

**NO FEBRUARY  
GENERAL MEMBERSHIP  
MEETING**

NEXT GENERAL MEMBERSHIP  
MEETING:

**MARCH 18, 1996**

**DOCTORS HEAR FROM  
THE A.M.A.**



James S. Todd, M.D. Executive Vice President of the American Medical Association spoke with our members at the LCMS General Membership Meeting on January 15, 1996.

**- REMINDER -**

If you change your office address/ phone number, or open a satellite office in Lee County, please remember to notify the Medical Society (936-1645 or Fax 936-0533) so we can make the necessary changes to our mailing labels, Dr.'s records, referral lists. We also notify the FMA of address changes to update their records.

Thank you for your cooperation ♦

**DISNEY  
DISCOUNT CARD**

The Disney World and Disneyland Discount Card is now available through the Walt Disney Magic Kingdom Club, offered by the Lee County Medical Society. If you would like to receive the discount card, you may do so by contacting our office, 936-1645. ♦

**PHYSICIAN  
ADVERTISING - A FACT  
OF LIFE IN THE 90s**

BARBARA HARTY-GOLDER, M.D., J.D.

PHYSICIAN ADVERTISING, once uncommon, is a fact of life in the 1990's. Physicians advertise directly, through affiliated organizations, and indirectly through HMOs and hospitals. Unlike advertising in the commercial world, which often seems to be grounded in stretching the truth as far as possible, medical advertising is subject to strict rules of form and substance.

State law and the rules formulated by the Board of Medicine are designed to insure that the public is given sufficient accurate information to make medical decisions, and to insure disclosure of proprietary interests of physicians in medical enterprises. It is not only important for physicians to understand the applicable guidelines for advertising, it is important that institutions and agencies which place advertisements on physician's behalf understand them as well. Consider the following when preparing and placing advertisements.

1. **Tell the truth.** The central precept guiding the rules for physicians advertising is that advertisements not be false, deceptive or misleading. Any misrepresentation of fact is misleading per se.

2. **Tell the whole truth.** Failing to give all relevant information is deceptive. So are advertisements which promise services the physician does not reasonably intend to perform.

3. **Tell nothing but the truth.** Creating a false expectation of benefit is a sure and certain violation of the prohibition of the advertising guidelines. More importantly, ads which promise more benefit than can be delivered can be construed as written guarantee - the only way under Florida law that a physician can be sued in contract for failure to deliver a particular result.

4. **Advertise special credentials with care.** Rules of the Board of Medicine prohibit a physician from claiming special training or expertise in an area unless the training has actually been received. Further, a physician may advertise board certification only if through the specialty board of the American Board of Medical Specialties, or others approved individually by the Board of Medicine.

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**PRESIDENT'S MESSAGE**



ALAN D. SIEGEL, M.D.

**"THE TROUBLE WITH LAWYERS"**

As a Gator Fan you always look for the "silver lining." With this year's Fiesta Bowl the "silver lining" was that millions switched the channel to see an ABC News report by John Stossel entitled "The Trouble with Lawyers." For one hour he told horrific tales of our justice system which a Yale professor called the "laughing stock" of the entire world. It seems that Mr. Stossel was sued by an entrepreneurial dentist who didn't like the story done about him and his multimillion dollar practice limited to TMJ syndrome. After years of depositions and hundreds of thousands of dollars in legal expenses, Mr. Stossel prevailed, only to find the victory was hollow. I'm sure many of our members have "been there, done that."

The cost of lawsuits to every one of us is staggering. Each car costs \$500 more and each pacemaker costs \$3000 more. The nation's top attorney made over \$300 million in a suit against Texaco. When asked why the jury retired a verdict far in excess of what they requested, he replied "I guess they liked me." Public policy in America is made by random panels of six member juries; there is no way to logically predict what this policy will be. This has led many manufacturers to simply stop making materials that may be the subject of suits. Simple vaccines have been priced out of reach because of huge awards. Who gets the money awarded by juries? After taking out attorneys' fees and expenses for discovery, less than half is given to the "injured" parties.

The tactics used by these lawyers is almost out of control. A recent chemical spill in California resulted in a flood of lawyers who set up offices and went door-to-door encouraging people to visit local emergency rooms. Twenty thousand did and only twenty were admitted. Each client won between one and three thousand dollars; the lawyers won forty million dollars.

I don't have to tell anyone reading this

*Continued on Page Two*

**AS I RECALL...**

ROGER D. SCOTT, M.D.

