HEALTHCARE: ITS ONLY BUSINESS, NOTHING PERSONAL! PART II by Marwan A. Wehbé, M. D.

More, overheard (doctors and patients, please don't read this):

I am sure we can dream up ways to save money every step of the way. First of all, we will challenge the doctors' diagnoses, and make the patients (I mean clients) get a couple of "second opinions" (who cares if the second or third opinions are worse than the first, at least there is a chance someone will say treatment is not necessary!).

Then we will stall on tests, as being excessive, or we will make it particularly inconvenient for the doctors and their patients (darn, I keep slipping, I mean clients), and that will discourage them very quickly from getting too many tests. Then, of course, we will deny all treatments as not reasonable nor necessary; and besides, who can argue with us when we use vague terms such as reasonable and necessary?

If squeezed, we will allow some treatment, just to look good. And whenever we allow a treatment, we have to make sure and restrict the follow-up time. We will pick a small number of days or treatments. If there is a procedure, then we will say that all follow-up is included in the procedure payment. It is fool-proof, trust me!

Better yet, we will tell patients that health care is a right, not a privilege. If the doctors don't give it to them, they will look pretty bad; actually they will look like they are denying a patient care because of financial considerations. Imagine how great; we would be able to blame the doctors for denying appropriate care because of greed! Isn't that great?

Oh, another thing, we will stall on paying out any money for a long time. We will think of some reasons: we will get more second opinions, we will lump treatment payments together, we will challenge the doctor's judgment and, if nothing else works, we will pretend we never got the claim, or that the information is incomplete.

Some physicians may revolt, so we will exclude them from our deal. Soon we will have a small number of doctors who accept to play by our rules, and we will force all patients to see these doctors (remember, we don't think they pay much, so why should they have much of a choice?).

Some doctors will retire early, or change profession... good riddance; they cost us too much money anyway. Those who remain with us will have to change their lifestyles, maybe sell their house and move to a smaller house, but as long as our CEO's keep moving up in the world, who cares!

Of course, doctors will do less research because they will be too busy making ends meet, but that is good: they will come up with fewer new treatments, and as a result spend less of our money. Scientific meetings will see attendance shrink, because doctors would not be able to afford the time away or the expense to attend these meetings, so they will not find out about the

latest advances, and will not get a chance to get together to discuss their problems... get my drift? Remember, the bottom line is profit for the shareholders.

You see, my scheme is really simple. We collect all the money, we keep whatever part of it we please, and we will ration the rest. We will make it inconvenient for doctors and patients to spend <u>our</u> money. Sicker people will die of their disease sooner or later, and the population will get overall healthier. So, with time, our payment for health care would decrease, and our investment will pay off even more.

We just hope patients don't realize that we and them, put together, are spending less money on health care than they are spending on entertainment and gas; they might expect more of us, if they did.

Finally, you agree not to tell anyone about our scheme. We certainly wouldn't want patients to find out what they are really getting into.

If you like my ideas, sign a blank contract and send it back to me. I will send you the terms and details later.