

WESTCHESTER PHYSICIAN

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PRESIDENT'S MESSAGE

ADDRESSING HEALTHCARE MONOPOLIES: THE URGENCY OF PREVENTING CROSS-SECTOR CONGLOMERATION

KHAM ALI, MD PRESIDENT

The American healthcare system is at a critical juncture. The increasing consolidation of power among major players in different sectors—particularly the merging of healthcare companies, insurance providers, and clearinghouses—threatens the balance and integrity of our industry. This trend, highlighted by the recent cyber attack on Change Healthcare, reveals vulnerabilities and risks that we must confront. As physicians and healthcare professionals, our role is not only to provide care but also to safeguard the structures that ensure equitable access and competition within our system.



*KHAM ALI, MD
President, WCMS*

The Growing Concern of Cross-Sector Conglomeration

The healthcare industry has always seen the value in integration within sectors, such as hospitals joining forces to improve service delivery and patient care. However, the rise of cross-sector conglomeration—where healthcare companies, insurance providers, and clearinghouses merge—poses a unique and pressing challenge. These mergers often result in conglomerates that wield immense power, influencing everything from patient access to pricing and care delivery, often with little oversight.

Consider UnitedHealth Group's aggressive expansion into various healthcare sectors. UnitedHealth Group is the largest healthcare company in the world, generating over \$324 billion in revenue in 2023 alone. It serves more than 146 million individuals globally through its various subsidiaries. Through its insurance arm, UnitedHealthcare, the company provides coverage to over 29 million Americans, controlling nearly 15% of the U.S. health insurance market.

However, UnitedHealthcare is just one piece of the puzzle. UnitedHealth Group's Optum division is equally formidable. Optum, a diversified health services company, generated approximately \$182 billion in revenue in 2023, making it one of the largest healthcare services providers globally. Optum's influence extends across care delivery, pharmacy benefits management, and healthcare IT, touching nearly every aspect of patient care.

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FROM THE EDITOR...**HOW I BECAME A DOCTOR: THE ABBREVIATED VERSION****PETER ACKER, MD**

I have for the for the past few years become involved in doing interviews of medical school applicants on behalf of my alma mater: Sackler School of Medicine, the American program in Israel. I enjoy talking to these applicants and can feel the energy, desire and angst that has gone into their quest. Many of the applicants appear quite qualified, with high GPA's, enviable MCAT scores, polished personal essays and the requisite list of shadowing, research, mission trips, etc that have become de rigueur for the modern medical school applicant. From time to time, however, I come across an applicant who has what I call a "redemption story" ie low grades in college, perhaps a period of desultory meanderings and then seemingly out of nowhere, the desire to be a doctor inflames the individual. I must confess, my pulse quickens a bit when I see such an applicant and I counsel myself, be objective, because I can't help but identify with him or her.

I entered Oberlin college eons ago, with a more than respectable high school record and some unformed ambitions to do well and "make something of myself". That first year ended with the shootings at Kent State and I became embroiled in the politics of the time. It was a time of protests, questioning of authority and a search for "relevance" that at the time did not include trying to get high grades. I dropped out midway and hitch hiked to Oregon where I lived with a group of likeminded young people. I gardened, learned to make compost, cheese, yogurt. I found a job as an aide in a nursery school. I did return to Oberlin to get my degree, but had no idea what direction to pursue. I spent several months traveling, first to California, then to Mexico and Central America and finally went to Nova Scotia where I rode a bike around it's perimeter and then settled down in Wolfville on Bay of Fundy and found work as a harvester of strawberries on a farm. By the end of that summer, I was out of money and realized I need to get a real job. Through a connection, I was able to find work as a tech in a toxicology lab in Cleveland.

That year in Cleveland, was pretty dismal. I had a very unpleasant boss and I became increasingly gloomy about my prospects. Finally, I couldn't take it anymore and I quit and headed out to California, to Yosemite specifically where I spent six weeks hiking the back country. One night I was camping on top of a small flat topped mountain that was called Cloud's Rest. I was staring up at the sky and I was remembering the nursery school kids in Oregon and also a camp for autistic children in Rhinebeck, NY where I had worked as a counselor, and the deep satisfaction that work had given me. Suddenly, like an epiphany, it came to me – I wanted to be a pediatrician.