**GOOD-BYE SAN MATEO;  
HELLO BRIDGE**

Until the first bridge was built to Cape Coral in the early 1960's, in order to go to Cape Coral from Fort Myers one had a very circuitous route. It was necessary to go over the old Edison Bridge, up through North Fort Myers to Pine Island Road, then out Pine Island Road some distance and then a long ways south down to Cape Coral. Cape Coral, in the 1960's, was a very small community, mostly located around what is now Cape Coral Parkway. As Cape Coral expanded northward, several citizens of Cape Coral felt the need to begin to start planning a mid-point bridge, and for twenty years or so we have had arguments back and forth between Cape Coral, Fort Myers, and Lee County as to the need for and/or the placement of a "mid-point bridge." There have been various groups formed to fight the positioning of this bridge and ultimately it has come upon us and it is now well under construction. The little, one block long street of San Mateo which was the extension of Colonial across McGregor to the river, has now been totally devastated by construction, as has the north half of San Marcos. Other changes to the topography have been the loss of the Schultz farmhouse, which was the white frame house on the southeast corner of Colonial and McGregor that for years was the homestead of the Schultz family and subsequently became the home of the Art League of Fort Myers. The Schultz farm originally encompassed all of the land where Summerlin and Boy Scout are now, and this was quite a big farm near the outskirts of Fort Myers. There seemed to be cattle grazing on this land all the time, but I'm sure the Schultz flower farm was towards the back of this large area. The Schultz farmhouse has been destroyed or moved, but has been replaced by one of the Key West Condo office buildings.

In the midst of one dimly lit moonlight night in the early 1960's, I was driving back home on Colonial from the hospital. Colonial at that time was two lanes and there was hardly any traffic on any of the road in Fort Myers in the midst of night. Before my eyes appeared a monstrous structure directly

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When finished with this issue . . .

*Pass it on  
to staff!*

TO: \_\_\_\_\_ INITIALS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



LEE COUNTY MEDICAL  
SOCIETY BULLETIN

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The Editors welcome contributions from the members. Opinions expressed in the BULLETIN are those of the individual authors and do not necessarily reflect policies of the Society.

## MEMBERSHIP ACTIVITY

## RESIGNED:

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SUPPORT THOSE THAT  
SUPPORT US

LCMS FLAMPAC Committee would like to recognize those physicians who are actively supporting their profession by paying their Political Action Dues. This is an on-going list as payment is received:

Bess, William	Rubin, Mark
Fletcher, Donald	Sidell, Peter
Gerson, Robert	Siegel, Alan
Hannan, Stephen	Stapleton, Dennis
Howington, EL	Steier, Michael
Hummel, Brian	Teufel, Thomas
Knific, Randolph	Walker, Joseph
Metke, Michael	Walker, Robert
Miller, Keith	Wing, Glenn
Pascotto, Robert	

DAYS AT  
THE CAPITOL

MARCH 24-26, 1996  
Holiday Inn, Capitol Plaza  
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For more information call the  
FMA Alliance at 1-800-940-9451.

## WE'RE ONLINE!!!

Our Address Is: wilke 06601@cti4.cnfl.com



FMA is offering a new online service for all members that will place you on the information superhighway with the added benefit of getting the latest information on what the FMA is doing for you. MedOne is the FMA's electronic bulletin board and Internet access system.

MedOne can connect you, via E-Mail to your U.S. Congressional representatives, state legislators, other MedOne colleagues and the global Internet community. What a convenient way to tell your elected officials how you feel about issues that directly affect you! Allow yourself the thrill of communicating world wide with physicians via the MedOne Internet!

MedOne also includes "Today's News." Here you can access newspapers such as the *Wall Street Journal*, *New York Times*, *USA Today* and many more from around the globe. You can print any articles you see that you wish to read at a later time. You can also set up "bookmarks" so your favorite newspaper (or any other favorite site) can be accessed with one step.

MedOne is the only place online you can access current FMA activities. Items such as Continuing Medical Education (CME) courses are offered directly online. Currently, the Domestic Violence CME is available. There are legal updates on a variety of topics such as "communications with former associates" to "physicians collective actions." FLAMPAC information, Alliance activities and registration for FMA meetings are also a part of MedOne. FMA communications are now online. Get your *Every Thursday, FMA Today* and *Journal of the FMA* with just a click of your mouse. You can access the Legislative Alerts and Bulletins that are distributed throughout the year. With the State and National Legislation sites, you can access directly any elected official that is online and any piece of legislation that has been filed. MedOne gives you the capability to be involved in the legislative process with a minimum of fuss.

