

Draft chapter for Medical Travel: Hospitality Bridging Healthcare (H2H ©)

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“Pronto Care”

~A new perspective into affordable, quality healthcare~

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CHAPTER 13

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ABSTRACT

There has been an exponential increase in the demand for healthcare in America due to many reasons including aging population, increased incidence of people with chronic disease affecting almost 100 million Americans which constitute 85% of total healthcare expenditure. The baby boomers who are going to Medicare age being older than 65 years having increase demand for medical services. To add to the so many millions of Americans who are either uninsured or under insured.

To the contrary, this increased demand is not matched with increased supply coupled with ever rising cost of healthcare and more out of pocket expenses being shifted to consumers of healthcare. Many problems face the American Healthcare system including being the most expensive in the world but rank 38 when evaluated with

measured Healthcare end points. Inefficient administration of Healthcare and wasted spending could also be leading factors in the ever-declining healthcare climate. Thus, this cannot be ignored any more.

13.1 Introduction: Pronto Care

It is a beautiful story that I would like to share with the world; Hopefully, this will demonstrate that each one of us can have a positive contribution to make which will ultimately turn challenges into opportunities that could potentially do so much good.

Specifically, here, I mean the chronic, complicated and seemingly unsolvable healthcare crisis. I have witnessed a lot of devastation to both my patients and to my fellow physicians. Patients are suffering from increasingly uncontrollable out of pocket expenses (cost is being shifted to consumer responsibility) in the form of co-payments to office visits, procedures, medications, hospitalization and rising deductible costs which has reached unsustainable levels exceeding the rate of inflation for many years now!

Patients cannot afford to eat, let alone support their families because a big chunk of their earnings goes to pay for healthcare bills. It is a well-known fact that higher costs do not necessarily translate into better care. As a matter of fact, the United States is ranked the world's highest spender on healthcare but is ranked number 37 when measured with health outcome data!

This effort has picked up substantially after the world economic crisis started in 2008 when I knew then that the current healthcare model is unsustainable, as healthcare cost is breaking the bank and forcing many people into bankruptcy.

Also, the doctors got hit with denied, delayed or ridiculous payments after spending more than 38% of their time dealing with insurance bureaucracy, paper work, escalating overhead costs dealing with more regulations (including expensive electronic medical records) and in some cases, doubling working load and hours to make ends meet! So many small practices were forced to shut down as acquisition mania started and continued since 2010 which has led that for the first time in America. The independent physicians who were once the majority are surpassed by the employed physicians who sold their practices to bigger healthcare systems such as hospitals and big physician practice groups. This was the only choice left for physicians to continue to practice medicine and earn a living!

This was further complicated with the Affordable Care Act (ACA) with decreased reimbursements, high overhead and new coding systems when (ICD9 changed into

ICD10) adding thousands of new codes made it very difficult for physicians to get paid unless these physicians are in the employed category. Non insurance payment led to the closure of many small rural hospitals as well as small practice offices.

Small independent pharmacies also suffered with ACA as patients were forced to go to the big pharmacies to get their medications, not the ones they have been established with for years, making billions of dollars in profit!

Now, the new healthcare plan under the new administration will not only stop expansion of ACA but would most likely lead to its demise, and thus, beginning of 2019, the individual mandate will be lifted. Even Medicaid is being proposed to be replaced with block grants which would not be enough to give enough coverage for millions of American. Skinny Insurance which is being used as a temporary fix is lacking essential coverage and ultimately costs more!

Due to physicians losing autonomy and professional gratitude and the fact that they are being replaced with automation and lower paid staff (Nurse Practitioners), the rising problem of physician burnout (up to 66%), depression and even suicide cannot be ignored anymore!

Thus, I have developed a direct contracting for healthcare model with combined internal medicine and cardiology services with incredibly affordable pricing with transparency, great trusted care and impeccable credibility which qualified our program to be offered by the City of Tampa for Non-Medicare Retirees for three consecutive years. This has made our Affordable Quality Healthcare Program a reality that many wanted to join but many were reluctant to do so because of a concern about individual mandate, tax penalty, and the fact that they could not get out of their employer health plan.