I hitched hiked back East arriving in New York City and enrolled in the General Studies division of Columbia University. I was two weeks late, but threw myself into my studies in a way I never had before. I relied on the kindness of friends to put me up, before I found a series of sublets. I

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PRESIDENT'S MESSAGE**KHAM ALI, MD PRESIDENT***(Continued from page 1)*

The third piece of this powerful triad is Change Healthcare, which UnitedHealth Group acquired in 2022 for \$13 billion. Change Healthcare processes over 15 billion healthcare transactions annually, including claims processing and payment, eligibility verification, and revenue cycle management. This vast network gives UnitedHealth Group unprecedented control over the financial and administrative aspects of healthcare, creating a system where one entity holds significant sway over patient data, insurance coverage, and care delivery.

The Change Healthcare Cyber Attack: A Wake-Up Call

The cyber attack on Change Healthcare serves as a stark reminder of the vulnerabilities that accompany the consolidation of power within a few entities. On February 21st, Change Healthcare fell victim to a significant cyber attack, compromising sensitive data and disrupting services critical to the healthcare infrastructure. The breach exposed millions of patient records (6 Terabytes worth), including personal health information, insurance details, and financial data. This caused a forced shutdown of all of Change Healthcare's operations. For many healthcare providers reliant on Change Healthcare's services, the attack brought operations to a standstill, delaying patient care and complicating administrative processes.

One of the most devastating impacts of this attack was on patients who rely on pharmacy benefits for their medications. In fact 90% of pharmacies used Change Healthcare's pharmacy benefits transactional solutions. As a result of the disruption, many patients were unable to access their pharmacy benefits, leaving them unable to afford essential medications. This not only jeopardized their health but also underscored the inherent dangers of allowing a single entity to control such a crucial aspect of healthcare delivery.

The missteps during this crisis were as alarming as the breach itself. Change Healthcare's initial response was slow and lacked transparency, leaving healthcare providers and patients in the dark about the extent of the breach. It took several days before the company issued a full disclosure of the incident, during which time the damage continued to escalate. This delay not only compromised the trust of those affected but also highlighted the risks inherent in allowing a single entity to control such a vast and sensitive network of healthcare data.

Moreover, Change Healthcare's role extends beyond data management. The company has also offered loans to healthcare providers to help them manage cash flow during challenging times, such as during the COVID-19 pandemic. While these loans provided short-term relief, they often weren't able to cover the full loss of income. The combination of financial dependency and the operational impact of the cyber attack exposed the precarious position that many providers found themselves in, reliant on a single entity for both financial support and essential services.

The Need for Unified Action

As physicians and healthcare professionals, it is imperative that we unite to address these growing concerns. The Westchester County Medical Society provides an essential platform for creating a collective voice to combat the monopolistic practices that arise from cross-sector conglomeration. By banding together, we can advocate for policies that preserve the integrity of our healthcare system and ensure that patient care remains our top priority.

Strategic Antitrust Measures for a Balanced Healthcare System

To effectively address the challenges posed by the merger of healthcare companies, insurance providers, and clearinghouses, we must pursue targeted antitrust strategies that promote competition and transparency while safeguarding the essential functions of our healthcare system. Here are the key measures that should guide our efforts:

1. Rigorous Evaluation of Cross-Sector Mergers

The Federal Trade Commission (FTC) and the Department of Justice (DOJ) must apply stringent scrutiny to mergers that span different sectors of the healthcare industry. The focus should be on ensuring that these mergers do not create conflicts of interest or reduce competition in ways that could harm patients.

Unlike mergers within hospital systems, which can bring about beneficial consolidation of care, cross-sector mergers pose unique risks. It is crucial that any proposed merger be evaluated for its long-term impact on patient care, market competition, and the

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PRESIDENT'S MESSAGE**KHAM ALI, MD PRESIDENT***(Continued from page 5)*

overall health of the industry. Conditions must be imposed to ensure these mergers truly benefit consumers and do not lead to further monopolistic control.

2. Protecting Independent Providers and Fostering Competition

To maintain a competitive healthcare environment, it is essential to protect independent providers and prevent their marginalization by larger conglomerates. This can be achieved through:

- **Supportive Policies:** Implementing policies that offer financial incentives, technical assistance, and regulatory relief to independent providers, helping them compete effectively in a marketplace dominated by large entities.
- **Fair Reimbursement Practices:** Ensuring that insurance companies, especially those involved in cross-sector conglomerates, provide equitable reimbursement rates to independent providers, preventing undue pressure on them to join large networks.

These efforts are vital to maintaining a diverse and competitive healthcare landscape where innovation and patient care are prioritized.