Nervous about using the system?? There are tutorials for E-Mail and for the Internet navigation system, so no one need feel they aren't computer capable. The FMA has also established a support service where you can E-Mail your questions and receive technical assistance on all of MedOne's aspects. For more information contact the FMA Capital Office at 800-762-0233.

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## Physician Advertising...Continued from Page 1

line. Any question about the approval of a specialty board can be resolved by an inquiry to the Board of Medicine.

5. Be honest about fees. If fees are advertised, they must be honored by the physician. If there are variables which affect the fees, these must be disclosed in the advertisement.

6. Be (appropriately) modest. The rules of the Board of Medicine prohibit advertisements which convey the idea that the physician advertising is "better" than other physicians. Under this rule, a listing of education, training and board certification is permissible; a headline touting the physician as "the most caring doctor in Florida" is not.

7. Don't forget your name. Every advertisement of physician services must "conspicuously" identify the name of the physician affiliated with the advertisement.

8. Remember that free and discounted services require additional disclaimers. Florida law requires that any ad for free or discounted services include the following statement, in capital letters, clearly distinguishable from other text:

THE PATIENT AND ANY OTHER PERSON RESPONSIBLE FOR PAYMENT HAS A RIGHT TO REFUSE TO PAY, CANCEL PAYMENT, OR BE REIMBURSED FOR PAYMENT FOR ANY OTHER SERVICE, EXAMINATION OR TREATMENT WHICH IS PERFORMED AS RESULT OF AND WITHIN 72 HOURS OF RESPONDING TO THE ADVERTISEMENT FOR THE FREE, DISCOUNTED FEE OR REDUCED FEE SERVICE, EXAMINATION OR TREATMENT.

9. Don't be tempted to advertise HIV status. The rules only permit advertising test results, not a claim to be "AIDS-free," and also require the following disclaimer: "This negative test cannot guarantee that I am currently free of HIV." Further, any physician advertising HIV status must be prepared to provide, on request of the patient, prospective patient, or Agency for Health Care Administration investigator, a copy of an original report confirming the test result.

10. Know your responsibilities. The rules of the Board of Medicine make the physician responsible for all advertisements which solicit patients for the practice, regardless of whether the physician places the ad or it is placed on his behalf by a corporation, institution or agent. Only advertisements by duly licensed HMOs are exempt from this rule. The physician is responsible for seeing that all the rules regarding advertising are met, regardless of who places the ad.

11. Keep copies. The physician is responsible for keeping copies of electronic advertising (audio or video, and probably, by extension, computer-based) for at least six months after the date of advertising is aired.

It is also a good idea to keep copies of the copy submitted for print advertising as well. Occasionally, the printer will delete an important part of the advertisement (for example, the physician's name). Having the copy submitted for printing can prove that the physician complied with all relevant rules in the preparation of the ad.

Generally, initial instances of failure to comply with advertising rules will result only in a notice of noncompliance. Such a notice is not considered discipline by the Board of Medicine, and as such is not generally required to be disclosed on insurance and hospital staff application. Repeated instances of noncompliance, however, are subject to additional discipline, including fines and potential action against the license of the physician. A little regard for the rules of advertising can insure that you get only positive attention from your advertising endeavors.

Reprint from SCMS Topics, January 1996

THE  
QUESTION  
MAN

OPINIONS - EDITORIALS  
LETTERS TO THE EDITOR  
John W. Snead, M.D.

## "WHAT PROBLEMS WILL SEX SELECTION TECHNIQUES POSE FOR MEDICINE?"



Craig Sweet, M.D.  
(Reproductive  
Endocrinologist)

"Accurate sex selection techniques following conception have been available for a number of years via genetic amniocentesis with procedure mainly reserved for sex chromosome-linked diseases. Accurate and reliable X and Y-bearing sperm separation techniques are not currently available, although research is ongoing. The rapid advances in the Assisted Reproductive technologies must be balanced with thoughtful ethical considerations. National guidelines such as those present in Europe and Canada may need to be instituted should sex selection techniques be offered for non-medical reasons."

