

Can a Doctor's Decision to Drop a Patient Be Appealed?

Patient question: My mother's doctor told her his office is no longer accepting her insurance (she's on Medicare), even though has exactly the same insurance policy as last year. She's been seeing this doctor for 25 years. Is there anything she can do?

Dr. Hibberd's answer:

Medicare rules vary by the state you live in. Medicare uses private carriers to administer their products, and these vary from one state to another. Some carriers are reducing physician enrollments and not expanding plan participation to physicians who wish to enroll. Also the type of Medicare plan you have—HMO, PPO—will determine what choice, if any, you have in doctor selection.

Perhaps your doctor has chosen to stop participation because of lowered Medicare fee reimbursement rates or denials, or perhaps because he or she no longer wishes to be bound by some of Medicare's outdated policies or procedures. In any event, she should discuss her wishes with her physician, and then see what options are available, including the possibility she can continue as a private patient. Perhaps she needs to expand her Medicare plan to allow her more choice.

Medicare used to pay 80 percent of the doctor's bill after a deductible, but it has evolved far from that initial pay scenario by continually changing to a point now where doctors are being asked to accept reimbursements as little as 30 percent of their bill (and sometimes no payment at all). This is no longer a free market system and is fatally flawed.

Medicare participation is contract driven and sometimes the economics of Medicare payment are insufficient to justify

having others pay higher fees to compensate for lowered Medicare reimbursements. Medicare has a long history of low payment allowances to physicians and exorbitant payments to facilities, labs, and hospitals. It is time for Medicare to stop forcing payment cuts to physicians to help balance our huge national debt. Choice needs to return to the consumer, with patient incentives provided for shrewd healthcare dollar use and health maintenance.

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