Without a margin, doctors cannot fulfill their medical mission.

BY JAMES CALLAWAY

A practicing orthopedic surgeon, member of the board of managers of a community hospital, former president of the California Orthopedic Association and an emeritus member of the Orange County medical community, he is also engaged in discussions concerning health care reform for years.

The question of how the Affordable Care Act will impact the health care that we provide is burning in my mind. I care about equity and efficiency concerning health care. There are two sides of the reform coin. In this context, I admit I am not a policy expert. But I do have some early francs and some early opinions about some of the preceding changes that have come in Medicare and its relationship to the ACA.

I am in my twenty-fifth year on staff at Hoag Hospital, and since 2010, the Hoag Orthopedic Institute, since joining the founding board of managers of the orthopedic hospital, I have learned the facts of how a hospital cares and pays for those who come to our emergency rooms, our EDs, our orthopedic surgery, the medical-staff to provide services to those who come to us. Sometimes, those providing the care are not the patients.

In California, over 90 percent of hospitals sustain a net loss on the care provided for Medi-Cal patients, and an even greater loss for Medicaid patient care. The question of how the Affordable Care Act will cost lives or reduce the rate of public spending growth is critically important. Those providing the care are not the patients. I am concerned that we are not directly involved in providing care will dismiss these statements as self-serving. They are not. I am concerned that we need to move beyond rhetoric to define a health care option that is efficient, affordable and equitable. This would mean trusting treatments after weighing benefits to costs and provides quality care to all patients, including low-income patients.

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