## MARCH'S QUESTION

## "WHY ARE PHYSICIANS SELLING THEIR PRACTICES?"

Send your comments to the Medical Society. Bulletin deadline is the 15th of each month... we want to see you in the print media! ♦

## President's Message...

## Continued from Page 1

column how lawyers have affected medicine. Most of us order tests that are meant to "cover ourselves" in case of a lawsuit. We often let an aggressive patient or family member talk us into unnecessary tests because we are afraid not to. It's that fear of a lawsuit that may be more damaging than the suit itself. The hours spent on excessive documentation and paperwork have literally taken the "fun" out of practicing medicine.

These same principles apply to the way we govern our profession. Anyone who has served on hospital committees knows that any action to investigate the practice of a physician is met immediately with faxed threats of lawsuits from Palm Beach attorneys. Anything that even approaches criticism is buried by the collective fear of administration, hospital attorneys, and even our fellow physicians. I'm often asked why the medical society can't "Do Something" about a local physician who may or may not be a member of our county medical society. We are paralyzed by the knowledge that a lawsuit will surely come our way if anything substantial is done. In the last few years many major issues have been referred to the Board of Medicine since they are "immune" from this form of legal harassment.

Is there any "silver lining" to this dilemma? Organized medicine takes a lion's share of the credit for bringing this issue into the public forum. For years it has been part of our agenda on a state and national level. The business community has finally entered the battle after seeing costs for insurance go out of sight. We came close to having limits on pain and suffering included in the current Medicare Bill - only to have these eliminated by the Byrd amendment. The FMA has placed tort reform high on their agenda and FLAMPAC is supporting candidates with similar views on this issue. The Palm Beach County Medical Society is starting a petition drive again to place this issue on the ballot. We may not win this year, but we shouldn't sit on the sideline and let the lawyers prevail.

LEE COUNTY MEDICAL SOCIETY ALLIANCE/  
FOUNDATION NEWS

Respectfully submitted by Nancy Barrow, Corresponding Secretary

## NATIONAL ALLIANCE MONTH

On March 2nd in the Lee Memorial Auditorium, there will be a seminar on "The Impact of Breast Cancer...Finding the Balance." This seminar will be sponsored by the LCMSA, The Lee County Breast Screening Program, and Lee Memorial Health System. The keynote speaker is Angela Trafford, a breast cancer survivor and author of the book, *The Heroic Path*. Ms. Trafford's personal experience with breast cancer has given her a unique perspective on the healing process.

## 1996 CHARITY BALL

As our Alliance celebrates its 50th year, we are proud to announce that we will be hosting the "Magical Golden Anniversary Ball" on May 25th, 1996 at the Ritz-Carlton, Naples. This year, the Salvation Army Interim Care Clinic/Primary Care Center was voted the primary recipient of seventy percent of the Charity Ball proceeds. Thirty percent will go to the Alliance Foundation's Mini-Grant Program to "share the wealth" of our profits.

The Salvation Army Interim Care Clinic/Primary Care Center provides much needed services for hundreds of homeless individuals in Lee County. Our Medical Society, along with the Florida Osteopathic Medical Society, the Salvation Army and other local health care agencies joined forces to help organize this Clinic which opened its doors in March, 1993. Currently, they are in need of a customized van to meet the needs of their many physically challenged patients.

I am asking that you consider showing your support. Remember, this is our way (as physicians and spouses) of showing the community that we really do care and are capable of giving back a little of what we reap.

For those of you who have already given, I thank you. For those of you who have yet to give, I urge you to please send your check in now. Make your check payable to: The Lee County Medical Society Alliance Foundation and send it to: Betty Rubenstein, 13301 Ponderosa Way, Fort Myers, FL 33907. With your generosity, Fort Myers will be a better place for us all to live. Thank you.

## SPONSORSHIPS:

## SUSTAINING: \$250-\$499

Special recognition on Sponsor page of the Charity Ball Program; special recognition in NewsPress ad; special thank you in Medical Society Newsletter; special thank you in Alliance Newsletter; special thank you in Salvation Army Newsletter; tax deductible contribution.

## CONTRIBUTING: \$500-\$999

All of the above plus: Half page ad in over 1,000 Charity Ball Programs.

## SILVER: \$1,000-\$1,999

All of the above plus: Full page ad instead of half page, in over 1,000 Charity Ball Programs.

## GOLD: \$2,000-\$3,499

All of the above plus: One couple ticket for the Ball.

## PLATINUM: \$3,500-\$4,999

All of the above plus: Two couple tickets, instead of one, for the Ball.

## CORPORATE: \$5,000 and over

All of the above plus: Three couple tickets, instead of two, for the Ball.

