The Nurse Practitioner Who Wants to Bring Concierge Health Care to All

Rakiyah Jones ’19NRS is expanding access one patient at a time.

By Julia Joy  |  Spring/Summer 2021

Concierge medicine, in which patients pay retainer fees for near-unlimited access to their doctors, may sound like a luxury item for the affluent, but KinFolk Family Health
A clinic in Montclair, New Jersey, puts a new spin on the service. Run by nurse practitioner Rakiyah Jones ’19NRS, the facility offers monthly memberships as a way of providing quality care to the uninsured and underserved.

“I’m focused on serving communities that a lot of people forget about — people of color, my veteran community, my trans-identified community, and geriatrics,” says Jones, who is Black, a member of the US Army Reserve, and a transgender man. “These are all groups that tend to have difficulty navigating health-care systems.”

Jones, a family nurse practitioner and assistant professor at Columbia’s School of Nursing, opened KinFolk in 2019. He says it was his way of giving back to the residents of northern New Jersey, where he grew up. Nicknamed “Dr. Kai,” Jones offers uninsured patients affordable memberships ($49.99 to $129.99 a month) that include unlimited telehealth appointments, discounted prescriptions and lab tests, and, with upper-tier plans, unlimited office visits. “I’m not making money off KinFolk,” says Jones. “KinFolk was created out of love and service and just wanting my community to be able to access health care.”

Raised in a low-income, single-parent household, Jones was just fourteen when he was selected for a high-school program that allowed students who excelled in science to take classes at the local medical school. The first person in his family to go to college, he studied biology at Montclair State and nursing at Rutgers before enlisting in the Army as a nurse in 2010. “I didn’t know anything about the military, and I didn’t know anyone in the military,” says Jones, who explains that he enlisted because he wanted to gain a broader range of nursing experience. “When I told people that I was joining the military, they were like, ‘You? No way you’re going to make it.’ Ten years later, I am still in the military.” Today, in addition to his other jobs, he serves in the Army Reserve teaching primary-care and combat medicine to soldiers.

Jones enrolled in the PhD program at Columbia’s School of Nursing in 2015, financing his education through the Post-9/11 GI Bill and a University scholarship. Though he had just completed a dual master’s program in nutrition and health-care administration elsewhere, Columbia initially felt “out of my league,” he says. “To me, it had always been an ivory tower, untouchable for inner-city kids,” says Jones. “But once I got started I realized there was a purpose to me being here.”

He found a mentor in nursing professor Marlene McHugh ’08NRS, who helped train
him in palliative and end-of-life care. While earning his doctorate, he simultaneously completed a certificate in adult gerontology and acute care at the University of Pennsylvania. “Geriatrics holds a special place in my heart,” says Jones. “If you’re under forty you probably get on my nerves, but, you know, the fifty-plus, we’re best friends.”

While Jones’s drive to help people of color, the LGBTQ community, and veterans is a product of his own identity, his empathy for the elderly comes from “my love for my grandmother and wanting her to age gracefully and comfortably and safely as she transitions from this life,” he says. “Having grown up in North Carolina during Jim Crow, she has no trust in providers who do not look like her,” he adds. “They’ll ask her questions, and she just looks at them or says everything is fine when it isn’t. That isn’t just the narrative of my grandmother; that is the narrative of a lot of older Black adults.”

Jones explains that he named his clinic KinFolk so it would be understood as a home for the Black community and other marginalized groups. “In the South, people always say, ‘That’s your kin over there.’ They aren’t necessarily blood-related, but maybe they live down the road and helped the family at some point, so they’ve become family,” he says. The old-fashioned term also harks back to the bygone days when neighborhood doctors made house calls and spent time truly getting to know their patients. “KinFolk is rebuilding that lost art,” says Jones, who gives patients the option of in-home appointments.

Jones offers a holistic approach to health care and makes a point of meeting people on their level. “One of the things I discuss with patients in my private practice is how they’re navigating being Black in America. That has a significant impact on mental health, which can lead to physical problems,” he explains. “We also talk about using old-school treatments that are more familiar to some people. Instead of buying cough medicine, for example, put some apple-cider vinegar and honey in a bottle and, voila, you have your own natural remedy.”

Jones wants all his patients to feel comfortable in his office, which means “sitting down, pulling up a chair, and making them feel at home,” he says. “So many times, I’ve walked into the exam room and before I can even say ‘What can I do for you?’ the patient’s tears start. They’ve never met me before and I’m already passing the tissue box. The health-care system has been so unfriendly to some people that when they walk into a space that is friendly, it’s just so overwhelming.” He says he
is open about his trans status when it’s relevant, a fact that is certainly appreciated by trans and gender-nonconforming patients, who often face a whirlwind of obstacles, from dealing with providers who are not versed in hormone treatment to being flat-out denied basic care.

At the start of the pandemic, Jones served as one of the lead clinicians in the fever and cough clinic at the ColumbiaDoctors Nurse Practitioner Group, and he says he was particularly affected by seeing low-income communities of color devastated by the virus. “It’s hard not to take that home every day, especially when you do not have answers,” says Jones. But he never stopped working. Not only did Jones keep KinFolk open; the clinic also provided COVID-19 testing and care for local first responders and senior-home residents and provided house calls for those who had contracted the virus. Many of them returned to KinFolk as regular patients.

“Many primary-care providers lost patients, but at KinFolk we gained a lot,” he says. Currently the clinic serves approximately 1,500 people. And though the pandemic has been devastating, Jones has found a faint silver lining. “It’s kept us engaged with the community,” he says. “I’ve been able to give back and be of service.”

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