Consumerism & Ethics

The Promises and Constraints of Consumer-Directed Healthcare
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The Promises and Constraints of Consumer-Directed Healthcare

HCA620
Team 4 Presentation
Chapter 15 - "Consumerism & Ethics"

Tommy Taylor
Caroline Darney
Anna Baum
Jamie Lee De Venecia
Petros Ilamji Ojoka
Caseism.com

Agenda
- Health care consumerism and Consumerism
  - Health care consumerism and Consumerism
  - The role of consumers in health management
  - Health care consumerism and Consumerism

Summary
- Consumerism and Consumerism: the power of consumers in healthcare decisions
- Health care consumerism and Consumerism: understanding consumer behavior in health care

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Tommy Taylor
Caroline Darsney
Anna Baun
Jamie Lee De Venecia
Peters Ifeanyi Ojuka

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Agenda

- Tommy - Consumerism: Key Concepts and Challenges
- Caroline - Health Care Reimbursement and Consumerism
- Anna - The Role of Consumers in Health Management
- Jamie - Retail Medicine
- Peters - Ethical Consideration in Health Care

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**Consumerism: Key Concepts and Challenges**

**Consumers, Consumerism, and Economics**

**Consumerism** - defined as advocacy of the rights of consumers and increased consumption of goods resulting in a sound economy.

- A strategy that encourages and enables people to control their personal health.
- Today's health care consumer is intuitive and has a direct influence on services (supply & demand).

**Key Principles of Health Care Consumerism**
- Knowledge of their insurance status and needs
- Informed decision making
- Access to provider and facility information
- Patient and active participation in their own health care decisions and care plans

**Shared Decision Making and Transparency**
- Consumer-Driven Health Plans (CDHPs)
- High Deductible Health Plans (HDHPs)
- Health Reimbursement Accounts (HRAs)

**Health Information Privacy**

**Health Insurance Portability and Accountability Act of 1996 (HIPAA)**
- Public Law (PL 104-191)
  - Combat waste
  - Address fraud and abuse in health care
  - Privacy
  - Electronic Data Interchange (EDI)
  - Protects consumers against the loss of coverage due to previous illnesses or change of employment
Health Care Reimbursement and Consumerism

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**Health Care Reimbursement and Consumerism**

1. Consumers are demanding more input into choices regarding health and wellness.
2. Consumer-driven health movement is in full swing.
   - Fostered changes to health plans and approaches to health care reimbursement.
   - Movement has been propelled by consumers' revolt against organized methods for cost containment, limitations on health services, and limitations on treatment options that are common under managed care.

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**Consumer-Driven Health Plans (CDHPs)**

1. Designed to allow employees greater choice in their health care.
   - Provide more information to aid in the selection of providers, treatment options and facilities.
   - Offer greater choices in services.
   - May allow employees to design their own health plan.
2. CDHP members are more likely to be proactive in determining the coverage available in their health plan.
3. CDHP members are more likely to be cost conscious, engage in wellness programs, realize financial incentives, and exercise. They are less likely to smoke, be obese, or have a health problem.

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**High Deductible Health Plans (HDHPs)**

1. Form of CDHP geared toward basically health individuals who expect limited health care expenses, also known as " Catastrophic" insurance.
2. Offer a broader provider network, limited involvement in medical management, higher deductibles, and lower premiums.
3. Deductibles range from $1000-$5000.
4. Care is paid for by the enrollee until deductible is met.
5. HDHPs generally provide exceptions for preventative care services.

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**Reimbursement Accounts for Non-Grouped Health Expenses**

1. Flexible savings accounts where qualified individuals can deposit pre-tax money to use on specific health-related expenses.
2. HSA: Health Savings Account - Funded by the individual, the employer, or another person on behalf of the individual.
   - Tax-exempt and must be enrolled in an HDHP.
   - Money can be rolled over from year to year.
3. MSA: Medical Savings Accounts - Tax exempt and must be self-employed or employed by a small business that maintains an MSA.
   - Funded by the individual and/or the employer, but not in the same year.

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**Reimbursement Accounts for Non-Grouped Health Expenses**

1. HRA: Health Reimbursement Arrangement - Available to employees for reimbursement of substantiated medical expenses.
   - Employees funded with pre-tax money only, cannot be funded through a salary reduction arrangement.
   - Unused money in the HRA can be rolled over, or returned to be spent annually at the discretion of the employer.
The Role of Consumers in Health Management

Role of Consumers in Health Care Management

1. Personal Health Management:
   - Continue to take on a more prominent role in our own health care
   - Increased awareness

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<tr>
<th>Healthy people 2010 Leading Health Indicators</th>
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<td>Physical Activity</td>
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<td>Access to health care</td>
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Why are these Leading Health Indicators important for health care managers?

ENRIS and PHRS

1. EMR - used to describe health or medical information that is stored, utilized, retrieved, or shared electronically
2. PHR - electronic web-based repositories for personal health information, provided by the individual

Barriers of Health Information Technology

- Fragmented state of the current health care system
- Diversity of health care data
- Interoperability and technical difficulties related to the sharing of health data
- The current reimbursement system

Role of Consumers in Health Management

1. Wellness and the Consumer
   - Information is only useful when it can be understood well enough to be used.
   - Barriers: Language, socioeconomic status
   - Health Information Technology
     - Social Networking
     - Electronic Medical Records (EMR) and Personal Health Records (PHR)
Retail Medicine

Health care services that are provided in "retail settings" or non-hospital, non-traditional medical environments.

- Examples: Minor Emergency health clinics, Convenient care clinics, Lasik centers, dental clinics, and cosmetics services.

Retail Medicine and Health care services usually contain at least one of the following characteristics:

- Price competition and marketing emphasis on cost effectiveness
- Mass marketing technique through multiple media formats
- Corporation of health services via larger multi-state organization
- The targeting of health needs that are not considered to be life-threatening or serious

Choices and Challenges in Retail Medicine

Convenient Care Clinics
- Retail medicine that caters to the diagnosis and treatment of non-life threatening conditions.
- High volume areas such as retail outlets or shopping malls.

Convenient Care Association (CCA)

Complementary, Integrative, and Alternative Medicine Considerations (CAM)

Concierge Medicine and Global Competition

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Ethical Consideration in Health Care

Ethical Considerations in Health Care

1. Right to respect: reasonable response to patient’s request for treatment and medical care.
2. Fair treatment: equal access to treatment regardless of age, gender, or social status.
4. Right to informed consent: patients have the right to be informed about their condition.
5. Right to refuse care: patients have the right to refuse treatment.
6. Right to autonomy: patients have the right to make their own decisions.
7. Right to access: patients have the right to access their medical records.

Ethical Principles

1. Right to considerate and respectful care
2. Right to obtain current and relevant information about diagnoses, treatments, and prognoses
3. Right to make decisions regarding the plan of care and the right to refuse treatment permitted by law and organizational policy
4. Right to have advance directive or surrogate decision maker
5. Right to every consideration of privacy
6. Right to expect confidentiality of information and communication
7. Right to review records pertaining to his or her medical care with explanation or interpretation of said records and information

Ethics and the Health Care Manager

The role of the health care manager or director can vary according to job description and level of responsibility. However, all health care managers and directors, regardless of their level, type of facility, or geographic location, should function in an ethical and competent manner.

A number of issues impact ethical management in health environments, such as reimbursement issues, organizational change and behavior, situations related to clinical and behavioral research studies, fiscal needs, and policies. A nurse manager and the more toward pay for performance can sometimes be questionable behaviors among the part of health care providers, third-party reimbursement organizations, and those realities of patients regarding service delivery and payment.