3. Enhancing Data Security and Ensuring Transparency

The Change Healthcare cyber attack underscores the need for robust data security measures across the healthcare industry. We must advocate for:

- **Comprehensive Cybersecurity Standards:** Establishing mandatory cybersecurity protocols for all healthcare entities, with a particular focus on those involved in multiple sectors of the industry. Regular audits and accountability measures should be in place to ensure compliance.
- **Transparency in Breach Reporting:** Enforcing strict requirements for the immediate disclosure of data breaches, with clear communication to patients and providers about the nature and extent of these incidents.

By securing our data and ensuring transparency, we can build a more resilient healthcare system that protects both patient privacy and trust.

4. Advocacy for Policy Reforms

Physicians must take an active role in shaping the policies that govern cross-sector mergers and the broader healthcare industry. This involves:

- **Engagement with Policymakers:** Building relationships with legislators to advocate for antitrust laws that specifically address the risks of cross-sector conglomeration, ensuring that these laws protect competition and prioritize patient care.
- **Participation in Professional Organizations:** Leveraging the influence of medical societies like the Westchester County Medical Society to drive policy changes that reflect the collective voice of healthcare professionals.

Through focused advocacy, we can influence the development of regulations that curb monopolistic practices and promote a balanced healthcare system.

5. Public Education and Patient Engagement

Educating the public about the risks of cross-sector conglomeration is critical for garnering support for antitrust measures. This can be done through:

- **Public Awareness Campaigns:** Using media and community outreach to inform patients about the potential conflicts of interest and reduced competition that can result from these mergers.
- **Collaboration with Patient Advocacy Groups:** Working with organizations that represent patients' interests to ensure that their voices are heard in policy discussions.

An informed public can be a powerful force in advocating for a healthcare system that serves everyone fairly.

Conclusion: Protecting the Future of Healthcare

The trend of cross-sector conglomeration in healthcare—merging healthcare companies, insurance providers, and clearinghouses—poses significant risks to competition, innovation, and patient care. The cyber attack on Change

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PRESIDENT’S MESSAGE
KHAM ALI, MD PRESIDENT
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Conclusion: Protecting the Future of Healthcare

The trend of cross-sector conglomeration in healthcare—merging healthcare companies, insurance providers, and clearinghouses—poses significant risks to competition, innovation, and patient care. The cyber attack on Change Healthcare serves as a stark reminder of the dangers inherent in consolidating too much power within a few entities that span multiple sectors of the industry. As physicians, we have a responsibility to protect the integrity of our profession and ensure that our healthcare system remains patient-centered and equitable.

By advocating for rigorous scrutiny of cross-sector mergers, protecting independent providers, enhancing data security, engaging in policy advocacy, and educating the public, we can work toward a healthcare system that prioritizes patients over profits. The Westchester County Medical Society is

a critical platform for this collective action, providing the voice and influence needed to drive meaningful change. Now is the time to act, and together, we can secure a more balanced, resilient, and patient-focused healthcare future.



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MSSNY Podcasts

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The Medical Society of the State of New York has created a number of podcasts on topics that are timely and relevant. In addition to weekly MSSNY Updates from the Division of Governmental Affairs, there are myriad timely and relevant podcasts on COVID-19 (both for physicians and patients) as well as a number of others on veterans, adult immunizations and emergency preparedness.

- | | |
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Click on the podcast titles to listen

MSSNY Announces two NEW Podcasts on COVID-19

★ A Discussion on COVID Vaccine for Patients ★

MSSNY President, Dr. Bonnie Litvack, President-elect, Dr. Joseph Sellers and Dr. William Valenti, Chair of MSSNY’s Committee on Infectious Diseases discuss vaccines currently available for COVID-19 and answer many questions patients may have about the vaccines.

★ How to Talk to Patients About Vaccine Hesitancy ★

Dr. William Valenti, Chair of MSSNY’s Committee on Infectious Diseases discusses the history of vaccine hesitancy and offers sage advice to listeners on talking to vaccine hesitant patients.

★★The additions of these podcasts marks 100 podcasts published on the MSSNY Podcast website!★★

*FROM THE EDITOR...***PETER ACKER, MD***(Continued from page 2)*

supported myself initially with taking care of a child while his parents worked and then as lab tech in a transplant immunology lab at Mt Sinai Hospital.