Our constant campaign of community outreach has been a priority: educating fellow Americans about importance of Wellness, early disease detection, and management to help patients stay health and cut down their healthcare cost substantially. Many trips were taken to the State Capitol to meet and educate law makers as well about the model. We even went as far to make presentations in front of the healthcare innovation subcommittee which required long early travel in the dark in the cold winter hours!

The HB37 Bill did not pass for many years as it was blocked by lobbyists, but it is official now as Governor Scott signed into law on March 23rd, 2018. It has been an exciting journey and now is only the beginning of a new phase as we are able to reach out to help so many patients (consumers) and providers (doctors). As we build our network with prontocare.co to help fight disease and hunger, we donate 5% back to the community as a part of our social responsibility. Also, we provide a dignified model for

the practice of medicine and stabilize the immune system with natural immune supplements.

Background for Pronto Care

1. Traditional Insurance has been failing for many years with rising premiums and out of pocket cost to consumers
Similarly, doctors and hospitals are not getting paid for services forcing many places to shut down even in areas where medical services are needed most
2. Patients and doctors go through daily hassle that stressing both , spend 37per cent on paperwork and bureaucracy not on patient care
3. Very little attention to Wellness and disease prevention especially when it comes to chronic disease management which consumes 85 percent of total healthcare cost
4. Saves money to patients, employers and Governments and delivering better care for less cost
5. Average savings 5 to 10 k per person per year and you have testimonials
6. Strengthening the immune system naturally with black seed to prevent disease under daily stresses
7. Make all appropriate referrals to sub specialists for discounted cash pricing through a transparent mechanism so as no hidden cost to consumers or employers
8. Most dignified way to practice Medicine as it prevents physician burnout and improve patient satisfaction as each practice will be maxed between 600 to 1000 patient per provider with no pressure to run the patients through the mill
9. Will protect consumers from many incidents of confidential data breach which took place under traditional insurance(identity theft and fraud)
10. Pronto Care will connect you with all your needs (pharmacy, labs, diagnostics and more at great savings to help our patients and advocate for them.

Affordable Quality Healthcare Program, www.prontocare.co

13.2 Concept of Concierge Medicine

<https://www.linkedin.com/pulse/concierge-medicine-makes-sense-adel-eldin-md-facc-facp/>

Concierge Medicine is becoming more and more a viable option to traditional Medicine for both patients and physicians. Establishing direct care with the patient and getting rid of the hassle and focus on the delivery of quality healthcare for a monthly or a yearly charge with 24/7 access to the physician, same day or next day appointment with more

time spent with the patient addressing his or her concerns, making care for patients much easier and with positive experience during and after the visit. We have Concierge Medicine Program serving patients from 20 to 100 years of age in Tampa, Florida with very transparent services and fee schedule as follows

Age 20 -30 years old \$ 50 per month, with 10% off for the annual enrollment

Age 30-40 years of age \$ 100 per month with 10% off for annual enrollment

Age 40-65 years of age \$ 150 per month with 10% off for annual enrollment

Age 65-100 years of age \$ 75 per month with 10% off for annual enrollment as

Wellness Plan.

In addition, we donate 5% back to the Community mostly to fight hunger! No denial for any preexisting condition, no copayments, no pre authorization, no referral needed, just come and be treated with dignity and respect you deserve! These unique combined Internal Medicine (Primary Care) and cardiovascular disease all together makes it a One Stop Health care which so many patients like and appreciate. When patients see the real value in these services which would save them additional thousands of dollars in healthcare by aborting hospitalization or Emergency Visits in more than 95% of cases as they were managed successfully on outpatient basis on top of saving so much on Medications, Blood work and diagnostic testing, so patient really appreciates the services and the savings and you can see our testimonials on Facebook, go to www.brooksvillecariology.com

www.facebook.com/pages/Heart-Health-and-Wellness-Program/278124625560440

So, when patients do the math, one Visit to Emergency Room average cost about 5 Thousand dollars which will be equivalent to 10 years enrollment for someone between 20 to 30 years of age! And one day Hospitalization average cost 15 to 20 Thousand dollars which will equal to 40 years, yes 40 years of enrollment in my plan for the same age group, and you can do the math for the rest of the various age groups, so when the patients are educated, the decision which they will make during this tough economy will be so easy. This goes to support that Concierge Medicine program that I developed was really developed to help the middle-class hard-working Americans and dispel the myth the Concierge Medicine is for the rich! (Not true) and when you put a few dollars a day less than \$ 5 /day to invest in your health would make a great investment compared with what you have to spend elsewhere with emphasis on Disease prevention, Comprehensive Wellness and Stress management.

