Take a Vacation, Save Money and have an Operation  
Is this the future of US Medicine?

In Kentucky, we are faced with escalating health care costs and insurance premiums without an end in sight. Despite being the richest country the United States spends the largest percentage of its Gross Domestic Product on Health Care. (US 2006 Chartbook Page 30) spending 36% more than the next highest countries of Switzerland and Germany. A corresponding skyrocketing rate in private insurance premiums has taken place. According to Kaiser Family Foundation, the average cost of family coverage is over $11,000 per year. Since 2000, premiums for family coverage have increased 87%, the dollar amount the average worker pays has increased correspondingly while the inflation rate has increased only 18% and the average wage only 20%.

In response to this, a new industry is emerging that of outsourcing medical care to foreign countries. I am not talking about outsourcing to India the reading of x-rays from imaging centers which has been done for several years but the transporting of patients and performance of major surgery at foreign hospitals. What’s more, according to the American Medical News, sixteen of these hospitals are accredited by the Joint Commission, the largest Hospital Accrediting Agency in the United States. Everywhere from Italy, India, Rio de Janeiro, Singapore to the Bahamas. And the savings are huge. A hospital in Thailand is offering an average savings of 76% on a heart bypass, 86% on a vascular bypass and shunt and 69% on a liver transplant.

The detractors have stated this is “medical tourism” but to many it is a chance for life. How many of us have seen the mason jars in local stores of families trying to desperately raise money for a liver transplant so their child would live. Now the bar is much lower, the only catch is that they will have to leave the US to obtain care, a disgraceful situation for the United States, the leader of the free world.

I can find no better example of creative destruction as described by Joseph Schumpeter, an idea so revolutionary it will shake the industry at its foundations, forcing a change in a once massive immovable object. Even its threat of appearance can cause change to occur.

In the face of the huge disparity in costs, the only effective argument that can be made to keep consumers in the United States is that the hospitals in the United States provide better quality of medical care. Even the title of the AMA news article stated it’s about money versus possible safety issues.

But only ‘possible’. That’s because quality is for the most part hidden and hard for the consumer to judge and compare. Many patients do not trust our health care system and feel that if you are going to die anyway you might as well do it in an exotic land and not go broke in the process.

Summary
(Total Word Count 755)

The United States is faced with escalating health care costs and insurance premiums without an end in sight. In response to this, a new industry is emerging that of outsourcing medical care to foreign countries.

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How many patients that a nurse is responsible for is one of the best indicators of the care you will receive. If your nurse is taking care of eight or more patients on a general surgical or medical floor, a dangerous situation may exist. The formation of hospital acquired infections and bed ulcers along with other parameters need to be available to the public. In Kentucky, it has been easier to find out how to build an atomic bomb on the internet than it is to find out the rate of hospital acquired infections at your local hospital.

The reported incidence of new bed sores and ulcers that form in nursing home patients returning from hospitalization would allow an outside organization to monitor quality instead of relying entirely on hospital self reporting. Health Watch USA has been encouraging for over a year that the Fletcher Administration post this and other key information on the internet.

Hoping that patients will not seek care from foreign-trained doctors will simply not cut the mustard. Kentucky should disband the state’s Certificate of Need (CON) law and lift the veil of secrecy covering meaningful quality and price information that is hidden from the consumer.

— Kevin T. Kavanagh, MD is a physician in Somerset Kentucky and Board Chairman of Health Watch USA

They will save tens of thousands of dollars and at the same time will be getting a vacation of their lifetime.

Before this new wave of competition becomes a wave washing away patients from Kentucky and onto foreign soil, Kentucky should disband the state’s Certificate of Need (CON) law and lift the veil of secrecy covering meaningful quality and price information that is hidden from the consumer.

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