LAW, MEDICINE, AND WEALTH: DOES CONCIERGE MEDICINE PROMOTE HEALTH CARE CHOICE OR IS IT A BARRIER TO ACCESS?

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ABSTRACT

Many primary care physicians are unhappy with patient panels in excess of 3000, increased administrative requirements, reduced reimbursement rates, and other earmarks of managed care. Concierge medicine is a new form of medical practice that allows physicians to reduce their patient load to perhaps 300 or less, in order to spend more time with each patient and increase their incomes at the same time. In one model, the physician accomplishes this by charging patients a monthly fee that varies from a few hundred to over a thousand dollars, for which the patient is allowed to access the medical services of the physician. The fee covers special attention from the physician and a list of amenities not usually covered by insurance, while the patients remain responsible for their medical bills.

The dark side of concierge medicine is that, potentially, thousands of patients who may be unable to pay the fee would no longer have access to their physician, and must find a new physician in a market where increasingly fewer primary care physicians are available. Because wealthier patients are often healthier, concierge medicine may also require those physicians remaining within the system to absorb the sicker patients. Medicare patients in particular may be disproportionately affected.

This presentation will describe concierge medicine, briefly review state and federal laws that may impede this new practice form, and then focus on its ethical implications.

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