

SIMP D

society for innovative medical practice design

We believe that a strong patient-doctor relationship brings the best opportunities to advance life's potential for productive and fulfilling days and success in life.

A monthly Newsletter

Issue #4 August 2009

GET ACTIVE - TODAY

There is no better time than the present to call your Congress person and /or Senator and set up a private meeting to discuss health care reform. Click on the site above the constitution .

Most agree, that direct contracting provisions would not only save Medicare (if

allowed under Medicare law) but would also be instrumental in bringing down health care costs overall.

Direct contracting offers our patients the opportunities of choice they deserve under the constitution. No patient would be mandated to contract.

http://clerk.house.gov/member_info/mcapdir.html



<http://www.opencongress.org/bill/111-s1099/text>

Please download Senate Bill SR 1099 (below), authored by Senators Coburn, Nunes, Ryan and Burr. There are many provisions in the bill that we would all disagree with but Section 311 offers wonderful opportunities for direct contracting and the expansion of the HSA. Other provisions such as

the CER and the pilot project allowing for ACO's are very troubling but this is the only legislation that offers direct contracting in the reform conversation.

Please submit your meeting experiences to me in an email and we'll post them on the website. Marcy@choicecare.md

SIMP D in the NEWS

This has been a very busy month for SIMPD. We participated in our first national news conference. SIMPD was asked to be a part of the Coalition to Protect Patients' Rights, a non-partisan

HEALTHCARE RISK SPECIALISTS

The Source for Healthcare Professional Liability

Coalition, working diligently to protect our patients' rights as our Washington legislators are working to "reform the insurance industry." Please visit the coalition's website and look at the 5 minute presentations made by our president, Dr. Marcy Zwelling, Dr. Donald Palmisano, past president of the AMA, and Dr. Todd Williamson, President of the Georgia Medical

Association. This was a HUGE opportunity to bring the issue of our patients' rights to privacy, right to choose, and their right to privately contract into the national spotlight.

<http://www.protectpatientsrights.org/newsroom/?id=149>

Join the coalition and ask your patients to do the same. This month is key if we hope to preserve the rights of self determination for every American.

<http://www.protectpatientsrights.org/>

SIMP D has been working with AAPS to address these patient focused issues and to bring them into the national conversation. We were thrilled to work with the newly invigorated California chapter of AAPS, under the leadership of Wayne Iverson, MD.

We met for a ½ day in beautiful San Diego and networked with doctors

coming from as far as Illinois. We heard from policy experts about HR 3200 and we contemplated how to defeat the bill (in its current form).

Kathryn Serkes, the public relations counsel for AAPS talked to the group about how to clarify the bill for our patients. I invite you to visit the AAPS website and learn more.

<http://www.aapsonline.org/>

SIMP D participated in a wonderful evening with CPOC, an Orange County group of direct practice doctors. The event was sponsored by Silverado, a very high end senior living opportunity. Dr. Z and Jordan Schlain, SIMPD Board member, spoke to the group about the benefits of direct practice. We hope to duplicate the event in Texas and in Arizona.

<http://www.silveradosenior.com/>

Congress is Stealing our (health care) Tent

Those of us actively involved in caring for patients every day know that the American health care system could use some major reforms. We spend far too much time justifying patients' medical needs to the government or their insurer and too little time with our patients strategizing their medical opportunities and health investment.

America's health care system saw a huge uptick in demand when Medicare began in 1965. The rules of Economics 101 could have forecast as much. Those same rules of human behavior continue to be the best predictor of most marketplaces, including health care. That is why I am baffled by the debate taking place in Congress and in the media.

It reminds me of a story about Tonto and the Lone Ranger. Tonto and the Lone Ranger go camping, pitch their tent, and climb inside and go to sleep. In the middle of the night, Tonto awakens and wakes up the Lone Ranger. He asks his friend to look at the sky and explain what he sees.

The Lone Ranger ponders for a minute. "Astronomically speaking, it tells me there are millions of galaxies and potentially billions of planets. Astrologically, it tells me that Saturn is in Leo. Time wise, it appears to be approximately a quarter past three in the morning. Theologically, the Lord is all-powerful and we are small and insignificant. Meteorologically, it seems we will have a beautiful day tomorrow."

"What does it tell you?" he asks Tonto.

Tonto replies, "It tells me that someone stole our tent."

The ongoing legislative debate is about lowering the cost of health care. But, what is the cost? What is health care? And how much is too much? I would offer that for some, a good pair of shoes is as preventive as a mammogram or a new mattress might be "preventive." Moreover, preventive services have never been shown to save dollars in

spite of the assumptions made by our Congress. Similarly, the "pay for performance" systems have only proven to be expensive and not lifesaving. They divert doctors away from the care and time that their individual patients need. While medicine is moving in the direction of individually-based care, the government is asking that we deliver population-based care directed from a government-appointed committee of theoretic experts.

How can we possibly expect Congress to correct a cost problem that exists mostly because our health care system is driven by first dollar coverage and "insurance" that is really a pre-paid discounted benefit plan (Medicare)? The system is sorely broken and bankrupt mostly because of government regulations and mandates and uncontrolled demand. Doctors are blamed for much of the abuse and they are not off the hook. Economics 101 would predict that any marketplace governed by third-party payments would be fraught with unfettered demand. Suppliers (in this case, doctors) who face a payment system that is fixed can only manage their bottom line by selling more. There is nothing in the current debate that would change that fact - nothing to correct the problem that exists because the patients cannot direct their own care.

If Americans want a system that works, it must be economically sound, and that can only happen if our patients have sufficient "skin in the game." When doctors work for their patients, as is the case with plastic surgery, demand and supply drive price to an appropriate place. It is fascinating how many women can find a way to purchase an implant from a plastic surgeon that they trust and refer to their friends.



Catastrophic insurance should be affordable and available to every

American as a means of securing their protection against the financial disasters associated with unpredicted illness or injury. That is the actuarial bet legitimately negotiated with all insurance purchases. Chronic care, on the other hand should be purchased in a transparent marketplace governed by patients' demand.

Ironically, the HSA (health savings account) offered by private insurers has proven that economics 101 works (in this case) to decrease cost and offer appropriate care. Over 30 percent of those purchasing HSA-associated catastrophic insurance had no insurance when they entered the marketplace. And those already owning insurance who convert to an HSA plan use the emergency rooms less and govern the quality of their care. They are very happy with their medical care opportunities and continue to fund their HSA-privately-owned accounts. Good quality, value-based care can only be fueled by patient demand: demand that is driven by personal need and personal accountability. In spite of the success of HSA systems at lowering cost and increasing patient compliance with treatment programs, Congress has this program on the chopping block in its reform package.

While Congress is busily debating the utility of more mandates and regulations, and the astrological significance of a public plan, my patients' lives are at stake. John Locke would observe the government to be stealing American citizens' natural right to life, liberty and their personal pursuit of happiness. As my patients' doctor and their advocate, I would ask that Congress leave our tent alone and allow my patients their rights of choice and self determination.

