

10 things

10 things medical spas won't tell you

Published: Jan. 4, 2013 at 6:03 p.m. ET

By [Elizabeth O'Brien](#)

Relaxation and legitimate healing – combined?

1. “We’re all over the place.”

The number of medical spas — hybrids of medical clinics and day spas — in the U.S. is up more than fourfold since 2007, from around 800 in 2007 to 4,500 today, according to the International Medical Spa Association. Why? For one, technology continues to improve, allowing for better results from less invasive cosmetic procedures. What’s more, older people remaining in the workforce sometimes want to look younger than their years, but don’t want to take weeks off their job to recover from a face-lift, says Dr. Timothy C. Flynn, president of the American Society for Dermatologic Surgery Association. So they’re turning to medical spas to smooth their wrinkles and erase their age spots.

There’s another factor behind med spas’ rise. Soaring health-care costs have caused insurers to reduce the rates at which they reimburse doctors for services rendered to patients. As doctors’ revenue at their regular practices gets squeezed, some physicians are signing on with medical spas to try to make up the difference in their top lines, says Dr. Roy Kim, a plastic surgeon in San Francisco who isn't affiliated with a medical spa.

2. “There’s not always a doctor in the house...”

With their soft music and often-luxurious décor, med spas promise the best of both worlds: a doctor’s treatment in a relaxing, spa-like setting. But the reality is that only a handful of states require a doctor to actually be present at these facilities, and with those that do it’s often only in certain circumstances (for example, in Florida, doctors must be present in some cases, but a qualified dermatologist or plastic surgeon needn’t be on site to supervise nurse practitioners performing dermatologic treatments, if other conditions are also met). Nationwide, medical spas usually have an affiliated doctor whose name is displayed on the premises. But this person may just stop by once a month to sign charts, with no role in hiring or training the staff. “They’re supervising in name only,” Flynn says.



Trouble is, the consumer often doesn't know the difference. "If someone goes to a facility and sees a person in a white coat, the average person would think it's a doctor or a nurse," says Dr. Mathew Avram, director of the Dermatology Laser & Cosmetic Center at Massachusetts General Hospital, who isn't affiliated with a medical spa. "It may not be either." While a well-trained aesthetician might match a doctor's

skill on a basic treatment, doctors are generally much better equipped to deal with complications that might arise, experts say.

Of course, some med spas do have a doctor on site. Anne Ho, 31, an attorney and actor/model in San Francisco, met with a doctor the first time she visited her medical spa, and the two outlined a treatment regime. Since then, an aesthetician has handled Ho's chemical peels, but she often sees the doctor around. "It's comfortable knowing it's a doctor making the decisions, and not someone out of beauty school," Ho says.

3. "...and if there is, it could be a cardiologist."

Doctors from four medical specialties have traditionally handled aesthetic treatments, due to their relevant training: plastic surgery, dermatology, otolaryngology (ear, nose and throat), and ophthalmology. Experts say patients should generally stick to one of these four specialties when searching for a doctor to perform cosmetic treatments.

Yet the doctors who sign on with medical spas could come from any specialty. The American Society for Dermatologic Surgery Association has warned consumers to be wary of medical spas advertising affiliations with "board certified" doctors, because the certification could be in an unrelated field. Sometimes, these facilities will advertise in the dermatology section of the yellow pages, yet their doctor may be board certified...in gastroenterology. In other words, they're promoting their association with a doctor, while omitting the doctor's irrelevant experience.

In most cases, health insurance doesn't cover cosmetic procedures regardless of where they're performed. That makes such procedures a lucrative cash business that can be attractive to both spas and medical professionals, including doctors with little experience in the field, says Allan Share, president of the International Medical Spa Association. "You have to be prepared to do your own research" to make sure you're visiting a reputable facility, he says.

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4. “The state you’re in matters.”

Government oversight of medical spas varies greatly from state to state. Florida and California have some of the strictest oversight, while Vermont and Missouri have some of the most lax, according to the American Society for Dermatologic Surgery Association, which has lobbied for more stringent requirements for med spas. Examples of stricter oversight include stiff fines for the unlawful practice of medicine (a new law in California sets the fine at \$50,000 for some violations), while lax oversight includes allowing a physician to delegate a procedure to anyone, regardless of training. In Vermont, the state’s Board of Medical Practice is concerned about the possibility of physicians inappropriately delegating procedures, and officials are working across departments to clarify the state’s requirements, says executive director David Herlihy. A spokeswoman from the Missouri Department of Health and Senior Services didn't respond to requests for comment.

Some states have loopholes that affect med spas. For example, in New York, any method of hair removal isn't considered the practice of medicine, and laser hair removal is unregulated in the state. (Read: anyone can buy a laser and set up shop.)

5. “Nail salons are more licensed than we are.”

Most states don't require med spas to be licensed, according to the American Society for Dermatologic Surgery Association. Instead, states often regulate the procedures themselves. Florida, for example, recently passed a law mandating that if a physician is removing more than 1,000 cubic centimeters of fat — roughly a quart — the facility needs to be registered with the state and is subject to inspection, unless other licensing requirements are met.

In most cases, though, medical spas, unlike restaurants, aren’t subject to frequent inspection. Cash-strapped states don’t have the resources to inspect every spa that opens up. What’s more, the issue of med-spa regulation usually remains under the radar until something goes wrong. “It takes a kind of tragic event to get policy makers to pay