



Letter to the editor: The Pundit Speaks
By Randolph M. Howes, M.D., Ph.D.
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"Changes In American Healthcare"

There is good news and bad news for America's healthcare system. The good news is that the exorbitantly expensive atrocity called "Obama-care" appears to be on the critical list and will most likely not survive, especially since the majority of states are suffocating it with a pillow of law suits. That is about the extent of the good news and there is a laundry list of examples of bad news because American healthcare needs "intensive care." For starters, the U.S. continues to spend far more than other industrialized nations on healthcare, with per capita spending on healthcare now topping \$8,000 a year, more than double most industrialized countries. Second, Americans die far more frequently than their counterparts in other countries as a result of preventable or treatable conditions, such as bacterial infections, screenable cancers, diabetes and complications from surgery. According to a report from the nonprofit Commonwealth Fund, a leading health policy foundation, our U.S. healthcare system seems to be lagging even further behind other industrialized countries on major standards of quality, efficiency and access to care, which has a profound negative effect on overall health in America. In 2010, in Great Britain, just 5% of adults lacked access to healthcare, whereas 44% of American adults aged 19-64 years either did not have insurance or did not have adequate insurance to cover their needs. This situation needs a carefully crafted long term solution. Closer to home, Louisiana consistently comes out at the bottom of the list and we spend more than any other state for healthcare per capita. We pay the most and get the least. I stand by my previous statement, "I do not believe that the government is capable of operating a snowball stand efficiently and cost-wise effective." Thus, the problem will have to be solved with private initiatives and a free market system. Another looming problem is that the "fee for service" method will not likely continue in its current form and rates will not remain the same. One thing seems certain is that our current healthcare system is unsustainable and changes are coming. Alternatives to "fee for service" include: *capitation*, whereby physicians are paid a flat fee to provide all care to patients, whether they seek care or not; *bundled payments*, which is already underway in some areas; *episodic payments*, which rewards doctors for practicing efficiently and avoiding complications; *accountable care organizations*, which are made of doctors and hospitals coordinating care; and *global payments*, whereby patient costs are prepaid. Friends, it is getting very complicated.

In the America that I love, we must make citizens' healthcare a priority and must continue to make healthcare an attractive career-field for our upcoming doctors, while supporting our current physicians.

Randolph M. Howes, M.D., Ph.D.
Surgeon/Scientist/Patient Advocate
27439 Highway 441, Kentwood, LA 70444
985-229-6955-Home
985-229-3760 – Fax
rhowsmd@hughes.net www.iwillfindthecure.org