the-pocket of pharmaceutical sales people is trying so hard to stop competition....because they are so corrupt and self-serving that any competition will kill their cash cow.

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I don't know... (posted by [3hounds](#) , June 15, 2009 8:39 am)

I don't know...a procedure in the basement of the doctor's office? That's kind of scary.

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Health care not "broke" (posted by [mustang2](#) , June 15, 2009 8:18 am)

This story demonstrates how competition works. Dr. DeTrane, like the new hospital, is a threat to Medicorp. Mary Wash has been much more kind and efficient since the announcement of the new hospital. Virtual colonoscopy has its pluses and minuses but should be an option. Government run health care would prevent older people from getting their needed colonoscopy and other tests. Health care would be rationed, expensive and inefficient. There is a reason patients from all over the world come here.

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Medicorp is just higher up on the food chain (posted by [larryg](#) , June 15, 2009 8:13 am)

both Medicorp and the Doctors are after the money - and they both want the equivalent of a monopoly on their services so they can maximize their charges. Neither of them want a competitive playing field in my view. For instance, in a competitive environment - we'd see both of them offering both kinds of colonoscopies with prices for both and consumers could choose. but we don't have any of this - and we're at fault also -because we really don't care as long as our insurance "covers" the procedure.

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Another Reason (posted by [lulu0202](#) , June 15, 2009 7:48 am)

to hate Mary Washington Hospital/Medicorp. All they care about is their bottom line. Everything else is just secondary. I had to go to the ER there a couple of weeks ago. When the person from registration came around, she demanded my copay right then, as I was hooked up to IV's and running a very high fever. When I asked her why they started doing that instead of sending a bill, she replied "I think they are hard up for money and it's gotten worse in the past 2 years." What compassionate patient care!

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Money talks, and BS walks (posted by [msdaisy](#) , June 15, 2009 7:40 am)

And MediCorp goes round and round. It's all about the money. It just goes to show what is really at the top of their priority list, money not patients. Dr. DeTrane, I applauded you for putting patients first. We need more docs like you. Don't worry, HCA will be opening soon and you can enjoy sitting back and watching MediCorp chew on some long over due competition. And BTW, I'm due to schedule a colonoscopy, and will be scheduling it with you.

Medicorp/Mar washington hospital SUCKS! (posted by [blitzburgh](#) , June 15, 2009 7:25 am)

They remind me of the mafia

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MWH, Medicorpse are a self-serving parasite (posted by [Tamerlane](#) , June 15, 2009 7:16 am)

that needs to be treated like any other parasite. They are in the pocket of big pharmaceutical companies, pay exorbitant \$ to stooges with sinecure jobs and should be dismantled and prosecuted.

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this is why our health care system is broke (posted by [larryg](#) , June 15, 2009 6:29 am)

the goal ought to be higher quality care for less money but because the various entities are competing for the money then patient care quality and cost are just secondary. We need to overhaul health care.

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What happened to patients first? (posted by [Dana1](#) , June 15, 2009 6:20 am)

Cannot believe Medicorp would stand in the way of patient comfort. Intergrating the service would be best for us. If anyone has ever had a colonoscopy - you know what I mean. If Medicorp is concerned about DeTrane "siphoning" off their patients - then they need to offer the offer the same better service! If not - we should all boycott and go somewhere else that has our best interests at heart.