Most of the schools I applied to turned me down flatly, but I did manage to get a few interviews, I think more out of the curiosity of the admissions officers (who is this guy?!). It wasn't just my checkered background, it was also because I was older which was uncommon, back then. Columbia interviewed me and even put me on their waiting list, but I did not get accepted. I had the Sackler offer in my back pocket and had the hard choice to reapply or go ahead and start. In the end it was a blessing that I chose to not dally any longer and go to Israel. Not only did I have an amazing education and experience, but I also met my wife, Gila there.

I don't recommend this particular path to medical school – it was fraught with angst. However, I will say, that there are very few medical students who enjoyed the actual experience of medical school as much as I did. I was thrilled to be there and valued all I was learning to a much greater degree than if I had simply followed the traditional path. Also I believe my myriad experiences have had a decided impact on the kind of doctor I am today.

So, as I look up from the application on my lap and look at the young man before me, well not so young, thirtyish, who smiles at me and starts: "Listen, I know that my application is a bit unusual...." and I lean back to listen to his story, with a hint of a smile myself.

**STOP THE TRAIN****Elliot Barsh, MD*****"A wise man once said...nothing. He just sat drinking his coffee."***

Hi everyone.

Welcome back, and thanks for taking the time to read our newsletter.

How can we turn *treating* our patients medical problems into *healing* our patients?

We talk to treat!

We have an answer for every patient, every illness,

every day.

Many times when we listen, we are just waiting for our turn to speak, preparing for what we will say next.

As *Jamil Zaki* says in his HBR article, *How To Become A More Empathic Listener*,

"...it can be like a performance...we end up missing the cues that could help us truly connect."

Healing starts with listening!

Talking has to *stop* for listening to *start*.

Listening gives us a chance to use more than our knowledge, but our *heart*, our *soul*, our *consciousness*.

We can overcome our judgement and look past what we first see and think.

Healing is much more than just physical.

It is when we can take what is *broken*, and begin to *understand* what things need *mending*.

We *tap* into something that we *cannot see*.

We tap into one another.

As clinicians, we have a chance to *nurture* something for our patients that no one else can.

As *David Brooks* points out, "Almost above any other human need, human beings long to have another person look into their faces with love and acceptance."

If we are *willing*, we can turn from the *easy* path of treating illness, to the *harder, darker*, path to the *peace* healing brings.

And replace the *loneliness, fear*, and *vulnerability* that illness brings with *trust, companionship*, and *hope*.

Thanks again for reading.

Don't forget to listen to the song.

Be safe.

Articles with links related to this column can be found on page 10.

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STOP THE TRAIN
Elliot Barsh, MD

(Continued from page 9)

"A doctor who treats himself has a fool for a patient"

My First Patient

"But as exhilarating as the skills were, it was in the bounces right before, the moments of pure suspension, that I found my freedom."

Finding Freedom 30 Feet in the Air

Olympic hopefuls are a group of exceptional people held together by athletic tape and hope, who leap without sight of where they will land.

"How do we address our patients' health without causing shame?"

Singing About Body Image Is a Pop Taboo. These Stars Are Breaking It.

Billie Eilish, Charli XCX and Lorde are among a group of young women who are revealing, in their music, the pressure they have felt to look thin.

"People want to connect. Above almost any other need, human beings long to have another person look into their faces with love and acceptance."

The Essential Skills for Being Human

Human beings long to have another person look at them with love and acceptance.

"Every conversation is a joint project, done best when we make space to learn from one another."



How to Become a More Empathetic Listener

hbr.org

"...seems I'm talking my whole life, it's time I listen now."

Hurricane by Mary Oliver

It didn't behave

like anything you had

ever imagined. The wind

tore at the trees, the rain

fell for days slant and hard.

The back of the hand

to everything. I watched

the trees bow and their leaves fall

and crawl back into the earth.

As though, that was that.

This was one hurricane

I lived through, [the other one](#)

[was of a different sort](#), and

lasted longer. Then

I felt my own leaves giving up and

falling. *The back of the hand to*

everything. But listen now to what happened to the actual trees;

toward the end of that summer they

[pushed new leaves from their stubbed limbs.](#)

It was the wrong season, yes,

but they couldn't stop. They

looked like telephone poles and didn't

care. And after the leaves came

blossoms. For some things

[there are no wrong seasons.](#)

Which is what I dream of for me.