As Healthcare is going to continue to be driven by consumerism with current impact of social media that makes patients (consumers) more educated about choices in healthcare including Concierge Medicine. A good example of that is the positive impact of Affordable Care Act on the growth of Concierge Medicine as many big corporates such Wall mart, CVS, and soon Target will also provide Concierge Medicine in Retail Clinics as needs grows!

Concierge Medicine allows doctors to concentrate on the practice of medicine and provide a personalized quality services with their patients as they are NOT pressured compared with traditional practice (usually half number of patients seen per day), so it is good for the patient and the doctor as well who makes a fair compensation for years of education and training!

In brief, I think there will be further growth in Concierge Medicine in 2015, It makes sense and that is why some Health Insurance carriers like Cigna made Concierge Medicine available for employees and made it compliant with ACA as it made Direct primary care (Concierge Medicine) bundled with catastrophic coverage Policy. I welcome any input or opportunity to cooperate with our local Community and beyond as there is so much need out there and we have a good model to share. Have a Happy and Healthy 2015!

<https://www.linkedin.com/pulse/most-valuable-commodity-adel-eldin-md-facc-facp/>

The search continues for the next big thing to sell, after i Phones, i Pads and all the long list of high technology, is going to be the most valuable commodity, that is Health! Simply without it, you can never enjoy any of your wealth; no matter how much money you have when you are sick, you will never enjoy it and if you are in fact going to lose most or all of it on healthcare bills. As a lot of my patients share with me that they actually feel sicker when they see those bills coming in the mailbox!

As it is reported that number one cause for Bankruptcy is the unpaid medical bills as it is too expensive. But spending so much money in healthcare does not necessarily translate to better health outcome. This is evidenced by the fact that US is the biggest spender in the world on healthcare but ranked number 37 when measured with clinical outcome data (which is the bottom line)!

So, there has been a lot of research about (cost effectiveness) in so many top Universities such as Harvard and others to calculate the cost of Healthcare dollars for various diagnoses. For example the cost for Hemodialysis care for End Stage Kidney Failure patients, cost of implanting a cardiac defibrillator to shock the patient out of a lethal heart Rhythm called Ventricular Tachycardia or Ventricular Fibrillation and help

jump start the heart, cancer care, cost of open heart bypass surgery or a coronary stent, all very costly, and develop appropriate guidelines for the management of patients without breaking the Bank! One important factor is being proactive in disease prevention and wellness. Only doing a spot fix or acute disease management without addressing the entire head to toe care has caused so much waste in the overall US healthcare dollars. As a matter of fact, according to the AARP article in Nov 2012, there is estimated a total of \$765 Billion of Wasted Spending in Healthcare divided as follows

1. \$ 55 Billion wasted as Missed Prevention opportunities.
2. \$65 Billions wasted as Medical Fraud
3. \$ 105 Billions wasted on Excessive prices
4. \$130 Billions wasted as Preventable errors/mistakes
5. \$190 Billions wasted as Insurance and bureaucratic costs
6. \$210 Billions wasted as Unnecessary services

So, after full diagnosis of the current unhealthy healthcare system, that should be followed with effective treatment strategy, as everybody is hurting including doctors, providers, patients and the entire community!

