

Beware of Your Managed Care: It can be intrusive and even ... deadly



Guidelines for selecting a health insurance carrier

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In order to find out if your health insurance will assist you when you seek medical help or whether it is primarily geared to make great profits for its executives and shareholders, you must consider a number of questions. As has been documented in congressional hearings, federal courts, Newsweek, 60 Minutes, Wall Street Journal, N.Y. Times, Nightline and numerous other sources, not attending to the concerns described in this brochure can be hazardous to your health, privacy, pocket book and even your life.

Before you sign your health and privacy away to a health insurance carrier consider the following:

Your sex life on the Internet.

Managed care staff often asks extremely detailed and intimate questions about the content of psychotherapy sessions in order to approve treatment. This private information is usually entered into the company's computer. The fact that such private information is placed into a computer scares me to death. I am concerned that this highly confidential information can easily be available to numerous people within and outside of the M.C. organization. I can also be shared with other insurance companies, sold, or broken into by unauthorized opportunists or hackers. I believe that what is entered into large company computers can easily become public information. The question becomes, can you risk that your private life (sex, drugs, affairs, depression, phobias, etc) will appear on the internet?

The risk to your future health or life insurance or employment.

To make things even more scary, the federal government and the insurance industry developed a national database of medical and mental health records, to which your managed care records are reported to and stored. Regardless of the regulations, there is no way to tell how the information from the National Data Bank will be used or abused. Similar to your credit report, it will be easily accessible and potentially easily abused. In this case it can be easily used for the benefits of health or life insurance companies or employers who are highly interested in any history of information about your health so they can protect and assure their future profits.

Therapists or doctors can lose their jobs for providing "too much" care.

Many providers are expected by MC to provide only the minimum of care and complete treatment in a very short time. If therapists consistently request more sessions because life problems, such as depression, anxiety, panic, grief, marital problems or difficulties with children, cannot be resolved in a few sessions, they are often dropped from the panels and lose their jobs.

Doctors or therapists may financially benefit by denying you care.

Be on the alert if your doctor, therapist, or clinic is under a "capitation contract" with your insurance company. If this is the case your "provider" is being paid to serve you (per-capita) ahead of time whether you are treated or not. Some capitation contracts even give big bonuses to doctors or therapists who deny care or provide only the minimum care.

Such arrangements give financial incentive to doctors to:

- a. See you as little as possible or for the shortest appointment possible.
- b. Not see you at all. This is usually achieved by not returning your calls or scheduling your appointment far into the future.
- c. Refuse to refer to specialists, such as orthopedists, etc.
- d. Deny you diagnostic testing, such as X-Rays or MRI's. Such denials have proven deadly in lawsuits against managed care.

Such incentives force your doctors into unacceptable moral and ethical binds as to whether they take care of you, the patient, or look out for their own income. This is not consistent with quality medical care.

Criteria used to select the doctors or therapists for panels of provider.

Most MC companies do not give patients the freedom to choose their physicians or psychotherapists. Instead, they have pre-approved providers from whom you have to choose.

Psychotherapist-providers often qualify for panels if they are:

- a. Willing to accept sub-standard non-negotiated low fees.
- b. Providing short-term care, sometimes as short as one or two sessions.
- c. Agreeing to share intimate details about you with the managed care co.
- d. Willing to give up control of clinical decision to administrators and CEO's.

These four criteria do not assure the best quality providers.

For these reasons managed care companies are often considered to be unethical, self-serving, and even dangerous.

BEWARE: MC organizations claim to save the public money. However, they frequently take money from patients and providers and put it in the pockets of their executives, (who often make many millions of dollars per year) and stockholders.

Recommendations:

Be extremely careful not to fall into the trap of "cheaper is better". Managed care may be the cheapest option in the short run but very expensive or even deadly in the long run. Not all MC companies are the same. Find out the facts and make an informed decision.

If you want your health insurance to partly pay for a therapist of your choice, sign up (or switch) to an insurance company that offers an old fashioned fee-for-service indemnity plan. Under such a plan you maintain control of who and how you will be treated.

Consider paying out of pocket for your psychotherapy. Tending to our marriages, children, depression, health or souls is too important to leave in the hands of managed care for profit companies. This option best assures that what you discuss in therapy remains private and increases the likelihood that you get proper treatment.

For an important resource on dealing with managed care abuses, go to the National Coalition of Mental Health Providers and Consumers at www.thenationalcoalition.org.