

In search of cooperation

Let's stop the finger-pointing and build a healthcare system based on trust and teamwork

As we begin a new millennium, our healthcare system is operating far too much on negativity and fear. We've moved from "managed care" to "blame care." Constant disputes arise between payers and providers, physicians and hospitals, and consumers and both payers and providers. Litigation and legislation follow. It's time for a shift to a more positive, trusting and teamwork-oriented mode of behavior. Call it "cooperative care."

This is not an issue of competition vs. noncompetition. Competition should always be part of the healthcare equation. It is also not a condemnation of litigation as an approach to solving problems or resolving disputes. There is a time and place for appropriate legal action.

The challenge, however, to those working in the healthcare system—private-sector business leaders, government officials, physicians, lawyers and consumer advocates, among others—is to embrace the long-term benefits of greater cooperation as a more productive, cost-effective and higher-quality way to proceed.

In the U.S., we have what is held up as the world's most advanced and capable healthcare system. Yet it is rated 37th by the World Health Organization, is fraught with errors, and leaves 43 million individuals, including 10 million children, outside its gates.

Our healthcare system features an employment-based insurance model with huge supplementation in purchasing by federal and state governments. In fact, government now purchases nearly 50% of healthcare services. It is a profoundly federalist system, with the federal government and all 50 states actively involved in regulation as well as purchasing. Its services and products nevertheless are still provided largely by the private sector.

Such a "mixed" system can function well only if its components are cooperating effectively. Today we already see good cooperation and teamwork at the micro level when individual healthcare professionals team up to provide direct healthcare services. We need to elevate cooperation to the macro level, implementing it in relationships among employers, government agencies, payers, hospitals, physicians and consumers.

The key ingredients. A cooperative-care system must be built on a foundation of three core principles: trust, teamwork and information.

■ Trust is like a bank account: it can go up and down. Payers and providers must rebuild their trust in each other. As they do, a new generation of quality-driven, cost-effective healthcare will emerge. Payers and providers that take the lead—and the risk—in developing creative new relationships and cooperative ways of integrating the financing and delivery of care will be successful. And, as they cut down on bashing each other publicly, consumer confidence in them—now at an all-time low according to polls—will increase. The trust quotient between hospitals and physicians, consumers and payers, and government and providers also must increase.

■ Teamwork must also become the rule at the macro level. Payers and providers, as discussed above, must become a team. A team huddle should replace the current circular firing squad. Physicians and hospitals also should create teamwork bonuses—including financial incentives—to enhance cooperation to produce the best healthcare outcomes in a cost-efficient manner. Cost efficiency will be critical in helping to meet the dual challenges of the growing number of uninsured and an aging population. Our healthcare system cannot operate smoothly when every cost-efficiency decision is somehow viewed as automatically coming at the expense of patient care.

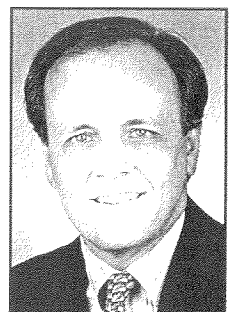
Consumers must also be part of the team. A much more empowered healthcare consumer clearly is emerging. With empowerment comes responsibility. The healthcare system, under cooperative care, will give patients greater voice and greater choice. But they also will have to abide by what's been agreed upon, including not receiving benefits not purchased. Only through a cooperative approach will we get closer to making daunting resource allocation decisions more fairly.

Government, as both purchaser and regulator, also must be included. Especially in its regulatory capacity, government must be careful not to unnecessarily restrict beneficial collaborative and cooperative activities. For example, a common sense, cooperative approach between the public and private sectors must emerge in healthcare fraud and abuse enforcement, allowing us to root out real fraud without creating roadblocks to new, more-effective financing and delivery tools. That is a difficult challenge. It requires trust.

■ Information will be the tool for greater teamwork in that atmosphere of greater trust. Technology in healthcare is just beginning to display its revolutionary capabilities. Employers are ready to put buying decisions in employees' hands, and the Internet will make that possible. The potential exists to unite providers with patients and purchasers in a virtually seamless "tele-everything" system. But it will take teamwork to balance the benefit of greater information flow with the need for privacy, reasonably and fairly applied. And only with teamwork in a high-trust, low-blame environment will we be able to reduce medical errors.

We are truly on the threshold of the cooperative-care era. We have a tremendous opportunity to improve our healthcare system. The race is on, and it's teamwork and cooperation that will take us to the finish line. Those who get there first will survive and thrive in the best way possible—doing well by doing good. □

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