

BURDA ON HEALTHCARE

The Secret to Being a Good Healthcare Consumer Is Food

By David Burda

September 16, 2021

I'm passive-aggressive by nature. I don't like confrontation. I'm not from Minnesota, but I could be.

The latest example of this was me cleaning up after painters painted all the rooms on the first floor of our house. They did a great job. But like all painters, and given the size of the project (see, I'm making up excuses for them already), they got a little paint in a few spots where there shouldn't be paint.

Rather than asking the painters to come back and clean up the spots, I did it myself and vowed never to hire them again because they were messy. Classic passive-aggressive behavior.

That was in June. Now fast-forward to last month — Aug. 25 to be exact — and I had another opportunity to display this one of my many character flaws. This time, it was in a medical setting.



TAKE A DEEP BREATH, HOLD IT, THEN PUNCH IT OUT

I'm dealing with some allergy-sinus-bronchitis-asthma thing that's not serious but different enough that my primary-care physician thought I should see a pulmonologist. In late July — July 28 to be exact — I took a lung function test that consisted of a series of breathing tests before and after four hits of albuterol.

I passed, but the pulmonologist suggested that I should do one more test — a different test — that checks how strong your diaphragm muscles are when you tell them to breath out or breath in really hard. That was the test I was supposed to have on Aug. 25.

When I arrived for the second test, the medical technician started to explain what was going to happen, and what she described was the first test — the one I had on July 28. I politely said, “No, that’s the wrong test,” and I described the second test that I was supposed to have that day. The med tech politely said, “No you’re wrong, the pulmonologist’s order was clear,” and it was for the first test.

As the med tech set up the first test, I politely asked again, “Are you sure? Why would the pulmonologist order the exact same test less than four weeks apart? Nothing’s changed in four weeks.” The med tech politely said she didn’t know, but that was the test that the doctor ordered.

Right before the test was to start, I politely said for the third time that I thought it was the wrong test, and I asked the med tech whether there was any way to check with the doctor before we started. She politely said no, so I repeated the first test that I passed less than a month earlier.

When I got home, I emailed the pulmonologist and explained what happened. About an hour later, her office called and said that I was right, the med tech was wrong and asked if I could come in later that day to take the right test. The office person apologized for the mix-up and said (even before I asked) the hospital wouldn’t bill my insurer for the test I did that morning.

DON'T BURY THE LEDE IN A PATIENT'S CHART

When I went back in for the second test — the right test — the afternoon of Aug. 25, the med tech apologized and said she didn’t read all the way to the bottom of the pulmonologist’s order in my EMR to find out what test I was supposed to take. She said she stopped reading the order after it referred to the first test.

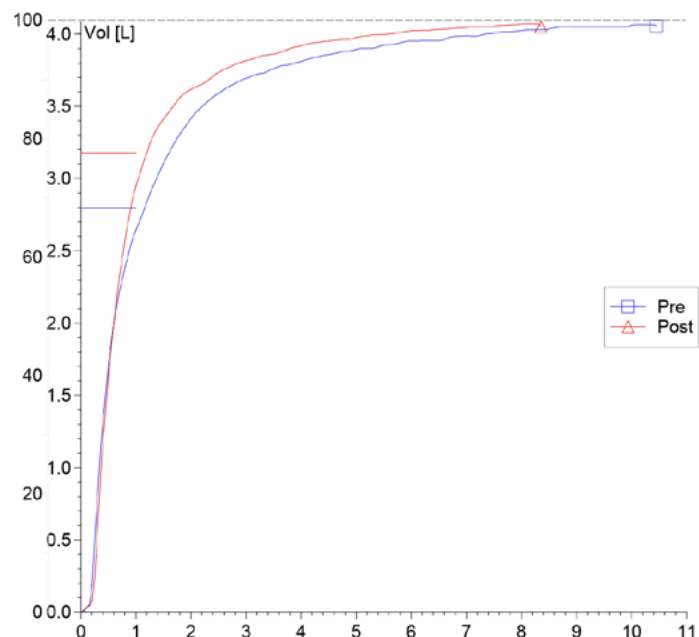
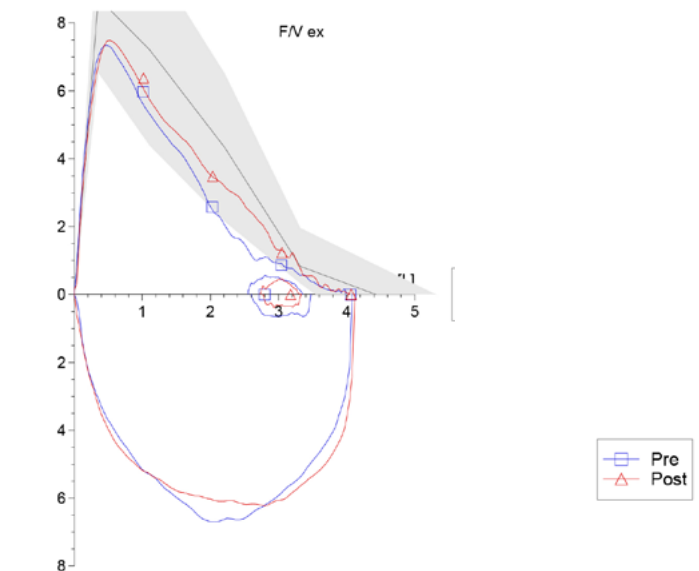
That didn’t make a lot of sense to me, and, instead of confronting her, I made a joke about it, saying at least I wasn’t there for a lobectomy. Ha, ha. Healthcare is comedy gold.

