

# AN AMERICAN ILLNESS

**HOW HEALTHCARE BECAME BIG  
BUSINESS AND HOW YOU CAN TAKE IT  
BACK**

Based on a book by Elisabeth Rosenthal



# Which term come to your mind when you think about healthcare?

- Expensive
- Exploitive
- Complicated
- Inadequate
- Anxiety inducing
- EXTORTION
- More?



# Introduction

- <https://www.youtube.com/watch?v=W6Dybo3BomU>
- Play till 2:55



## 10 rules for the dysfunctional healthcare market:

1. More treatment is always better. Default to the most expensive option.
2. A lifetime of treatment is preferable to a cure.
3. Amenities and marketing matter more than good care.
4. As technologies age, prices can rise rather than fall.
5. There is no free choice. Patients are stuck. Stuck buying American.
6. More competitors vying for business doesn't mean better prices; it can drive prices up, not down.
7. Economies of scale don't translate to lower prices. With their market power, big providers can simply demand more.
8. There is no such thing as a fixed price for a procedure or test. And the uninsured pay the highest price of all.
9. There are no standards for billing. There's money to be made in billing for anything and everything.
10. Prices will rise to whatever the market will bear.



# SUMMARY

Healthcare costs 18% of US GDP, or \$3 trillion a year. Overall health outcomes are mediocre compared to other developed countries, which generally spend half per person.

- Why healthcare systems have undergone massive consolidation
- The incentives pushing hospitals and doctors to give you expensive, unnecessary care
- How doctors have regularly protected their own interests at the cost of patients
- How pharmaceutical companies manipulate patent and prescribing law to fight off cheaper generics
- What you can do today to lower personal health costs



# Solutions



Broken Down into categories:

- System Change

- federal level
- state regulators, like OIC

HB 2114, OIC's bill to end the practice of surprise billing in two major circumstances:

1. a true emergency where you are at/taken to an out-of-network hospital
2. a scheduled surgical procedure (approved by your health plan, with a surgeon in your plan's network) where you receive bills from providers who are out network, you had no control over selection (such as anesthesiologists, radiologists, etc.)

- Individual change



# We can change the culture

If enough of us ask the right questions when:

- Finding a new doctor
- At a doctor's appointment
- When choosing a hospital
- Being prescribed medication
- When examining bills



# Example: When at a appointment

## Ask these questions about what care will cost you, before you make your decision:

1. How much will this cost? Compare it to a ballpark range in your area you find online.
2. **How will this test/exam/surgery change my treatment?**
  - If there's no reasonable justification, pass on treatment.
3. Where will this test/exam/surgery be performed, and how does that impact the price?
  - Are you an owner of the place you're referring me to?
4. **Are there cheaper alternatives that are equally good?**
5. Who else will be involved in treatment? Will I get a separate bill from another provider?
6. If you find a surprisingly high price, tell your doctor. She may not have known.





# What now?

Lets take it back to Chapters to EMPOWER MEMBERS by providing them resources to:

1. Choose the best Doctor
2. Ask the right questions at every appointment
3. Vet a hospital
4. Understand and negotiate medical bills
5. Get the lowest cost drug that you need



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