



To be or Not To Be - That is the Question

PRESIDENT'S MESSAGE



By Kuldp Sandhu, MD

Physicians need to be active members of organized medicine if they want to make a difference in health care.

"I consider myself a person of conscience, but I do leave a little wiggle-room for the bottom line."- Pepper...and Salt, The Wall Street Journal

WELCOME TO 2006!

Thank you to Dr. Satya Chatterjee and his team on their achievements for SSVMS. He nicely described them in the last issue of *Sierra Sacramento Valley Medicine*. It is said, "It's far tougher to succeed a success than succeed a failure." For me, it is all the more challenging and exciting to continue the good work.

I have been soul searching for a succinct answer to the frequent question: Why do we need organized medicine, be it the specialty societies, AMA, CMA, or SSVMS? In my opinion, we need organized medicine to create a better working environment for physicians so they can improve the health of society as a whole (prevention) and serve individual needs of patients without undue third party interference (remember HMOs).

Imagine for a moment if all of a sudden, by the benevolent grace of God, no one became sick and suddenly dropped dead at the end of his or her lifespan. The whole healthcare establishment would crumble overnight. My point is the healthcare industry, including physicians, exists because we have patients to take care of. That is why it is essential for physicians to be continuously striving to keep physician/patient interaction sacrosanct. With all the competing forces in the healthcare industry, that cannot happen without the help of organized medicine.

What is organized medicine anyway?

It is all of us who have decided to participate in an organized fashion to make a difference in the lives of our patients. I find it disingenuous when a physician criticizes organized medicine without participating in it. The challenge is to find a platform where genuine concerns and questions of non-members can be addressed so that they can become members of SSVMS/CMA.

The strength of any organization is in the number and vitality of its members. Although a small minority of doctors will never become members, as they have gotten used to their "free-rider status," the majority of non-members will see the value and benefits of membership if we can effectively address their concerns.

Do we want to work harder and harder for less and less? Or do we expect a fair and timely payment for our services? If it's the latter, how could an individual physician ever have a meaningful leverage against the giants of the healthcare industry (insurance companies)? If someone tells me, "I cannot afford to become a member of organized medicine," my answer consistently has been, "You cannot afford not to."

The challenge has been that organized medicine has been fighting on multiple fronts. It needs to! But there are some fights we should not even be required to engage in year after year - Medicare (reimbursement cuts, SGR, GPCI, etc.) and Medi-Cal (one of the lowest paying programs in the country and making a 5 percent cut in 2006). Do the non-members even know that they will be working harder for less? I hope non-members realize the significance of RICO settlements against WellPoint, AETNA, CIGNA, Healthnet and others, which were accomplished after a hard and long fight by organized medicine (CMA).

Fortunately, SSVMS has been able to increase its membership base over the last three years. Most of the growth has come from large medical groups - Permanente Medical Group, Mercy Medical Group, Sutter Medical Group, UCD Medical Group and the Woodland Clinic Medical Group. While some of these groups have achieved 100 percent membership, others are significantly under represented.

Physicians in solo and small groups pay their own membership dues (\$970 for SSVMS/CMA) and hence, not surprisingly, need a higher threshold of proof that their membership expense adds value to their practice environment or bottom line. Soon I expect to attend the annual physician orientation meeting for new medical staff members for Mercy San Juan Medical Center (MSJMC). I hope to educate these young physicians regarding benefits of becoming members of SSVMS/CMA. This will also be an opportunity to interact with medical staff leadership and senior management of MSJMC. I strongly believe that this type of interaction between SSVMS leadership and physician leaders and senior management of local hospitals could be mutually rewarding.

The bottom line is to be more effective, especially at the state and national level, organized medicine must expand its base. This obviously means convincing nonmembers to become members.

But more importantly, this means to involve our patients in this fight. After all, it's their healthcare that we are all fighting for. If the elderly and financially disadvantaged patients lose access to their doctors because of these unfair cuts in Medicare and Medi-Cal payments to physicians, it will be a sad day.

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