A physician must be more than a vendor

By George Saj

In the national debate about health care, we have discussed patient access, cost containment, HMO abuse and patient rights at great length. Yet we have ignored the one element with the most profound effect on care: doctors.

The transformation of health care into a for-profit insurance business is changing the face of the medical profession. Traditionally, physicians have enjoyed a special place in society. Fifteen years ago, when polls showed the public's faith in doctors' integrity was second only to belief in the integrity of Supreme Court justices, physicians were devoted to providing the best care for patients regardless of trouble, inconvenience or cost. Medical schools nurtured doctors' ambition to excel. Postgraduate training was intellectually and physically rigorous, designed to instill the capacity for critical thought and the discipline to place patients' needs first.

Doctors secured and maintained their professional reputations by being available and attentive, and to an astonishing degree they lived up to their patients' expectations.

Insurance companies realized early on that the key to controlling costs and maximizing health care profits was to control doctors' behavior. They are accomplishing this through a comprehensive campaign, both psychological and economic. By identifying physicians as health care "providers" or "vendors," they have devalued their medical authority in the eyes of patients and changed physicians' self-perception by rattling their self-confidence. Insurance companies have instituted a series of bureaucratic changes to influence physicians' medical decisions, insisting that every test, treatment and hospitalization be precertified.

Though outright denials are few, the burden placed on physicians and their staffs in dealing with the HMO bureaucracy is overwhelming, as access is difficult and processing of reviews deliberately and painfully slow. Insurance companies have decreased physician reimbursement and by 1999 brought it to below Medicare levels in many instances.

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Through intense lobbying, HMOs largely insulated themselves from ability, leaving physicians to carry practice burden.

The very characteristics that doctors good — preoccupation with problems, conscientious attention; a sense of responsibility, a disregard and cost — make them vulnerable to pulous HMO managers.

The loss of professional independence and the authority to make medical decisions stanches physicians and makes it hard for them to persist as patients' advocates. Stung by the actions of some HMOs, doctors and patients are engaged with each other in a most intriguing way. There is no service more personal than caring for the disabled and ill.

We must not succumb to the advertisements of HMOs and stand by while the destruction of a noble profession is honored and encouraged. Physicians should honor and encourage physicians without them, hospitals are setting an example to others full of clerks sitting in front of computer screens.

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