

Private Sector Environmental Scan

From

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[AAFP NEWS NOW](#)

[Family Practice Management \(FPM\)](#)

ANTI-TRUST

- **Antitrust Laws a Hurdle to Health Care Overhaul**

The New York Times, May 26, 2009

“President Obama’s campaign to cut health costs by \$2 trillion over the next decade, announced with fanfare two weeks ago, may have hit another snag: the nation’s antitrust laws. Antitrust lawyers say doctors, hospitals, insurance companies and drug makers will be running huge legal risks if they get together and agree on a strategy to hold down prices and reduce the growth of health spending.”

http://www.nytimes.com/2009/05/27/health/policy/27health.html?_r=2&ref=todayspaper

E-HEALTH

- **EMRs difficult to implement but offer many benefits**

The Charlotte Observer (N.C.), May 26, 2009

“Widespread implementation of electronic medical records will pose challenges, but research continues to indicate that e-records will bring efficiencies to health care that could reduce costs. Among the advantages are reducing trips to the doctor, faster and easier access to lab test results, monitoring for drug interactions, and easier sharing of medical records.”

<http://www.charlotteobserver.com/health/story/745083.html>

EMPLOYERS

- **UAW To Accept Up to 20% of GM Stock; Agrees to Concessions on Retiree Health Care Obligations, Labor Rules**

Kaiser Daily Health Policy Report, May 27, 2009

“United Auto Workers leaders on Tuesday agreed to accept up to 20% of General Motors stock, as well as concessions on labor rules and retiree health care obligations, as the automaker faces a June 1 deadline to restructure or seek bankruptcy protection.”

http://www.kaisernetwork.org/daily_reports/rep_index.cfm?DR_ID=58607

HEALTH INFORMATION TECHNOLOGY

- **Study: HIT solutions needed to revamp primary-care delivery**
Modern Healthcare, May 26, 2009
“Using electronic medical records, computerized physician order entry systems and tools for clinical-decision support could improve the delivery of primary care, according to a report from the New England Healthcare Institute. The study found that the number of doctors who provide primary care has dropped from 50% of all providers in 1950 to 30% in 2007, making it more difficult to meet the needs of aging patients.”
<http://www.modernhealthcare.com/apps/pbcs.dll/article?AID=/20090526/REG/305269963/1153>

HEALTH PLANS

- **Health Net to pay \$1.95 million in rescission lawsuit**
Modern Healthcare, May 26, 2009
“Health Net has agreed to pay California hospitals about \$1.95 million to settle claims related to the rescission of patients' individual insurance policies. The class action case, led by the California Hospital Association and involving about 200 hospitals, stems from Health Net's decision to revoke patients' coverage between February 2004 and October 2007.”
<http://www.modernhealthcare.com/article/20090526/REG/305269976/1010&rssfeed=rss01>
- **BCBS Increases Rates For Individuals In Michigan, Pennsylvania**
Medical News Today, May 27, 2009
“BCBS in Michigan and Pennsylvania announce rate increases and being fought by the attorney general in Michigan.”
<http://www.medicalnewstoday.com/articles/151527.php>

HOSPITAL

- **Study finds no link between quality and cost for hospitals' end-of-life services.**
Health Affairs, May 21, 2009
“Researchers from Dartmouth College and Harvard University "have found that there's not necessarily a link between more expensive hospital services and the quality of care for chronically ill patients. In some instances, the care actually declined when spending went up." The study looked at end-of-life spending for patients with heart attacks, pneumonia, and congestive heart failure. "It took the analysis down to a hospital-by-hospital level, rather than studies in the past done at the regional level.”
<http://content.healthaffairs.org/cgi/content/full/hlthaff.28.4.w566/DC1>

MEDICAL HOME

- **Primary care needs makeover, NEHI report says**

Modern Healthcare, May 26, 2009

“Primary-care practice is in need of a makeover to improve service and access and bolster physician satisfaction with their work, according to a new report by the New England Healthcare Institute. Reform in service delivery, care sites, reimbursement and education through the use of health information technology, pay-for-performance projects and new sites like retail clinics will help.”

