

**Testimony before Hearing on the Partnership for Coverage before the
Department of Health and Department of Insurance
December 5, 2007**

Elizabeth R. Rosenthal, MD

My name is Dr. Elizabeth Rosenthal. I have come to testify about my experience as a dermatologist in private practice for over 30 years. I will tell you how the current crisis in health care has affected me and my patients and my ability to practice medicine.

I grew up in a medical family: father, grandfather and many older cousins were all physicians. I went to medical school to learn how to help people stay healthy. I had no interest in running a business. Although I chose dermatology, I was never interested in the spa side of the specialty. Rather, I find great satisfaction in solving the puzzle of a troubling rash or spotting a melanoma in an early, easily curable stage. I also have had the privilege of getting to know whole families of patients spanning several generations as my practice has been thirty-one years in the same location.

But the business side of medicine has been like a creeping eruption, taking over more and more of my practice. Instead of spending time talking to patients and trying to figure out what is causing their problem, I must deal with the insurance companies or oversee my staff dealing with them. For each company there is a different set of rules and requirements for submitting claims. There are even different rules for each "product" within each plan. And these change so often that I get almost daily notices about what new card a patient must present or what new drug or procedure is not covered. If you think that patients are frustrated and confused by the maze they must navigate, we doctors are just as troubled and stressed by this mess.

When I am with a patient I want to concentrate on their problem and how best to treat it. I don't want to be concerned with whether or not they can pay for their care. If a diagnostic test is required, I want to be able to order it.

My husband, a physician at the Manhattan Veterans Hospital, often tells his patients, "One of the things I appreciate about working here in a public system is that money doesn't enter into our interaction." He knows that what he thinks is best for his patients will be covered: office visit, treatments, tests and drugs. His patients have no fear nor anxiety about not being able to afford their health care.

In our present system the real losers are the patients. The managed care companies promise that patient care is their primary concern. We all know, however, that is not the case. We know they are in the business to make a profit for their shareholders and their bottom line is their main concern. They waste millions of dollars in overhead paying people whose job is to deny care and paying huge salaries to the CEOs, in addition to the profit to the shareholders. For these private companies, 15-20% off the

total expenditure goes to this overhead. In contrast Medicare spends only 1.5-3% on overhead.

Then there is the huge problem of those who are uninsured. For them medical care is a luxury they often cannot afford. I have seen a young man without health insurance who has a simple problem: he has eczema on his feet. It is very itchy and he scratches constantly. He has trouble paying for the reduced fee I charge so he waits until the problem is severe before he come to my office. By then I see a swollen, red, oozing, crusted infected mess. Much more time and effort is now required to treat this simple problem. If he were to come as often as I urged than his eruption would be healed in a week and would never progress to the severe problem I saw.

I recall John, a teen-ager with severe scarring facial acne. He always walked into the office with his face downcast, hiding his scars. His problem was very treatable but his parents had no insurance and could not afford the medication that would clear up his skin. If insurance would cover his medication, then he would be treated for a few months, his skin would clear up. It is likely that he would continue to have a clear complexion afterwards and look at the world straight

These are a few examples of how our health care system is failing us as patients and as physicians. That is why I have joined Physicians for a National Health Program. I believe that there is no place for private for-profit insurance companies in our health care system. We need a publicly-funded single-payer health insurance plan. We already have a model of such a plan that has been working for forty year. It is Medicare. An improved, expanded, "Medicare for all" is the only way to deliver universal care at an affordable price. This would save billions of dollars and allow doctors like me to return to what we do best: treat patients. New York could be at the forefront of meaningful reform by adopting such a public-directed plan. Such a plan would be much more efficient, fair and equitable than our present system. It would be simplified, centralized and allow universal coverage without an increase in spending. It CAN be done. The time is now.

Elizabeth R. Rosenthal, MD