

RESTORING HEALTH TO HEALTH CARE

A POSITION PAPER BY MYLES J. SCHNEIDER, DPM

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BOOK:

***To Be Or Not To Be Healthy:
For most of us, this is a choice***

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ISBN-13: 978-0-692-00094-6

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Like most Americans, I am, to use medical jargon particularly appropriate for this matter, *acutely* aware of the debate that is currently raging throughout this nation concerning how to reform our healthcare system and resolve the crisis that affects us all. As a doctor for over four decades, now 66 years young, I have seen our healthcare system decline from the best in the world to one now considered one of the worst...in terms of dollars spent for benefit received. Moreover, I have yet to meet anyone inside or outside the so-called healthcare industry who is really satisfied with the current state of health care in this country.

Perhaps the problem rests largely with our use of the term industry, as if one's very life should be compared with the manufacture of metal pots or plastic widgets. For when our health becomes merely a commodity, to be bought and traded in the backrooms of Wall Street for what profit there may be in it for investors, then life becomes valued as a commodity. That is, we humans have worth dependent solely upon our usefulness and performance, and when anything alters that equation—like illness—we, as just another piece of broken equipment for which the cost of new parts and repair total more than the cost of replacement, are discarded. Indeed, for all of history, and much of the world today, life has been valued in just such terms. It would be a tragedy of monumental proportion to allow a nation like ours to succumb to such a deplorable scenario.

However, the real issue this country faces today is not about the healthcare industry, or the insurance industry, or the 40-some million uninsured Americans, or the Massachusetts Plan, or how to exclude illegal immigrants, or any of the other red herrings being tossed about so cavalierly by all those players who are going to fix the problem. For you

simply cannot even begin to fix what has yet to be defined, and therein lies the very essence of the healthcare crisis. Indeed, the only crisis we face is adherence to a belief system that accepts the absurdity that continuing to fund illness is the solution to a healthy society. Now add to that the fact that the overwhelming majority of the approximately \$2½ trillion Americans will spend on health care this year alone will be spent on illness.

My years as both a medical provider and a medical consumer have clearly and persuasively demonstrated that, on a community-wide level, wellness—the antithesis of illness—is the key to transforming our failing healthcare system. For even though Americans spend significantly more on health care than any other nation in the world...even though our healthcare professionals are the best trained and best equipped in the world...even though the United States is where everyone wants to be for a life-threatening medical emergency or surgical intervention or long-term care...yet, with all of this knowledge and all of our technologies and medical training, the state of our individual health is rapidly deteriorating, along with our vaunted healthcare system. Sadly, our lack of information and understanding about what constitutes true health, particularly regarding what our bodies really need to function efficiently and optimally, lies at the very core of this crisis!

Much of this debate revolves around the idea of putting billions—if not trillions—of dollars into this system over the next ten years to hopefully fix the problem. I have a hard time accepting this concept because I know that we already spend more than twice as much per capita in the USA (over \$6,000 per person) than any other nation in the industrialized world, yet we are the sickest of all these countries. In addition, we have more and more people getting sicker and sicker at younger and younger ages, often with chronic and serious diseases which ultimately become very costly to the individuals afflicted and their insurance companies...if they are fortunate enough to be insured. Ultimately, they become a burden on the healthcare system, and I do not see how putting more and more dollars into a system that is flawed to begin with will resolve this or anything else. Unless we have some

fundamental changes in the way we define health—not *health care*, but *health* itself—it can never work.

I have just published a book entitled ***To Be Or Not To Be Healthy: For most of us, this is a choice.*** One of the key points I discuss in the book is that though the workings of the human body are complex, what it needs to function efficiently and optimally—and for each of us to have as much energy as possible and to feel as good as possible—is simple. In addition, for the most part it has nothing to do with doctors, lotions, potions, medications, medical tests and surgical interventions...all with their inherent risks. Similarly, I believe that though the workings of the healthcare system are also complex, what it needs to be fixed is equally simple and does not require a major overhaul of the health insurance industry, more stimulus dollars, tax increases, or the need to reduce reimbursements and/or fees to healthcare professionals, hospitals and other medical related facilities or services. The fact is, ***the only way to guarantee controlling healthcare costs is to significantly reduce the number of us getting sick in the first place!***

At first glance, this may seem like an ideal or simplistic statement or viewpoint, but medical studies have been done that clearly support this concept:

- ◆ A joint scientific statement given by the American Cancer Society, the American Diabetes Association, and the American Heart Association, published in 2004, addresses the issue of cardiovascular disease, cancer, and diabetes as accounting for almost two-thirds of deaths in this country. They further went on to state the following: Despite the incontrovertible evidence supporting the medical and economic benefits of prevention and early detection, current disease-control efforts are underfunded and fragmented. While healthcare costs skyrocket, the national investment in prevention was estimated at less than 3% of total annual healthcare expenditures.