That is why 4 years ago we started our Low Cost Quality Healthcare Program to restore the direct doctor-patient relationship without third party interference or hassle and with mutual trust and respect working together to achieve the best health results, save patient thousands of dollars, decrease stress, abort or limit costly hospitalization without compromising the patient healthcare. We are very proud to share with you outstanding results for so many of our patient who enrolled in our Low Cost Quality Healthcare Program all available on our website, www.brooksvillecardiology.com

So, Now is the time to switch from an old ineffective costly cycle of healthcare model and join in our program of Disease Prevention, Comprehensive Wellness and Stress management. As you start 2015, think about investing in your health between 2 to 5 dollars a day by joining as the rate of return on your minimal investment is phenomenal and guaranteed for you to be able to get up, go to work, take of your family and be a healthy productive member of the society.

So, do invest and protect your most valuable commodity, Your Health!

13.3 Business of Healthcare (Direct Contracting)

<https://www.linkedin.com/pulse/direct-contracting-healthcare-adel-eldin-md-facc-facp/>

Whether you are a big employer such as Boeing with thousands of workers, or a small, medium -sized business, individual or a hospital. They all win with Direct Contracting. When companies and providers have direct relationships via clear and transparent agreement with regards to pricing, healthcare services and quality of care delivered. The bottom-line that there is significant cost saving without compromising that quality of care. As primary care or combined Primary care /Cardiovascular sub-specialty services in our Program could provide up to 95% of the patient care for a flat rate which is only a fraction compared to the traditional coverage.

As all businesses are looking to save money on healthcare cost, they will be considering the alternative model (self-funding for healthcare by direct contracting). The growth of direct contacting explained in part by saving money, but also gets rid of the stressful relationship between providers and Insurance companies as while delivering the care, providers complain that they do not get paid or too little, too late which will strain their operating cash flow and eventually force them to shut down. Direct contacting is also good for the consumer looking for a break.

Employer direct contracting may also include innovative approach to cut costs to include (Medical Travel or Domestic Medical Tourism) where employees will travel out of town or State to another part of the country to have their elective surgery done (Travel Surgery Program).

Direct contracting with Medical Providers already proved to help self-insured folks and is a viable alternative to ever escalating costs with the insurance-based model. It is simple, when services are delivered directly to businesses/consumers, this will help control unnecessary expenditures and minimize the administrative cost associated with traditional insurance.

Putting emphasis on Wellness, disease prevention, even chronic disease or acute illness management will translate to savings to consumers and employers alike. We have zero co-payment for any visit or testing done and people like that as this saves them big!

Adding on-site clinics will help to save costs and minimize loss of productivity when employees have to take time off work to see medical care. The data is positive and very encouraging proving lower cost, improving care and satisfaction.

Now, the focus would be to reach out to the community and educate small, medium businesses, big employers and individuals that direct contacting is the way to go as a good strategy which they should seriously consider choosing for their healthcare.

<https://www.linkedin.com/pulse/retail-clinic-growth-its-impact-healthcare-adel-eldin-md-facc-facp/>

Retail Clinics have had a substantial growth over the past few years and are expected to have an even faster growth rate in the upcoming years.

Retail Clinics are booming as consumers seek new ways to get convenient, cost effective healthcare which constitute a formidable challenge to traditional practice. As a matter of fact, some insurers like Kaiser Permanente partnered with Target to Staff retail Clinics in some California stores.

Up to 60% of patients seen in Retail Clinics do not have established Primary Care Provider with more than 10 million patient visits to Retail Clinics every year mostly utilizing low acuity care for self-limiting conditions. But with convenience and reassurance, most consumers find those clinics to be a much cheaper alternative than being seen in the Emergency Room.

The Affordable Care Act (ACA) which added millions of patients into the already strained Primary Care Capacity, created great opportunity for the Retail Clinics. Most of these Clinics are concentrated in the metropolitan areas but Tele Medicine is proposed to provide care for the rural communities in America giving 46,000 current physician shortages which will hit 94,000 by 2025!

Drive-Thru style of healthcare offered by Retail Clinics in Shopping Centers, Malls and Supermarkets was actually preferred by Millennials compared to senior patients. The majority of these Clinics are staffed by Nurse Practitioners not Physicians and because of the possible delay of few days to be seen by the physician due to shortage and scheduling issues, consumers now choose to go to Retail Clinics as walk-in and be seen the same day.