## MANAGED CARE INFORMATION

If you have information you would like to share with your colleagues on managed care, use this Bulletin space.

## MEDICAL ETHICS IN MANAGED CARE

Important ethical principles apply in whatever economic scenario health care is delivered. In standard fee-for-service there is the principle of distributive justice. When resources are finite, unnecessary or inappropriate expenditures for the care of the patient diminishes the ability of society to care for others.

Fraudulent activity is obvious and not the present subject. There are, however, numerous activities that can tweak or milk the system to the physicians' and not the patients' advantage. Upgraded E & M codes will be reimbursed by Medicare unchallenged absent a Medicare audit. Procedural physicians at times exhibit their tubes, scopes and catheters often under the guise of "being positive," "giving the patient the benefit of the doubt" or to protect themselves from possible liability when there is little likelihood of a positive result. It is not fanciful to suggest that a neurologist's investment in a CT scanner, MRI and other high tech equipment will include a rationale for their frequent use. Those physicians have been considered to have been given a blank check the number inscribed related to how the system is churned. The normal costs of delivering health care under fee-for-service is obviously not totally related to these excesses, but they are contributory and a violation of the principle of distributive justice. To some uncertain degree they have hastened the inroads

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## As I Recall...Continued from Page 1

in front of me on the road. This was a time of frequent UFO and flying saucer sightings and I was sure I had found the largest saucer that had been visualized in the United States. Upon further inspection, this was found to be a building that had been directly west of Sam Galloway's on Colonial and it was being moved to the northwest corner of McGregor and Colonial. This was the Fort Myers Christian Church building which remained on the northwest corner of Colonial & McGregor until it has been destroyed or replaced by the new bridge. Fortunately, St. Hilary's Episcopal Church escaped the wrath of the progress machine. Many other changes are occurring along Colonial in relation to the new bridge. Incidentally, Colonial's first name was Toad Town Road.

The buildings and houses of the past are like old friends and this article is intended as an obituary and memorial to these structures which are now long gone. There is so much history and so much beauty in Fort Myers, and it is truly a shame to have to destroy some of the old for the new in the form of progress, but this is life.

It would seem a shame to name this new bridge to Cape Coral anything other than "The Mid-Point Bridge" as it has already been named for the past twenty years and discussed as the mid-point bridge. So... welcome, bridge, and good-bye San Mateo.

A SPECIAL MESSAGE TO AMA MEMBERS FROM  
PRESIDENT LONNIE R. BRISTOW, M.D.The historic headline in *The Washington Post* says it all:

## DOCTORS EMERGE AS BIG WINNERS IN GOP PLAN!

What I want you to know is the story behind that headline, because the tremendous gains the AMA is winning for medicine are the result of a long, deliberate strategic effort to do the absolute best we can for patients and our physician members.

Over the past 10 years, thanks to your membership support, the AMA House of Delegates built a tremendous policy base aimed at getting Medicare on solid footing. Last December we set out agenda and this year, when the time came, we were ready with a 100-page plan that made sense, saved money and served both patients and their physicians. Leaders of the House of Representatives were so impressed, they used the AMA plan as a model for their own proposal.

At the same time, on your behalf we carried out a parallel "outside" campaign to aggressively deliver medicine's message in meetings with virtually every member of the House and Senate; through intense discussions with House and Senate leadership; in speeches all over America; and in meetings with editorial writers, reporters and broadcasters in key media markets.

The results were stunning. The House leadership advanced an extraordinary array of positive changes for patients and physicians that the AMA, advocating for physicians like you, has long sought;

- ✓ Improvements in the security of traditional Medicare.
- ✓ New choices for patients, including medical savings accounts.
- ✓ Patient protections.
- ✓ Physician-sponsored networks and antitrust relief.
- ✓ Liability reforms, with a \$250,000 cap on non-economic damages.
- ✓ Reform of Stark I and II laws and easing of CLIA rules.
- ✓ A new graduate medical education trust fund.

The AMA also convinced House leaders on the need to fix Medicare's flawed physicians reimbursement formula, along with gradual increases in a single conversion factor over the next seven years. That means our patients are assured continued access to care.

This has been a tremendous effort. But our work for you and your patients is far from over. We need your help. I am convinced that with your continued support, we will be successful.

