The Ethics of Provider Interaction With Managed Care Organizations (MCOs): One Physician’s Thoughts

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Topics We’ll Touch On
- The Patient-Provider Relationship
- Managed Care Contracts
- Medical Determinations and Appeals
- The Provider’s Role in Addressing the MCO
- The Big Picture—Medical Ethics and Managed Care

Framing the Discussion
- Providers and the healthcare system always have (covertly) rationed care
  - Treatment choices
  - What patients we accept
  - Time constraints
  - Choice of practice location
- MCOs (even CMS) provide overt rationing
- We have allowed the discussion of what health care rationing might look like in the future to overwhelm the reality of past and present rationing decisions

The Patient-Provider Relationship
- Fiduciary
- Sole Agency
- Emanuel & Emanuel, 1992; Four Models:
  - Paternalistic (guardian)
  - Informative (competent technical expert)
  - Interpretive (counselor or advisor)
  - Deliberative (friend or teacher)
- Beauchamp & Childress; Principles:
  - Respect for Persons; Autonomy
  - Beneficence
  - Nonmaleficence
  - Justice
Additional Patient-Physician Relationships

- Administrative (answering a specific question)
  - Workers’ Compensation
  - Forensic psychiatrist
- Dual Agency (holding multiple obligations)
  - Team physician
  - Military physician
- Where does our patient/MCO interface fit?
  - There has always been a clinical/business interface
  - Provider-Patient
  - Provider-Patient-Insurance
  - Provider-Patient-MCO…the first overt rationing?

Managed Care Contracts

- The MCO functions on a business model
- Who establishes the benefits for patients?
  - Centers for Medicare & Medicaid Services
  - State Statutes
  - Employers
  - The Insuror
- Payment for specific services is based on contracts
  - With the employer
  - With the patient
  - With the provider

Medical Determinations and Appeals

- What does the determination mean?
- What information drives the determination?
  - Knowledge of federal and state laws and regulations
  - Knowledge of the specific benefits the plan offers
  - Knowledge of best and accepted practices
- What is an appeal?
  - Who appeals?
    - The patient or the patient’s appointed representative
  - Is there a role for the provider?
    - To provide accurate clinical information to the process
    - To provide social and community context to the process

The Provider’s Role in Addressing the MCO

- Advocate for your patient’s needs
  - What this means
    - Know your patient’s health goals and preferences
    - Be clear with your patient about options for evaluation and treatment
    - Know your community’s resources and services
    - This is critical for your multi-need patients
  - What this doesn’t mean
    - Embellishing the request
    - Falsifying
    - Fulminating
- Your Long-term Role as a Provider
  - Educate yourself
  - Educate your patients
  - Work for a just healthcare system
Talking to Medical Directors

- Approaches that are very helpful:
  - Know the facts of the case
  - Be ready to explain how you made your decisions
  - Know the literature and your professional society’s stance on the condition and its treatment
  - Listen carefully to the Med Dir’s statements for clues to further discussion

- Approaches that are very unhelpful:
  - Be angry
  - Ask the Med Dir how much company stock he owns
  - Tell the Med Dir where he can file his determination

Ethics and Managed Care (1)

- Managed Care functions in a business model.
- We provide patient care in a professional model.
- We work with MCOs at the interface between these two models
  - We bring clinical (not business) expertise to the process
  - We can function within the four principles of Beauchamp and Childress

Ethics and Managed Care (2)

- Resources are limited.
- The community (Society) must decide on a system of resource distribution.
- A system that distributes limited resources should be based on some form of equity (justice).
- The physician/provider should neither hold nor bear the burden of sole responsibility for the nature of the system.

Summary

- The MCO decision process is based on contracts that define payment for specific evaluation and treatment.
- The provider’s role with MCOs fits into our four principles of ethics.
- The patient-provider relationship can be maintained and strengthened by how we interact with MCOs.