In addition to physician shortage, the Affordable Care Act, and higher out of pocket cost are all factors fueling the growth of Retail Clinics. So, patients prefer low cost visits (average \$75) per encounter rather than very high out of pocket cost when seen in the Emergency Room. Patients are also getting to be more educated consumers of healthcare as they shop around and compare prices for various healthcare services. Some Retail Clinics are taking advantage of managing chronic diseases as they

constitute the biggest burden of healthcare cost (up to 86% of total money spent) and are getting the Electronic Medical records connected with other Health-System affiliate to capture the chronic disease management market and filling this gap in healthcare delivery. Our Concierge Medicine model offers patients another viable option to deliver Cost effective Quality Healthcare with convenience and personalized continued Care. Thus, we can count on more and more Retail Clinics growth but hope to have a positive impact on lowering overall healthcare cost and working in harmony with traditional physician offices, Concierge Medicine Providers and hospitals to best serve our patients!

<https://www.linkedin.com/pulse/support-small-business-adel-eldin-md-facc-facp/>

Every business was once small and then grew and became a big business. This is the natural healthy sequence of events. Small business is usually referred to as the engine of the economy as 60-80% of the new jobs come from small business. Small businesses employ 57% of the country's private workforce and pay 44% of the US Payroll. Unfortunately, only 50% of these small businesses survive the first 5 years, increasing the burden on small businesses with minimal or no reserve. For example, in 2009, and average small business went bankrupt every 8 minutes as 70% of small businesses are/were owned and operated by a single person.

Recent challenges to the small businesses have sharply increased during the current phase of surge in merges and consolidation.

For example, there are now four major financial institutions (Citibank, Wells Fargo, Chase, Bank of America) out of previous 37 financial institutions only two decades ago. Similarly, big insurance companies are merging, so there are maybe only three or four choices for patients to choose from. The same would apply for retail shops, and local restaurants which are now being replaced by big businesses that invested in technology which makes it easier for people to order online. And since only big businesses can afford these technological advances, people usually flock towards them due to the extra services. Now also a trend towards limiting number in outpatient surgery centers as they compete with hospitals and big medical centers.

Recent articles have echoed the looming death of small business in America and also found small business optimism is crashing as all businesses need working capital which may not easy to access with limited options and prohibitive cost.

On the bright side, some realize what is going on and now are trying to give support back to small businesses such as Shop Small on Saturday and others to keep the traditional engine of the economy working to keep overall economy alive and well. Small

businesses are going through transformation to adapt to the changing economic climate and challenges through innovation, entrepreneurship, and adopting new technologies and reaching out through social media.

There is always a niche for small business where consumers find satisfaction in quality customer service and personalized care.

We have adopted these concepts to make small business have big impact on people lives through improved health outcome, saving big for individual patients, and small and medium sized businesses through establishing the (Direct care Medicine) as we can very much share the value of affordable quality healthcare that does not break the bank. This has been proved over the past few years in our program and being replicated all over the nation.

This holds true for all independent physicians who have been running their small businesses for a long time but now realize the importance of unity, cooperation, and transparency as they owe it to their customers (patients). This will be the healthiest response to thrive during changing economic climate.

<https://www.linkedin.com/pulse/unsustainable-rise-healthcare-cost-adel-eldin-md-facc-facp/>

Healthcare cost is rising at an alarming rate and disproportionately to income earned. Most Insurances have sharply raised their premiums and similarly the pharmaceutical companies did the same even with the (generic drugs) which prices have been raised up to 25, and 75 times compared to what they were only 2 years ago. Additionally, in many cases these drugs are frequently denied even when attempting to get preauthorization for critical medications which patients need as the insurance and pharmaceutical companies control them jointly.

What has become clear now, people realize that the threshold of sustainability of this traditional model has already been surpassed and people cannot continue to pay more for their healthcare simply because they cannot afford these escalating costs. Middle class in America has shrunk into half and has sadly moved to poverty level over the past decade.

So, the mandatory insurance could be passing only the cost of millions of dollars in taxes and fees to finance the expansion of the healthcare coverage to the slipping and economically strained middle-class Americans.