## MEDICAL OFFICE SPACE

EASTPOINTE PROFESSIONAL CENTRE  
4048 Evans Avenue, Fort Myers, Florida

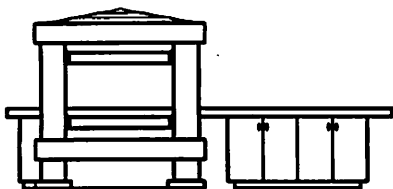
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**Managed Care Information...Continued from Page Three**

of managed care.

Whatever the abuses of this system, it has not been an inherent threat to several other important physician/patient ethical principles-beneficence, nonmaleficence and autonomy. Under fee-for-service a physician has an unrestricted ability to act on the patients behalf to do good, protect him from harm and fully explain all possible options to the patient so that the patient can make a decision. Herein lies the problem in the minds of ethicists regarding managed care.

There is considerable diversity in managed care plans. Some place a physician at more financial risk or, depending on how they use the system, more financial benefit than others. Gatekeeping, restriction of certain drugs, tests, procedures or consultations are common as are withholds. Whatever the restrictions, the frightening aspect is that the marketing and competition of these plans will increasingly curtail services offered and pressures on physicians to lower costs. Physicians are then caught in the bind of doing what is best for their patients and increasing their financial risk or even their employ with the plan.

This dilemma is not lost on the patient. He is accustomed to, and entitled to, complete trust of his physician to be his advocate for the best possible treatment in a cost-effective fashion. The perception that his physician has a divided loyalty, that whatever advice he is given may be tainted by restrictions from the plan or may be in the financial interest of the physician, is a fracture of the trust.

Much heated debate has been generated by these issues. The Florida Medical Association House of Delegates in 1990 and again in 1995 went on record to declare managed care plans unethical and that the FMA and AMA should seek legislation to have them abolished. Organized medicine is unable to do this because it would violate a U.S. Supreme Court approved ruling by the Federal Trade Commission stating it would be anticompetitive and a restraint of trade. The AMA and FMA Council's on Ethical and Judicial Affairs have discussed these issues at length. They have developed and adopted Ethical Standards for Managed Care which are as follows:

"The primary responsibility of the medical profession is to benefit patients. Physicians have an ethical obligation to place the health and well being of their patients before all other concerns.

"Physicians must not deny patients access to appropriate medical services based on the promise of personal financial reward, or the avoidance of financial penalties; and further,

"Patients must have the necessary information to make informed decision about their care. Physicians, therefore, have an ethical obligation to assure the disclosure of medically appropriate treatment alternatives, regardless of cost; and

"Physicians must assure that their contractual agreements restricting referral or treatment options are disclosed to patients; and

"Physicians may satisfy their disclosure obligations by assuring that the managed care

plan makes adequate disclosure to patients enrolled in the plan; and

"Physicians should promote an effective program of peer review to monitor and evaluate the quality and appropriateness of services within their practice." (From the AMA Report of the Council on Ethical and Judicial Affairs, June 1990.)

These standards were approved by the FMA Board of Governors. At the request of this Council, the Board of Governors at its last meeting on October 4-8, 1995, approved sending these standards to the chief executive officers of all Florida managed care organizations and county medical societies. The Board further requested the FMA Committee on Third Party Relations to develop protocols with which to obtain information concerning the compliance with the standards by various managed care organizations.

With these actions, the Council and the FMA wish to publicize to the plans and physicians involved their serious concerns in meeting the challenge of maintaining ethical principles. We view this only as a starting point.

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Dr. Snodgrass is Chairman, Council on Ethical and Judicial Affairs, Florida Medical Association.  
Richard W. Snodgrass, M.D., Daytona Beach

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**Lee Memorial Home Care Checklist**

- ☒ Home Health Services
- ☒ Continuity of Care
- ☒ Home Infusion
- ☒ PICC Line Trained Nurses
- ☒ Coordinators at Both Hospital Locations



**Lee Memorial  
Home Health**  
332-6440



**Lee Memorial  
Home Infusion**  
275-2050

**MARCH  
MEDICAL SOCIETY  
MEETING**

Royal Palm Yacht Club  
MARCH 18, 1996  
Social Time: 6:30 p.m.  
Dinner Time: 7:00 p.m.

**PROGRAM:**  
"CAPITATION -  
RISK & MANAGED  
CARE"

**DINNER BY RESERVATION ONLY**  
**CANCELLATIONS:**

By Noon Fridy before meeting  
Spouse or Guest - Dinner \$20.00

**NO  
FEBRUARY MEETING!**

**LEE COUNTY MEDICAL SOCIETY**  
**P.O. Box 60041**  
**Fort Myers, Florida 33906-0041**

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