

Is Obamacare the solution? Doctors are concerned

When the health care reform bill was touted as the solution to America's health problems, one of its alleged virtues was a savings of a trillion dollars over ten years. One would think that such a wonderful achievement was reached by ridding our current system of its inefficiencies and eliminating the burdensome expenses of medical practice, namely the overwhelming paperwork and the back-breaking costs of legal protection. Instead, the so-called savings were realized by higher taxes, job killing mandates on businesses and a massive cut in Medicare spending. For most Americans, the recipe was simple: pay more and get less. Far from trimming paperwork, the bill heralds the expansion of an already crippling bureaucracy. Far from limiting litigation, it creates new threats and brewing storms.

Shortly after its passage, the truth about the bill was revealed. Not only would it not save a trillion dollars, it would actually add hundreds of billions of dollars to the deficit. Furthermore, the bill assumes a 23% across-the-board cut in doctors' reimbursements for Medicare patients, a cut which will lead many physicians to bankruptcy and many others to opt out of Medicare, seriously limiting access to care by seniors.

Democrats have stated their opposition to a reduction in physician's fees. In fact, they made a pledge to permanently fix that flawed formula as a way of securing the American Medical Association's support for the bill. Strangely, however, they left the fix out of the calculation. It does not figure in the health care bill and legislation has not separately been enacted to implement it, despite the Democratic party being in control of both houses of Congress as well as the White House. The duplicity in that position is all the more disturbing in that Democrats have not in the least opposed the numerous targeted cuts that Medicare has already enforced on their watch and since President Obama took office. Those have already hurt physicians considerably, by reducing reimbursement on necessary services, imposing restrictions on office-based procedures, and creating countless new regulations. Furthermore, while a decision regarding the 23% cut continues to be postponed, perpetuating uncertainty amongst physicians, another independent 6% across-the-board cut is being planned by Medicare. It seems all too apparent that, even if Congress were to pass the so called "doctor's fix", Medicare will continue imposing independent partial cuts, ultimately leading to the same final effect.

In a typical medical practice operating with an overhead of 50%, a 23% cut in reimbursement is a 46% reduction in income. Yet, even at current reimbursement rates, physicians are already opting out of Medicare. Several months before the health care bill was even voted into law, the Mayo Clinic at Scottsdale quit accepting Medicare patients, a somber prediction indeed for what is likely to ensue.

Reimbursement for physician services has fallen sharply over the years. That, in combination with escalating regulations, greater control by government and insurance companies, and the proliferation of malpractice lawsuits, has discouraged many students from pursuing a medical career. Only thirty years ago, twenty five applicants competed for every opening in U. S. medical schools but applications have since precipitously dropped. Today, recruitment by medical schools is failing to meet the growing demand. Those already in practice are finding it increasingly harder to survive, let alone prosper. Sadly, developments which have taken place since President Obama took office indicate that the trend will not only continue but accelerate. Its current extent can only be viewed as an attempt to restructure medicine, forcing physicians out of private practice and into salaried positions, thus paving the way to a socialized system. The result, unfortunately, is that physicians will work fewer hours even as shortages in medical services continue to accrue. Older physicians are retiring early and, more alarmingly, younger physicians are leaving the profession, a profession which a new generation of bright students will choose to never enter.

It only takes four years to become an engineer, an architect or an information technologist, seven years to become an attorney. It takes eleven years, however, and much harder work, to become an internist or a pediatrician, fourteen years to become a cardiologist, a rheumatologist or a gastro- enterologist, seventeen years a neurosurgeon. Moreover, following the long and intense years of education and training, physicians must continue to master a vast amount of knowledge and an evolving body of information, must be available after hours and on weekends, to handle emergencies, must be humane and compassionate, even as they face the threat of being sued by those they help. And if that were not enough, physicians are subjected to constant audits, by government agencies and insurance companies, which routinely leads them to underbill their services fearing the huge fines they may otherwise incur.

The emotional trauma of a malpractice lawsuit is only paralleled by the potential damages, often exceeding the limits of insurance and costing physicians what they painstakingly worked for their entire life. It is easy to claim that a lawsuit over a medical error is deserved punishment to the perpetrator and a nominal restitution to the injured, but the basis of a lawsuit is more often perception than error in a discipline where a downward course of events is all so often inevitable.

Similarly, it is easy to regard audits as a legitimate way of preventing fraud, but only when one chooses to overlook the bias of an auditor whose earnings are tied to collections and whose decisions, however reproachable, bear the shield of impunity.

How unusual it would be to hear of a malpractice lawsuit against an engineer or witness an audit of a lawyer's charts. Yet, in our society, an internist's income is comparable to that of an engineer and greatly exceeded by that of the lawyer who may sue him. There is something wrong with this picture.

As a result of those considerations, an increasing number of physicians will find themselves forced to give up their practices, which they built with pride and dedication, for the perceived security of a nameless job at a hospital or a local clinic. They will trade their passion for excellence and their commitment to their patients for regular hours, a culture of inefficiency and a monthly paycheck. The availability of physicians will decline, their enthusiasm will wane and the quality of health care will plummet. Talent will continue to be wasted and bright young minds will seek a different path. It is much easier to destroy excellence than to rebuild it, much easier to stagnate in mediocrity than drain that swamp. Studies show that Obamacare will be 300,000 nurses and 100,000 doctors short of what is needed by 2020.

Health care reform is certainly necessary, reform aimed at reducing cost and making care accessible to all, but preserving its excellence. Reducing the bureaucratic quagmire in all its forms, from redundant documentation to needless authorizations and pre-certifications, and simplifying an entire industry of coding and billing, is an essential starting point. Tort reform is critical, not only because of the exorbitant amounts spent on malpractice insurance and lawsuits but because what we do to protect ourselves from lawsuits accounts for a large portion of your shrinking health care dollar. Unfortunately, Obamacare does just the opposite. It keeps malpractice robust, bloats an already crippling bureaucracy and inexorably solidifies government control. It is a diving board into the abyss of socialized medicine.

Representative Tim Ryan voted for Obamacare but does not understand it. He did not hold a single town hall meeting to support or defend it. He does not even begin to appreciate its bleak consequences. He seems to have been seduced into the vision of an idyllic world, where everyone is magically cared for with promptness, kindness, attention and expertise. Sadly, there is nothing idyllic about being denied a knee replacement, a defibrillator, renal dialysis or chemotherapy. There is nothing romantic about succumbing to the madness of a drunk driver because a trauma team was not available.

We support Jim Graham, who is running for the U.S. congress in our 17th district. Not only does he understand health care, being himself a Doctor of Pharmacy and having worked in the field for many years, but he has pledged to uphold and maintain the excellence of America's health care, by far the best health care in the world.

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