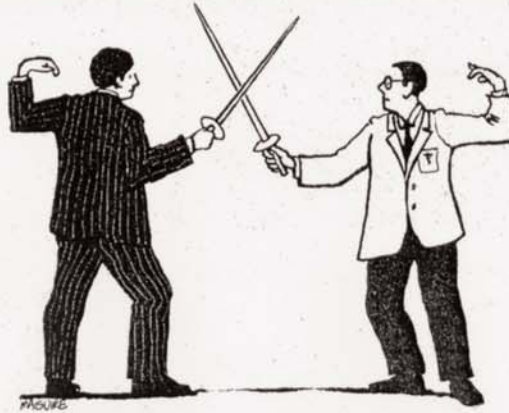


# Seeking cheapest health care a false economy

I rushed home from my office recently to attend a Diamondback game. As usual, the crush of the day's overbooked schedule forced me to be later than usual. After meeting my wife waiting impatiently for me at home, we headed to the ballpark. Upon arrival she noted that our usual parking area was quite crowded and parking space was at a premium. Considering the team's recent performance, and the equally uninspiring opponent that evening, we were both somewhat surprised.

After arriving at our seats we quickly detected that the stands were not full. After what we had witnessed in the parking lot I expressed my surprise to the couple seated next to us. It was then that I learned it was "one dollar hot dog night" and the masses could be found waiting in line for the deeply discounted treat. The concession stands at the ballpark are not known for inexpensive fare so I found that explanation quite plausible.

As a physician and quite fastidious in my diet and exercise routine, hot dogs are not part of my usual nutritional agenda. That being said this was, after all, a baseball game and a 'dog for a buck should not be missed. We joined the queue. After a 20-minute wait I was rewarded with a greasy tube of protein wrapped in a pasty, damp bun. I never sought to question the nutritional value or species of origin but rather diligently doused my prize in mustard and returned to my seat satisfied that I had not missed out on this evening's premier event. As anticipated, the team squandered an early



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COMMENTARY

lead and went down to defeat. It was several days later (after cholesterol lowering drugs had long since done their work) I began to realize the social and economic statement I had witnessed.

It was on that day I learned more details of two major health insurers' plans to provide a rating system for doctors who met their lofty criteria for quality and cost effectiveness. It seems that in order for these insurers to entice their clients to seek care from their preferred providers, little or no co-payment would be charged. The doctors in turn would receive grades based on the cost of the care provided and their perceived quality based on the insurance companies' data. Those that met the company criteria would be identified with the "best doctor" designation.

The insurance executives

are sure the doctors will be anxious to participate because the volume of patients seen in their practices will undoubtedly increase, due to lower co-pays, and the patients will be happy because they will see the doctors chosen as the best, determined by their insurance company.

The major league baseball executives have had obvious financial success with "dollar hot dog night" because the nutritional value, or quality, of a hot dog is never in question. By discounting the fans' expense, and thus increasing the perceived value of this feast, attendance (and thus profit), is certain to increase.

One would hope, however, that there would be more room in the cardiologists' parking lots on "dollar heart attack night."

Choosing the right doctor in the fashion intended by these new programs is akin to ordering food from the menu based on the price without regard to nutrition, taste, or even how hungry you are. As for quality, all the health plans evaluate the credentials of those who participate to guarantee that educational requirements, good citizenship, and peer recommendations meet high standards.

If some doctors fall below these high standards why are they on the provider panel? If a doctor of excellent reputation in the community is not on their panel it is likely that individual chose not to be. If the quality issue is even a consideration, perhaps the physicians and patients in our community should in turn be rating the insurance companies.

What is most concerning about these programs is that the quality assessment of the provider is based on the insurance companies' data. A colleague recently told me that when comparing the insurance company inventory of services he had provided to patients with the actual medical records, an astounding rate of error was found. These new "pay for performance" projects are in the insurer's own words driven by cost reduction. The beneficiaries of those efforts receive the annual reports of these publicly traded companies.

To improve the quality of care you have to pay for the top performers and attract them to your program. Is fine dining now to be equated with the dollar hot dog? Does the neighborhood fast food establishment provide the best nutrition for our children? The consumer must beware of paying too little and expecting to receive too much. Your health is your most valuable possession. Sometimes you get exactly what you pay for.

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