(This also shows why you never bury the lede in journalism. No one reads to the bottom of a story.)

On the ride home, I was in full-blown passive-aggressive mode. I should have insisted they get a hold of the pulmonologist. I should have insisted to see the physician’s order. I should have walked out. Woulda coulda shoulda. I’m never going to go to that hospital for care again. Everything I’ve written about why we need to be good healthcare consumers, and I couldn’t even follow my own damn advice. I’m a fraud. I have imposter syndrome. Who do I see about that?

I wouldn’t behave the same way if a server brought me the wrong food order in a restaurant, would I? Well, I would. I would eat the wrong food and tell the server it was delicious. But you wouldn’t.

That’s when it hit me. The secret to healthcare consumerism is food. The passion that people feel about getting their food order right is the same passion that people should feel about getting their care right.



THIS ISN'T WHAT I ORDERED

I live with, raised, work with, grew up with, hang with, fish with, golf with, drink with people who have done the following:

- Asked for another pop because it wasn't fizzy enough.
- Circled back and waited in a long, fast-food drive-through lane because one of a dozen hash browns was missing.
- Demanded that a local pizza parlor deliver another pizza because the cheese on the one that was delivered all slide to one side during the drive to their house.
- Demanded to speak to the chef about the quality of the food.
- Demanded to speak with the restaurant owner about the quality of the service.
- Drove 35 minutes back to a Chinese restaurant because the restaurant forgot the eggrolls.
- Insisted on a booth instead of a table.
- Insisted on a booth or table away from the front door.
- Insisted on a booth or table away from the kitchen door.
- Insisted on a table instead of a booth.
- Made a server cry by insisting that it was all-you-can-eat hushpuppy night when it was, in fact, not all-you-can-eat hushpuppy night.
- Pored over a restaurant bill to see if the prices for each item was correct.
- Pored over a restaurant bill to see if they were charged for a food item that they ordered but never made it to the table.
- Returned a steak after a few bites because it wasn't done enough.
- Returned a steak after a few bits because it was too done.
- Returned fries because they weren't crispy enough.
- Returned fries because they weren't hot enough.
- Sent back over-easy eggs because the whites were a little runny.

I could go on other than to mention that an older relative of mine drove his boat an hour back upriver to the bait shop because he thought the bait shop owner shorted him on minnows. "That doesn't look like four dozen to me!" he shouted as he turned around and sped off in the opposite direction. We didn't see him again until after lunch and the fish stopped biting.



Seems to me, all we really have to do to crank up healthcare consumerism is tell people to start treating their hospitals, doctor's office, pharmacy, urgent-care center, health plan or lab like restaurants, and the services that they provide like food. It's the perfect analogy, and it's an analogy that everyone would get because everyone has ordered food and not gotten exactly what they wanted or paid for.

All they have to do is apply the same passion to their interactions with a provider or payer as they would with their interactions with a restaurant.

BE A PATRON, NOT A PATIENT

Ask to see the price before you schedule your diagnostic test. Walk out if your doctor is running late and can't see you for another 30 minutes. Demand to speak with an office manager or department head if the service is lousy. Refuse to pay for an additional or absent treatment or a treatment that didn't result in the right outcome. Send back a home medical device that doesn't work or is too tricky to use. Insist on having your prescription meds delivered to your door instead of having to pick them up in person.

I realize that correcting a fast-food worker at a drive-up window is a lot easier than correcting a doctor or nurse. But we need to get over that mental block. The fast-food worker and the doctor have your life in their hands. I'd argue that the fast-food worker can kill you much faster than a doctor.

The next time you go to the doctor's office, urgent care or the emergency room, think of the desk staff as the greeters and seaters at a restaurant, think of the nurses as the servers and think of the physicians as the cooks (or chefs, if you like). Then imagine they made you wait too long when you or your family was really, really hungry and waiting in a hot car, and they overcharged you for the wrong food.

See what I mean? It works.

Now, it's too late for me to change. I'll eat whatever pizza is delivered or take whatever diagnostic test the pulmonologist orders. (BTW, I passed the second test, too.) But it's not too late for you. When you think healthcare, think food.

Thanks for reading.

AUTHOR



Dave Burda began covering healthcare in 1983 and hasn't stopped since. Dave writes his own column, "Burda on Health," for us, contributes to the weekly 4Sight Health blog and manages our weekly e-newsletter, 4sight Friday. Dave believes that healthcare is a business like any other business, and customers—patients—are king. If you do what's right for patients, good business results will follow.

Dave's personnel experiences with the healthcare system both as a patient and family caregiver have shaped his point of view. It's also been shaped by covering the industry for 35 years as a reporter and editor. He worked at Modern Healthcare for 25 years, the last 11 as editor.

Prior to Modern Healthcare, he did stints at the American Medical Record Association (now AHIMA) and the American Hospital Association. After Modern Healthcare, he wrote a monthly column for Twin Cities Business explaining healthcare trends to a business audience, and he developed and executed content marketing plans for leading healthcare corporations as the editorial director for healthcare strategies at MSP Communications.

When he's not reading and writing about healthcare, Dave spends his time riding the trails of DuPage County, IL, on his bike, tending his vegetable garden and daydreaming about being a lobster fisherman in Maine. He lives in Wheaton, IL, with his lovely wife of 35 years and his three children, none of whom want to be journalists or lobster fishermen.

Visit 4sight.com/insights to read more from Dave Burda.