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Most people know the saying about money being the root of all evil. The actual quotation, from the King James Version, is "For the love of money is the root of all evil". I am not sure how many agree with that statement. For me, money is a useful marker of value. It makes it easier for us to get what we value and to dispose of what we have. Imagine conducting our complex modern lifestyles by barter trade! And yet, our attitude to this essential lubricant of life and commerce is strangely ambivalent. We all need it, but we are somehow ashamed of this need. In the case of doctors, we don't even have to be self-loathing. Society will kindly loathe us if we happen to insist on receiving fair recompense for our labours.

I am writing on this because of meetings the MMA has been having with Managed Care Organisations (MCOs), Third Party Administrators (TPAs) and the Competition Commission of Malaysia (MyCC). A constant thread through these discussions has been the idea that "market forces" should determine how much a doctor charges. Market forces, according to theory, should adjust prices according to supply and demand. However, this does depend on the market having access to information. In the case of medical care and health, I think we can all agree that the problem is not a lack of information but a profound lack of comprehension.

Almost every doctor these days has felt that sinking feeling caused by the patient who drags papers out of his pocket or bag and says "I've been reading online about my symptoms". There is no lack of information out there, but it is almost impossible for the layman to process. Even when guided by their doctor, many people find it difficult to make the informed decisions that in theory are the hallmark of optimal medical care. I think even doctors find it difficult to make clear and rational decisions about their own health, especially outside their own fields of specialisation, because of

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the inevitable emotional component to being a patient. How much more difficult it must be for a layman.

Given that there is such a lack of comprehension of the available information, it would be almost impossible for there to be the sort of rational, self-interested "demand" that can help set prices in a free market. For instance, I can quite easily determine if I need another mobile phone, and make a fairly informed determination of the features I want, and then choose the phone I want. That helps set the



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price that manufacturers can charge, though of course things like the "cool" factor can also affect pricing. However, in the field of medicine there are so many courses of treatment or action that reasonable practitioners might recommend for the same set of symptoms in the same patient. The patient, unable to really understand all the information given to him, might in fear choose the most expensive and radical treatment under the impression that expensive is synonymous with good. On the other hand the more penurious or miserly might choose the cheapest alternative – which might in the long term end up more expensive, because it might be ineffective.

There is another strand to this, of course – the question of supply. As many General Practitioners (GPs) will testify, opening a new practice now is expensive, and there are many clinics vying for a piece of the pie. When a young doctor, deep in debt after renovating and equipping his clinic, sits and waits for too few patients, won't the promise of being on the panel of a

big company or MCO be too tempting to ignore? Can we blame him if, in his eagerness to be signed on, he offers a ridiculously low consultation fee? After all, he reasons, a few ringtones is better than nothing.

The more experienced GPs will see the fallacy here. You have to spend time and employ staff to see the patients – not to mention all the other overheads of private practice. If you charge too low, the consultation fees will not cover these costs. You will actually lose money seeing the patients from these panel companies and MCOs. Unfortunately, by the time our young GP finds this out, he is contractually bound to see the patients. The only way out that some see is to prescribe more drugs than needed or to mark the drug prices up (or both). Though one can understand why this is done, it is still unethical and such behavior cannot be condoned.

The best way out of this for both patient and doctor, I think, is for a minimum consultation fee to be imposed. The Competition Commission believes a minimum fee is anti-competitive, but in an environment where consumers are not competent to make an informed decision a minimum fee will protect them from being given unnecessary drugs and treatments. If the minimum consultation provides the doctor with a fair return on his time and effort, he will consider objectively the management the patient needs. On the other hand, if "market forces" and powerful companies force him to undercut himself, ultimately it will be the patient who suffers. In the long term, trust in the profession will be undermined – and at present, let us not forget, doctors are among the most trusted professionals in the country.

In this respect, I believe the medical profession stands with the legal profession. The Bar Council has minimum fees for many services, and believes that allowing undercutting would serve their clients badly. Perhaps we should work together to make the point to the authorities that it is not a good idea to try to regulate without comprehending. I only wish that we could do this more often **before** a law is passed!