- ◆ The title from an article in *Medical News Today*, September 11, 2004: “Chronic diseases account for 70% of leading causes of death in USA, Report.”
- ◆ Data for 2006 from the Centers for Disease Control and Prevention lists the total number of deaths from the top ten leading causes as 1,851,640. Heart disease, cancer, stroke, and diabetes (all chronic conditions) were responsible for 1,401,092—more than 75%—of that total.
- ◆ The following quote from a recent column in *The Washington Post* by Courtland Milloy: “The problem is getting people to do what we already know they should, said Javed Butler, deputy chief science adviser for the American Heart Association. Eat right, exercise, stop smoking, control blood pressure, cholesterol and blood sugar levels, and consider preventive aspirin.”

In order to resolve this serious national problem, we, as individuals and as a nation, need to have a major paradigm shift in how we look at and think of health. In this regard, all of the steps I feel need to be taken are geared first toward each and everyone of us making healthy, simple, lifestyle choices to enhance our body’s ability to be as healthy as we can be and prevent disease. Secondly, our healthcare system and the government need to devote more time, energy, resources and money aimed at fostering a more proactive approach to health. Here is what needs to be done:

Step One - Defining Healthy

We have to change our definition of what being healthy really means. Being healthy is not just the absence of disease or symptoms of disease, as I believe most doctors and people presently define it; it is also the presence of good health. It is an ideal state of wellness in which the body operates at maximum efficiency in regard to physical and mental well-being, with the least amount of outside or medical intervention

(prescription or non-prescription medications or any other medical treatment).

Step Two - Self Responsibility

Each of us needs to accept the fact that we are ultimately responsible for our own health, that the first person we should hold accountable for our health is ourselves, not our doctors, hospitals, or health insurance companies.

Step Three - Making Healthy Lifestyle Choices

Each of us needs to focus our attention and actions on making healthy lifestyle choices that can support our body's essential needs. We all need to make health and living healthy the number one priority in our lives. The areas that we need to address are good nutrition, drinking sufficient amounts of healthy water daily, getting quality sleep, regular exercise, managing stress, and breathing as clean air as we can.

Step Four - Overcoming Illness

If we do become ill or injured, each of us should be able to receive whatever treatments we require to help us overcome these problems. The emphasis on these treatments should not just be on attacking and eradicating the symptoms and/or the diseases (which certainly is important) but on identifying the causes, which are usually related to lifestyle habits. In addition, we need to focus on aggressively doing whatever we can do to modify our lifestyles to prevent and/or minimize the chances of a recurrence, or of any new symptoms and/or diseases from occurring.

Step Five - Health Care and the Government's Role

Our health practitioners need to educate, emphasize, and guide us in this endeavor. The health insurance companies and the government need to support us by providing significant financial incentives to encourage and reward a more proactive lifestyle.

Step Six - Mandatory Wellness Exams

Since two-thirds or more of the population are currently insured through employer-sponsored insurance programs, and according to recent polls, the majority of us are satisfied with what we have, this should be kept in place. However, there should be a yearly MANDATORY Wellness Exam—paid for by the health insurance company—for everyone (including children on the policy) before the insurance can be renewed for the next year.

The purpose of this examination is not to find a reason to cancel someone's health insurance, as that can never happen. The purpose is to assess whether the person is living a healthy or an unhealthy lifestyle according to one's age, gender, and body type. Besides the basic parameters that are currently used for routine physicals, such as blood pressure, pulse, respiration, height, weight, eyesight, hearing ability, blood chemistry tests, urinalysis, and age/gender specific tests like colonoscopies and mammograms, other measures would also be included for observations, such as ideal body weight, percentage of body fat, oxygen capacity, level of fitness and body strength. It would also involve a complete medical history, plus questions used to assess a person's eating, drinking, and sleep habits, as well as their commitment to fitness, the ability to handle stress, and the quality of the air they regularly breathe. Each person's outcome is rated Excellent, Good, Fair or Poor:

- ◆ If a person passes with an Excellent score, depending on how well they scored and the insurance company policy, their health premiums for the following year do not increase (and in some cases, might decrease), and their co-pays for covered services are decreased.
- ◆ If a person's score is Good, their premiums will remain the same. Depending on how good their score was, and the individual insurance company, they may receive gift certificates that can be

used to purchase health-enhancing products, such as water and air systems, sleep technology, membership in a fitness center, or other items.

