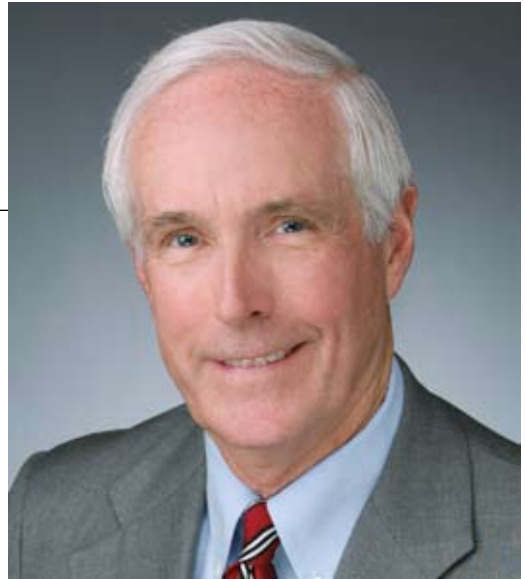


From my perspective



In the coming years, patients unquestionably will be expected to accept more responsibility for their own health care. They will bear a greater financial burden and will need to make informed decisions about where and from whom they receive medical and surgical services. It will be our responsibility as professionals to ensure that our patients have access to the most reliable information possible to guide their choices.

Patient responsibility

We can already see the shift toward greater cost sharing for patients enrolled in private and government-sponsored insurance plans and government programs. For example, many businesses now offer their workers a menu of health insurance options, including opportunities to buy into health savings accounts or to enroll in plans with higher deductibles and copayments.

The Medicare program is also shifting costs to beneficiaries. Starting next year, most seniors will pay a \$93.50 monthly premium for Medicare Part B coverage, a \$5 per month increase from this year's premium. Wealthier beneficiaries will pay more through a system known as "means testing." Under this model, monthly premiums will range from \$106 for beneficiaries with annual incomes of more than \$80,000 up to \$162 for individuals who earn more than \$200,000 each year.

It is conceivable that the government and private insurers may also institute other methods to determine premiums, deductibles, and copayments. Many life insurance companies already base coverage in part on an individual's risk factors, such as high blood pressure, cholesterol levels, smoking, and being overweight. In their ongoing efforts to control costs, health plans may very well require patients who are at risk for needing expensive medical or surgical treatments to contribute more toward their coverage. Indeed, we may soon see tiered premiums, with individuals who properly use prescribed medications, control their weight, avoid alcohol, do not smoke, exercise, and otherwise lead a healthy lifestyle paying lower premiums than those who do not adhere to these standards.

As patients are given more control over their insurance costs and health care decisions, they

“As patients attain greater fiscal and personal responsibility for their health care, one of our roles must be to help them make wise decisions.”

are likely to seek optimal providers of care. They will search for those institutions and physicians best able to help them overcome physical problems and conditions or manage their health at a reasonable price.

The College's responsibility

In their quest to learn about the steps they need to take to ensure that they receive value-based care, patients probably will turn to a myriad of sources, including the Internet, print publications, friends, family members, their physicians, and the greater medical community. The information some of these resources provide traditionally has been based on speculation, hearsay, or subjective experience. Therefore, as individuals and as a professional organization, we must make certain that the public has access to scientifically verifiable, objective, and understandable information.

The College anticipates that the information we accumulate and evaluate through the ACS National Surgical Quality Improvement Program,

our clinical trials program, the American College of Surgeons Oncology Group (ACOSOG), and our revitalized National Cancer Data Base and National Trauma Data Bank® will enable us to provide surgeons and their patients with reliable information about quality of care.

In addition, the College has developed “Patients as Partners in Surgical Care,” a new patient education Web site to help surgical patients and their families become informed about their operation and surgical care. In collaboration with surgical and professional organizations, the National Library of Medicine, and the National Institutes of Health, the College has developed an online resource that will provide current information about surgical procedures, diseases, tests, medications, and pain management; guidelines; and interactive education. Features include links to health news, the National Library of Medicine’s PubMed, and other patient education resources. A “surgeon search” feature is also part of the site. “Patients as Partners in Surgical Care” is an excellent current source of patient education information for surgeons and other health care professionals and can be found at <http://www.facs.org/patienteducation/>.

The College intends to expand this concept in the near future through publication of a book for consumers that will explain surgical care in layperson’s terms. It also will offer pointers on questions to ask before agreeing to an operation and suggestions on how to stay healthy and avoid becoming a surgical patient.

Furthermore, the recently established ACS Public Visibility and Communications Steering Committee continues to examine other means of reaching out to the public to improve their understanding of our health care system and the role the surgical profession plays in that system.

We also anticipate that our “scholars in residence” program will be useful in disseminating research-based quality information to the public. Presently, two surgical residents are working full-time at our headquarters as part of our initiation of this program.

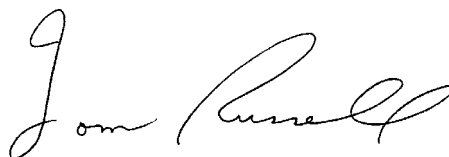
These “scholars in residence” also will enhance our efforts to establish an ACS Patient Safety Center. We are working with the federal Agency for Health Quality and Research (AHRQ) to determine how we can develop this facility so that

it will receive the agency’s approval as a patient safety organization (PSO). As an AHRQ-certified PSO, the College would be charged with confronting, analyzing, and resolving safety issues in surgical care. We would hope that patients would have access to these findings to assist them with their provider selection process.

Each surgeon’s responsibility

Traditionally, patients have counted on us to put their best interests ahead of our own. They trust that we will treat them competently and compassionately, help them make informed choices, and provide the level of care that will be of greatest benefit to their quality of life. As patients attain greater fiscal and personal responsibility for their health care, one of our roles must be to help them make wise decisions. I anticipate that the resources described previously will be useful to surgeons who are looking to provide their patients with scientifically sound information about their practices and the services they supply.

Surgeons and other physicians also must be able to effectively communicate this information, provide knowledge about the resources available through the centers where they practice, and help patients better understand healthy lifestyle habits. The College offers an assortment of workshops and courses to help surgeons hone their interpersonal skills, which are described on the College’s Web site at <http://www.facs.org/education/index.html>. I urge all members of the College to arm themselves with the data, facts, and communication skills they will need to help patients navigate our complex and rather intimidating health care system. We must always remember: They’re counting on us.



Thomas R. Russell, MD, FACS

If you have comments or suggestions about this or other issues, please send them to Dr. Russell at fmp@facs.org.