Health Access RI: What Happens When Discount Plans Meet Concierge Medicine

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In an apparent attempt to avoid having to deal with insurance companies while providing affordable care to uninsured and under-insured patients, a group of primary care physicians in Rhode Island has created the Health Access RI plan. Under the plan, patients become members by paying a monthly membership fee. In return they get access to primary care services from the participating physicians at a reduced cost. Included in the plan are such services as: a telephone call line, timely sick visits, check-ups, well child care, and family planning visits.[1]

Members must pay separately for specialty care, hospitalizations, x-rays, laboratory work, emergency room visits, mental health care, prescription drugs, and vaccines (while administration of vaccines are covered by the plan, the actually vaccines themselves are not). The plan does list some providers of these services that are offering discounts of varying amounts to members.[2]

The Health Access RI plan meets a currently underserved need in the community – primary care for the uninsured and underinsured. The idea is that by providing low-cost primary care to this population, there will be less need for the more expensive care caused by delayed treatment. Additionally, anyone who needs specialty treatment will have a primary care doctor they know and who knows them[3] to help guide them through the process, thereby creating a medical home-type structure for plan members.

In effect what is created is a concierge medicine-type plan without the high costs or plush extras that can come along with those plans. As stated on the Health Access RI website, plan members will not get limo service.[4] They do, however, get the more basic benefits of quick access to a primary care doctor and a hotline for advice during non-office hours.

In exchange, the physicians receive a more predictable monthly income and a population of patients that come without the administrative hassles of being reimbursed by insurance companies and/or public coverage programs. This not only makes for less paperwork in the doctors' offices, but it could lead to reduced costs corresponding to reduced need for specialized billing and collections employees.

The Health Access RI plan design acknowledges that the health insurance world has changed. People are increasingly finding themselves without employer-sponsored coverage and/or unable to pay their portion of the corresponding premiums. Without

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[1] *Questions and Answers*, HEALTH ACCESS RI, *available at:* http://www.healthaccessri.com/questions.html (last accessed Feb. 5, 2008).
[2] *Id.*; Felice J. Freyer, *An Affordable Option*, THE PROVIDENCE JOURNAL, Jan. 17, 2008, *available at:* http://www.projo.com/health/content/HEALTH_ACCESS_01-17-08_7A8L2NU_V19.24317c9.html (last accessed Feb. 5, 2008).
[3] *Id.*
[4] *Q&A*, *supra* note 1.

health insurance, it is difficult and expensive to receive any level of care, including basic primary care which can often alleviate the need for specialty care. In many ways, this sort of program is a win-win for providers and patients alike.

There are several catches of note in the plan. Each practice runs its own plan, so you do not have access as members to physicians' offices other than your own. Also, while it is structured to complement a catastrophic health insurance plan, there are no such plans available in Rhode Island.[5] However, it is still better than the situation many uninsured face.

There are two things that make the Health Access RI plan stand out. The first is that it is an innovative use of discount plans. Traditionally such plans have covered dental and/or vision care, as many general health insurance plans provide little or no coverage for these services. By using such plans for primary care, Health Access RI is changing the industry and expanding its reach.

Health Access RI represents a different approach to health care reform in that it focuses on access to care rather than insurance coverage. Most reform plans – from the Massachusetts plan to those proposed by the presidential candidates – look at the need to increase health insurance coverage without looking at whether that is the most efficient or effective way to provide increased access to care. By ensuring that plan members have a medical home and the ability to get timely care, Health Access RI takes the opposite approach, realizing that people need affordable access to care, not necessarily insurance coverage. Pairing membership in a plan such as Health Access RI with a catastrophic health policy would meet the needs of many uninsured and underinsured Americans. It would greatly reduce medical bankruptcies and provide increased disease management to an underserved population.

Almost every market in the country could use a discount plan similar to Health Access RI to address the uninsured and underinsured population and provide them access to primary care. This is a universal need in the United States, whether in areas with notoriously low insurance rates or even in more affluent/covered areas where the few uninsured find themselves in such a minority that low cost alternatives such as community health centers are completely absent.

The plan does ignore one big problem with that must be addressed in any health care reform measures and in particular one that focuses on primary care – the shortage of primary care doctors. While many states are feeling the shortage, Massachusetts is the best example of the problem it can create for health reform. A survey conducted of Massachusetts patients found that the increase in health coverage lead to an increase in wait times for primary care services.[6] If accessibility to primary care doctors is raised similarly in Rhode Island or other states, the same problems will occur. A recent study

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[5] HEALTH ACCESS RI, *supra* note 1.

[6] James Arvantes, *Lack of Primary Care Physicians May Derail Health Care Reform Initiative,* AAFP News Now, Jan. 30, 2008, *available at:* http://www.aafp.org/online/en/home/publications/new/news-now/professional-issues/20080130massachusettsreform.html (Last accessed Feb. 5, 2008).

from the Government Accountability Office found that the focus on specialty care in America has led to an undervaluing of primary care which has been coupled with a decrease in the number of primary care physicians per non-physician population numbers.[7] While Health Access RI will help move our health care system closer to its primary care roots and thereby create a more efficient system, it will also cause greater strain on the current primary care workforce.

The beauty of the Health Access RI plan is that it provides for timely and affordable primary care. It meets an unmet need, and it is likely to appeal to a large population if similar programs emerge in different states. However, the more popular the product becomes, the less useful it will be. Physician groups will either end up having to change the rules about how timely the access will be, or they will have to limit the number of members in their office, leading to a supply/demand problem that could raise prices for the plans, thus undermining their affordability. For now, Health Access RI looks like a step in the right direction, but it will be interesting to see how this innovation holds up as implementation proceeds.

Health Law Perspectives (February 2008), available at:
http://www.law.uh.edu/healthlaw/perspectives/homepage.asp.

[7] United States Government Accountability Office, *Primary Care Professionals: Recent Supply Trends, Projections, and Valuation of Services, Highlights*, GAO-08-472T, Feb. 12, 2008, *available at:* http://www.gao.gov/highlights/d08472thigh.pdf.