- ◆ If their score is Fair, their premiums—and possibly their co-pays—will be increased. If their score was just below Good, depending on the insurance company, they may be given gift certificates (though of a lesser value) as described.
- ◆ If their score is Poor, then their premiums will be increased at a greater percentage than in the previous category, as will their co-pays.

At the conclusion of the exam, the Wellness doctor will go over recommendations for health goals for that individual. These might include the loss of a certain amount of weight, reduction in the percentage of body fat, increase in oxygen capacity, or lowered blood pressure or cholesterol levels. When people are given the exam the next year, if they reach those goals or surpass them, they will again be given financial rewards as described.

In addition, the government offers the following tax incentives based on an individual's level of health, as ascertained by this annual Wellness Exam:

- ◆ A person who gets a Poor health grading gets no tax breaks or incentives.
- ◆ A person with a Fair health grading gets minimal tax breaks or incentives.
- ◆ A person who gets a Good health grading gets significant tax breaks or incentives.
- ◆ A person who rates an Excellent health grading gets very significant tax breaks or incentives.

The program is based on an individual's own health assessment. If one is a member of a family and receives a low grade, it does not affect the tax breaks or incentives available to other family members.

There are certain important points that need to be made pertaining to the mandatory Wellness Exam. It is not meant to penalize or punish anyone who is not healthy. As previously mentioned, they can never lose their insurance. However, it is meant to reward those who choose to make healthy, or healthier, lifestyle choices and are focusing on being proactive about their health. As a matter of fact, it is assumed that a certain percentage of people will have either an acute or chronic condition when they are evaluated. Those with chronic diseases will still be able to take advantage of the available incentives. For example, if someone is overweight and/or is diabetic and/or has high blood pressure, their goals for the next year would most likely be a reasonable reduction in body weight and/or a decrease in the blood sugar level, and/or a lowering of their blood pressure reading. Remember, they have a year to accomplish this. From a purely economic point of view only, it is actually very important to help get these people to live a healthier lifestyle, for it is estimated that about 75% of healthcare expenses are related to those who suffer with chronic diseases.

Step Seven - Medicare

The Medicare program stays the same. No new reductions in services or fees should be made; if anything, I believe that over time the government should be able to add more benefits and even increase reimbursements as well. Those who have Medicare as a primary insurance are also eligible for the tax breaks/incentives as described above.

Step Eight - HealthFare

For the millions of uninsured people and for those who are in the current Medicaid program, the government establishes a national program called HealthFare, which guarantees coverage to every American, including those who already have serious injuries, deformities, physical or mental disabilities, and chronic diseases (everyone means everyone!).

The overall goal of this program is not just to guarantee health coverage for everyone but to create incentives for people to become proactive about their health. Therefore, in addition to guaranteeing quality health care in a timely fashion, the program is structured in such a way as to educate, guide, and motivate these people to be able to become as healthy as they can be, with an eye on prevention and proactive measures:

- ◆ All enrollees are given the same Wellness exam as described above. The health of each individual will also be graded as Poor, Fair, Good or Excellent. It is important to note that no matter what grade a person gets, they will always be assured health insurance.
- ◆ A wellness professional then sits down with each individual or family and goes over a step-by-step program on how each or all of them can attain, increase, or maintain their optimal health and wellness. Realizing that these people cannot afford some of the changes that are required, there are financial incentives that all will be entitled to.
- ◆ After the first year's exam, everyone will be given individualized nutritional counseling, as well as coupons that can be used to purchase a quality water system and fitness shoes. Each year thereafter, every individual can be eligible for additional coupons towards the purchase of vitamin and mineral supplements, products to sleep on and under, and air filter/treatment systems.

Whether or not they receive these incentives, as well as how much they could qualify for, will depend upon the results of their yearly mandatory Wellness Exam.

- ◆ If a person is severely disabled or has severe health issues at the inception of this program, or suffers a serious health problem or injury after its start, their health insurance continues, and they may still qualify for some or all of these incentive programs. This will be evaluated on a case-by-case basis based on protocols that have been established before the actual inception of the program.

