The Physician’s Role in Health Care Cost Containment: A Duty to Provide Parsimonious Care

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Physician Role in Cost of Care

• Costly healthcare does not necessarily translate into higher quality healthcare
• The American Osteopathic Association should consider amending the Code of Ethics to include the concept of parsimonious care as a first step in accepting some responsibility for the cost of care
Total Health Expenditure per Capita and GDP per Capita, US and Selected Countries, 2008

Kaiser Family Foundation 2011
Cost of Physician Services

• Physician and clinical services were responsible for 20% of the total $2.6 trillion spent in 2011

• Given that most services require a physician’s order, physicians control 85% of the total expenditures
CHOICES

• Shift cost to individuals - but they might forego necessary care
• Governments could impose deep cuts - but this is not in long term interest of patients or providers
• Cut Waste - encourage access to necessary care.

DECREASE WASTE AND INCREASE EFFICIENCY

Money should not be spent on unnecessary administration, inefficiencies, and care that doesn’t improve health.

IN HEALTH CARE...

1/3 of health care expenditures—an estimated $750 billion!—don’t improve health.

IN OTHER INDUSTRIES...

FACTORY ASSEMBLY LINES are continually monitored to improve quality, identify inefficiencies, and remove waste.

TO LEARN MORE ABOUT THE PATH TO THE BEST HEALTH CARE AT LOWER COST, VISIT IOM.EDU/BESTCARE.

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SOURCES: REFERENCES CAN BE FOUND AT IOM.EDU/BESTCARE.
Controlling for other factors, the results of this survey show that connectedness and continuity predict “empowerment” outcomes – feeling well-informed, being comfortable asking questions of care providers, understanding providers’ answers and being confident in the ability to make healthcare decisions. Feeling well-informed also independently predicts the other three empowerment items. And each of the empowerment measures predicts “engagement,” that is, taking a role in healthcare decisions – a key goal of patient-centered care.
An Ethics of Rationing to an Ethics of Waste Avoidance

“Waste . . . includes abuse, in the form of spending on interventions that do not benefit the patient. This would account for at least an additional 30% in savings.”

Howard Brody, MD, J.D.
Physician Autonomy and Health Care Reform

“Physician autonomy is not equivalent to the liberty to treat patients however the physicians want but fundamentally rooted in the effort to promote patients’ best interests.”

Ezekiel Emanuel, M.D.
“... Many physicians who are still in the fee-for-service system actually stand to lose money if they order fewer of these tests and treatments. But they are the first to say that it’s unethical if a practice is not helping the patient.”

Christine Cassel, MD
President and CEO of the ABIMF
Containing Health Care Spending

REDUCE THE COSTS OF DEFENSIVE MEDICINE

• Safe harbor for adherence to evidence-based clinical practice guidelines
• Use of clinical-decision support systems that incorporate these guidelines
• *Choosing Wisely* – American Board of Internal Medicine initiative with guidelines on 45 common tests and procedures that might be overused or unnecessary

CONCLUSIONS

• Although many in the health care industry perceive it is not in their interest to contain national health spending -
• It is a fact that what cannot continue will not continue

RECOMMENDATION

WHAT: FOMA task force should draft a resolution to update the AOA Ethics Manual to include the concept of *parsimonious care*

WHY: A first step to accept some of the responsibility for the *allocation of scarce resources* and to help control the cost of health care

HOW: Improve *quality* at an *affordable cost* by providing parsimonious care—care that is just right

WHEN: Between FOMA annual meeting and deadline for submission

WHERE: AOA House of Delegates, 2013
References

- “A roadmap for Physicians to Health Care Reform” Kathy Means, Ken Monroe; The Physician Foundation May 2011; Downloaded at www.physicianfoundation.org
- “Physicians and Their Practices Under Health Care Reform” Cooper et al; Physician Foundation 2009
- www.choosingwisely.org
- Ethical Challenges Course; American College of Physician Executives, 2009. Larry McCullough, PhD.
- The Quality Solution: The Stakeholder’s Guide to Improving Health Care; David B. Nash and Neil I. Goldfarb, editors; Jones and Bartlett Publishers; Sudbury Massachusetts 2006