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The Westchester County Medical Society Invites you
to attend our virtual CME Event:

Your Employment Agreement: How to Best Protect You, Your Practice and Your Patients

Wednesday, September 18, 2024

5:00PM



Barry B. Cepelewicz, M.D., Esq. and Andrew L. Zwerling, Esq.,
Garfunkel Wild, P.C., General Counsel to the
Westchester County Medical Society



Scan the QR Code to Register or email

jmiller@wcms.org

A comprehensive employment agreement can protect both you and your medical practice and ultimately help both to better serve the practice's patients. Yet many practices continue to prepare agreements that are vague and deficient, and many employees do not spend the time needed to carefully review and fully understand the document. This program will cover a range of issues, from both the employer's and employee's perspectives, including:

- Duties and Obligations
- Outside Activities
- Compensation Models
- Benefits
- Indemnification
- Professional Liability Insurance
- Medical Records
- Termination
- Restrictive Covenants
- Considering Employment v. Independent Contractor Agreements

The Westchester Academy of Medicine is accredited by the Medical Society of the State of New York (MSSNY) to provide continuing medical education for physicians.

The Westchester Academy of Medicine designates this live activity for a maximum of **1.0 AMA PRA Category I Credits™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



Westchester Academy of Medicine hosts The Second Annual Bertrand-Pilkington Golf Outing & Fundraiser

**Date—Tuesday, October 22, 2024
Westchester Country Club
99 Biltmore Avenue
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**Registration, Driving Range & Halfway House Lunch—12:00pm
Tee times will begin at 1:00pm Golf Format: Scramble
6:00 PM—Cocktails
7:00 PM—Dinner and Raffles**

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For more information and other sponsorship opportunities,
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Golf Reservations are Limited—Please RSVP Today!

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VETO Latest Wrongful Death Bill and Preserve Patient Access to Healthcare

On December 29, 2023, Governor Hochul again vetoed legislation that would have greatly expanded damages awardable in wrongful death actions and dramatically increased our already high liability insurance premiums.

Thank you for your previous grassroots contacts urging a veto. Unfortunately, the Legislature has again passed a substantively similar bill (S8485-B/A9232-B) that would dramatically increase damages awardable in wrongful death actions, and produce a staggering increase in liability premiums. Therefore, we are asking physicians to contact the Governor to again veto this one-sided legislation and urge that any legislation to update New York's wrongful death law be balanced to also bring down our extraordinary medical liability costs.

Please remind the Governor that this legislation is fundamentally at odds with the policy efforts of many who seek to protect and expand patient access to care.

Ask Your Legislators to **OPPOSE** the passage of the Wrongful Death liability expansion bill and ask them to work for measures which balance the needs of grieving families with maintaining access to our health care system through reduction in medical liability insurance costs. Actions you can take today:

1

2 Send a [letter](#)

Share on social media [X](#) and [FB](#)

1. Call your legislators

2. Assemblymember: District 92 Assemblymember Maryjane Shimsky at (518) 455-5753

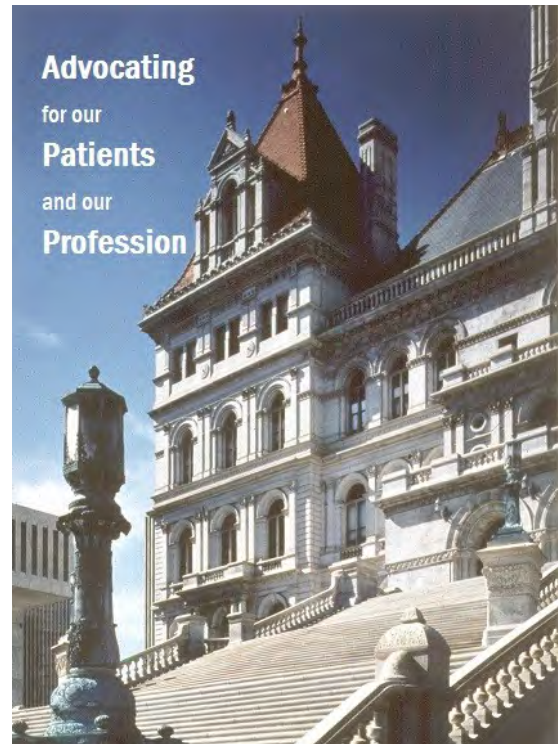
3. **Senator:** District 35 Senator Andrea Stewart-Cousins at (518) 455-2585

NY Assembly switchboard [518-455-4100](tel:518-455-4100).

NY Senate switchboard [518-455-2800](tel:518-455-2800).

To see the full list of advocacy items, visit the [Grassroots Action Center](#).

Thank you for being part of our grassroots advocacy team.



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