Step Nine - HWIA (Health and Wellness Insurance Agency)

A special government agency is created called the Health and Wellness Insurance Agency (HWIA). All the above health insurance programs will be under the auspices of this agency.

Some of the rights, rules, and regulations that the HWIA will monitor and enforce are:

- ◆ The salaries and bonuses of the chief executives of health insurance companies will be limited to reasonable amounts, and excess profits will go back to the insured in the form of health and wellness incentives, lowered co-pays and premiums as already discussed.
- ◆ To try to get premiums even further reduced by stimulating competition among insurance companies, a person will have a choice of either purchasing insurance already negotiated on their behalf by their employer or shopping around on their own. If they choose to do the latter, they would get the amount of dollars their employers were paying towards their health insurance given to them as part of their salary, and they can then purchase a health insurance policy on their own and get 100% tax credit as well.

- ◆ No one can be denied insurance coverage because of any previous illness, injury, or health condition.
- ◆ Everyone will have the right to choose their own doctors.
- ◆ No matter how a person is insured, i.e., through the private sector, Medicare or the HealthFare program, those who make healthy lifestyle choices can obtain financial and/or other incentives. However, only those who are insured through the private sector or Medicare can be eligible for the substantial tax breaks. This would obviate the concern or fear that the private sector would eventually be replaced by a government-only program, thus eliminating competition. In this model, the private sector's insurance programs would always be the one that people will want to have because of the tax breaks and/or incentives.
- ◆ And inasmuch as this is, after all, America, the “land of the free” (meaning the “freedom” to make bad decisions and choices), no one will be coerced into health care if they choose not to be. However, if someone refuses to undergo the yearly mandatory Wellness Exam, they will not be eligible for coverage under any of the three options described above. They can either get health insurance through the small group of private-sector insurance companies that would risk waiving yearly physical evaluations in exchange for high premiums and co-pays, or they will just have to pay as they go. No healthcare professional or facility will be held liable for choosing not to render services to these people if they have no insurance and refuse to pay in advance for care. This is not meant as a punishment, but rather an incentive for people to participate in these programs in order to be as healthy as possible at the lowest cost.

Finally, the key point of all the above is that everyone will be guaranteed quality health care no matter how they choose to live, but only those who make an effort to live healthier lives will be rewarded. In addition, for better or worse, we know that the use of significant financial rewards

will work as a motivating force for people. A great recent example of this would be the overwhelming success of the Cash for Clunkers new-car program.

Step Ten - Changing Medical Training

Changing the way doctors are educated and trained will have to be addressed as well. The emphasis will be on taking a proactive, preventive approach to health, as opposed to the reactive system we have for the most part now. In this regard, the health insurance industry, big business, and the government must now combine with the medical community to get down to the business of making the necessary changes to develop a new medical specialty called Wellness Medicine.

Doctors in this discipline will be the new gatekeepers and the foundation for the healthcare system. In addition to their basic traditional training, they will also have extensive education in nutrition, vitamins, minerals, herbs, homeopathic remedies, exercise physiology, and stress management, as well as a basic working knowledge of the complementary medicine techniques that can be helpful to their patients. Their focus will not be on disease, sick care, or damage control but, rather, to promote wellness and optimal body functioning. Employing man-made medications, invasive tests and procedures, and surgery will be considered a last-resort.

It is important to note that, at the beginning, the demand is going to be so huge that there will not be enough time to get these doctors trained in traditional medical schools. Intensive Continuing Medical Education (CME) courses will be made available, whereby currently practicing physicians can be certified within a reasonable period of time in this field. Because the numbers of people getting sick will be significantly reduced, many doctors in certain specialties will find decreased patient loads, so there will be plenty of these doctors who will want to do this...not only to help people but for economic survival.

In addition, nursing schools and other ancillary programs which support the doctors in our healthcare system will have to make modifications to their training as well, based on medical school curricula. In time, appropriate courses will be made available in medical schools, as well as postgraduate internships and residency programs, in the specialty of Wellness Medicine.

As far as the government's insurance program is concerned, there will undoubtedly be areas of the country that may have a greater proportion of people enrolling in the HealthFare program than others. In order to get doctors and other healthcare personnel to live and work in these areas, significant financial incentives can be offered by the government to such people, including forgiveness of student loans, full scholarships to medical schools, and significant starting salaries. As for the nurses and other ancillary healthcare professionals needed to support the doctors, they, too, can be offered similar economic benefits.