<http://www.modernhealthcare.com/article/20090526/REG/305269977/1024&rssfeed=rss01>

- **Any practice can become a medical home, but transition not easy**

AM News, May 25, 2009

“Transforming a traditional primary care practice into a patient-centered medical home is possible, but the change takes time and patience, according to a report in the May/June Annals of Family Medicine.”

<http://www.ama-assn.org/amednews/2009/05/25/prsb0525.htm>

NATIONAL TRENDS

- **British System Highlights Cost-Effectiveness Concerns as Part of U.S. Overhaul Effort**

Kaiser Daily Policy Report, May 27, 2009

“Great Britain's National Institute for Health and Clinical Excellence, determines which medical treatments will be covered based on cost-effectiveness. One of the criteria used by NICE to determine a treatment's cost-effectiveness is how much each additional year of life will cost the government, which the agency has capped at about \$47,000 per year of life in most cases.”

http://www.kaisernetwork.org/daily_reports/rep_index.cfm?DR_ID=58605

PRACTICE DESIGNS

- **More physicians look at hybrid concierge model**

Healthcare Finance News, May 21, 2009

“More physicians, worried that health reform will mean lower payments, are turning to a hybrid model of concierge medicine as a way to sustain their practice financially. A hybrid model allows patients to opt into a concierge-based system for a monthly fee, but allows other patients who don't opt in to continue using the practice in the way that they had before.”

<http://www.healthcarefinancenews.com/news/faced-cost-cutting-measures-physicians-eye-concierge-hybrid-model>

- **Retail Health Clinics**

- **Study: Few retail clinics in poor neighborhoods**

Chicago Tribune, May 25, 2009

“Walk-in retail clinics in grocery and drugstore chains can help the uninsured find health care, proponents say. But a new study suggests most retail clinics aren't in the poorest neighborhoods.

Like most businesses, they go where the money is -- to more affluent neighborhoods, which already happen to be well-served by other medical resources.”

<http://www.chicagotribune.com/news/chi-ap-med-retailclinics,0,7897808.story>

QUALITY CARE

- **Health Affairs Study Finds No Link Between Cost, Quality of Care**

Health Affairs, May 27, 2009

“Quality of care is not linked to the cost of care, according to a study published last week on the Web site of the journal Health Affairs, CQ HealthBeat reports. For the study, researchers from Dartmouth College and Harvard University analyzed the health care bills of chronically ill Medicare beneficiaries in their last two years of life who received end-of-life care from 2,172 unidentified hospitals. The patients had one of three common conditions: heart attack, pneumonia or congestive heart failure.”

<http://content.healthaffairs.org/cgi/content/abstract/hlthaff.28.4.w566>

SELF-CARE

- **Companies, Congress shift focus to wellness, prevention**

The New York Times, May 22, 2009

“Companies have shifted the focus from providing workers with generous health benefits to offering programs that help them shape up and reduce health care spending. A January Hewitt Associates study found some two-thirds of firms planned to make workers pay more of their health care costs and one-third planned to boost their emphasis on wellness programs. Congress also is onboard, considering legislation giving companies tax incentives to offer such programs to workers.”

http://www.nytimes.com/2009/05/23/health/23patient.html?_r=1&hpw

- **Evidence Supports Use Of Web- And Computer-Based Programs To Help Adults Quit Smoking**

U.S. News & World Report, May 26, 2009

“Researchers analyzed data from 22 trials involving almost 30,000 people and found 9.9% of participants were tobacco-free a year after using Web- or computer-based programs, about 1.7 times higher than the rate for people who tried to stop smoking on their own.”

<http://health.usnews.com/articles/health/healthday/2009/05/26/to-quit-smoking-try-logging-on.html>

Reminder: Chapter Executives

AAFP-AAFP chapter Private Sector Advocacy call schedule, 1-888-271-3491, press “3”

June 18, 2009 1:00 P.M. to 2:00 P.M. Central time

July 16, 2009 1:00 P.M. to 2:00 P.M. Central time

August 20, 2009 1:00 P.M. to 2:00 P.M. Central time

