

[REDACTED]
EMPHASIZING THE TREATMENT OF CHILDREN WITH ASTHMA
[REDACTED]

AUSTIN, TX 78759
[REDACTED]

January 25, 1992

Mr. Bruce Collins
C-Span
400 N. Capitol St., #650
Washington, D.C. 20001

Dear Mr. Collins:

I watched the C-Span programs about health care in the United States which aired on January 20 and 21, 1992. I wish to loudly criticize C-Span for not having practicing physicians on either panel. Those of us "in the trenches" delivering medical care could better tell you what is needed to improve health care in this country than those you had on your panels. I would like to recommend that you have a program with practicing physicians only on the panel. I do not recommend that you talk to the AMA or use their representatives or any one from a medical school or large clinic. Nor should you have someone who is an officer in one of the many national medical specialty organizations. Perhaps your own physician or someone who has cared for members of your family would serve on a panel.

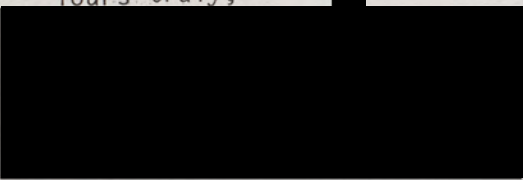
I tend to worry when someone from NFIB or some consumer group is trying to change our health care system, and ultimately trying to tell me how to practice medicine and run my business. Our current system, with all its shortcomings, is not going to be improved by labor unions, consumer groups, the Congress, or NFIB. It is going to be improved by individual physicians caring for patients and being their advocates in matters dealing with health care delivery, insurance payments and policies, and the government. Incidentally, I am not a member of the AMA, but I am a member of NFIB.


As a partial solution to the problems of those without health care insurance, I feel that physicians should care for those patients without regard to reimbursement. After all, attorneys do pro bono work. I doubt that the system would go into bankruptcy if we did that. But the federal bureaucracy could very easily bankrupt our health care system by forcing the single payor system on us, when we have no idea how we would get paid or when. I would rather see some patients at no charge than to get paid by the government for all my patients, maybe several months after seeing them. My fear about a single payor system is that once it is in place and started, it may take several months to begin to get paid for my work.

The current Medicare system, from the physician's stand point, is very bureaucratic and draconian. Because of this, I refuse to bill Medicare or Medicaid for the few patients I see covered by these plans. I simply see them at no charge. As an example of the brow-beating that we physicians take from Medicare, we each recently received a letter asking that we identify our ownership in any laboratory along with any ownership share that any family member might have in a medical laboratory. The answers needed to be returned to Medicare by a certain date. For each day that the report might be late, the fine was \$10,000 per day. Need I say more.

I look forward to seeing a panel on C-Span made up entirely of practicing physicians, particularly physicians with office-based practices, such as internists, pediatricians, and family practitioners, on C-Span in the near future.

Yours truly,

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/mbh

Wegman Bond

25% COTTON FIBER