The private sector will also have an enormous demand for wellness doctors, and they will probably be as busy as they want to be. These physicians will be seeing patients, whether they are sick or not, at specific intervals for regularly scheduled evaluations and disease-detection screenings. They also will be in charge of the yearly health physicals that will be mandatory to obtain any health insurance. If a person is sick and has to go to a specialist, this wellness doctor must always be informed and involved in what is going on. The doctor will need to make sure that the patient is getting the best treatment available, from a disease control standpoint, and is doing everything possible to promote their own recovery.

Show Us The Money

At last I come to the issue of where the money will come from. We are now spending approximately \$2½ trillion per year on health care. As I stated earlier, research clearly demonstrates that about 70% of illness and disease can be prevented, and seventy percent of \$2½ trillion is \$1¾ trillion. If just one-quarter of the people in the United States

decided to follow healthier lifestyle living (as detailed in my book), and the reduction of disease were proportionate with that figure, then the estimated savings would be in the range of \$630 billion annually. And that does not include the assured additional savings from reduced absenteeism and increase in productivity.

I read an article in *Parade* magazine about the high cost of running for president of the United States. It talked about the candidates (at the time, there were nineteen) in the 2008 campaign collectively spending a projected \$1 billion in their attempt to win the presidency. It went on to give examples of what this dollar amount could provide instead, and one of them was that \$1 billion would give essential health insurance to 250,000 Americans. With approximately 47 million uninsured Americans today, simple math tells me that just 188 times that \$1 billion would provide health care for all of them.

With the \$630 billion in savings mentioned previously, subtracting the \$188 billion dedicated to the uninsured leaves \$442 billion remaining. Remember, this is assuming that only one-quarter of the US population decide to take control of their own health and live healthier lifestyles. Even if just one-tenth of the population chose to follow the path to wellness I have set forth, the program would succeed spectacularly!

The above recommendations represent a broad conceptual overview of the basic steps I believe need to be taken to resolve the healthcare crisis that faces all of us. There are some points that I have left out and/or shortened (which are described in my book) in order to keep the length of this document within a reasonable number of pages and to respect your time. I also realize that there would be many details, modifications, and specifics to be addressed—and resolved—by a great number of “interested” parties, if this plan has any hope of success.

In conclusion, there have been several different concerns and objections that various politicians (from both sides of the aisle) and the general public have voiced over the last months relating to the

recommended healthcare reform proposals. These are presented here in no particular order of importance or degree of angst on behalf of those who have expressed them:

- ◆ The idea of more stimulus money spending, coupled with increases on people in certain tax brackets, frightens and angers many.
- ◆ The creation of a public-government-run entity as being too costly.
- ◆ Not creating such a public entity for the millions of Americans who cannot afford health insurance.
- ◆ The creation of a public entity that would ultimately lead to the demise of the private sector insurance companies, which, presumably, would be unable to compete with the government's because of lower costs and the fear of a government monopoly.
- ◆ People want freedom of choice in selecting their doctors, no restrictions for pre-existing conditions, and the right to choose their own health insurance company and/or plan if they are not satisfied with what their employer has chosen for them.
- ◆ The majority of those who have insurance say that although it may not be perfect, they are satisfied with what they have and are afraid of, and do not want, change.
- ◆ A lot of those covered by Medicare are concerned that their coverage and services will be decreased and their co-pays increased. They also are worried about long waiting periods and having necessary, and in some cases life-threatening, treatments denied.

- ◆ Many healthcare professionals and their facilities will have their reimbursements reduced, while being expected to continue to provide quality care.
- ◆ Many people are concerned about the idea that a public-run option, together with more control of the healthcare system by the government, smacks of socialism.

I think it is significant to point out that all of these concerns have been successfully addressed in the plan proposed here.

Finally, in the midst of this turmoil, it would be well to recall those words spoken by John F. Kennedy at his inaugural address half a century ago: Ask not what your country can do for you, but what you can do for your country. He would be the first to remind us that it will not be our Representatives, Senators, President or captains of industry who will save us, but ourselves, for the “real” solution to our healthcare crisis stares back at us whenever we look in a mirror. Only when we regain the responsibility for our own health, which we so carelessly abrogated to others, will this great nation begin to heal itself from within. And we won’t need a grand Marshall Plan for this to occur, merely the collective energies of our three-hundred-million-strong—and once-again healthy—American bodies!

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November 6, 2009