Then comes another issue of (Risk Adjustment) which would require insurers and healthier members to make payments to companies with (sicker members) to share risks and cost of insuring people with many medical problems to secure their profitability. Similarly, Health plans for individuals and small businesses were raised with rates ranging between 4.5% to 16.5% with more out of pocket responsibility shifted and dumped on patients!

According to recent New York Times Article (<http://www.nytimes.com/2016/01/04/us/many-see-irs-fines-as-more-affordable-than-insurance.html?>) , many would be happy to pay the I.R.S penalty by intentionally skip enrolling in the Affordable care Act which will be much less than the cost of insurance. For some healthy people, the combined cost of premiums and deductibles would exceed \$ 12,000 per year.

That is why so many dropped insurance all together as their insurance did not cover most or all of their medical expenses, as they had to pay out of pocket in addition to paying insurance. So, many people are taking the risk of not being insured simply because they cannot afford it. They would adopt healthy life styles, eat healthy food, exercise regularly and try to minimize stress as they educate themselves by going to the Internet to learn about reducing their risk and save money (Do It Yourself Style).

We believe as we enter the 6th year of our Direct Care Medicine Program is the way to go by achieving the goals of Disease Prevention and total Wellness. With patient education, advocacy and saving thousands per person every year through discounted medications, lab work, and diagnostic testing and aborting costly ER visits, hospitalization, and procedures. Yes, Quality Healthcare can be truly Affordable, Effective and hassle -free through direct physician-patient relationship without third party control or unsustainable rise of healthcare cost which have devastating effects on the entire community.

<https://www.linkedin.com/pulse/risk-sharing-versus-shifting-adel-eldin-md-facc-facp/>

Are you ready and prepared yet? The risk is being shifted and being (dumped) on the consumer, that is what is happening and became official. It is seen in many cases whether with the new credit card machines, if you do not update your machine, the risk will be shifted from the financial institution literally to become laid on your shoulder, similarly if you do not (code it right) referring to the ICD 10 coding system, you will be delayed and denied payment for your professional medical services even in some cases with hiring professional billers that are well trained in this transition, turning again all the responsibility on the provider who are most likely will have most of the denials and delays in payment!

Similarly, with subprime mortgage crisis, when someone who may not qualify brought home or property and then the bubble burst, and the economy went into a recession, then millions of Americans lost their homes and properties with foreclosures that devastated millions of families and businesses with effects of which still being felt throughout the nation!

So many people struggle to make ends meet and good luck jumping those hoops to make it on a day by day basis, with a significant crunch in the cash flow cycle which is going to impact so many industries, for example the medical offices give business to many suppliers of medical equipment and supplies, hires staff, pay taxes and contribute to overall economy. But those small entities that contribute up to 84% of the total engine of the economy, may come to full stop as the cycle of business is not moving and forcing so many to early retirement or bankruptcy! On the contrary the bigger providers are merging together (for example Anthem merger with Cigna and Humana merger with Aetna insurance companies) to get stronger and richer with stronger control of the market leaving consumer with less options and more risk shifting on the patients with more out of pocket expenses, copayments for office visits, testing, deductibles to the point that people are refusing the coverage simply when they add up what they have to pay on top of their insurance, they will not have enough left to feed their families or pay bills .

The rising trend of risk shifting is not good for consumers as there is no balance and sense of security left anymore. Everyone is afraid to lose their shirt if they get sick! This is unsustainable and is bound to fail. We have to restore a well-balanced model when we all enter into a fair and transparent partnership with all our providers and go back to fair risk sharing rather than devastating and stifling risk shifting to the consumer with more options. That is why we advocate direct care model to cut unnecessary cost of third-party involvement and advocate on patient behalf to put patient first rather than send them to the cleaners!

<https://www.linkedin.com/pulse/amazon-going-healthcare-adel-eldin-md-facc-facp/>

Our unhealthy Healthcare system is getting now new and aggressive players, as American sickness is becoming a huge Multi-Trillion Dollar Business. Now Amazon is going into Healthcare in direct competition with CVS and Walgreen. Also, Walmart and Uber are moving in. Walmart has closed 154 stores in the United States as its sales were adversely affected by Amazon online shopping from home!

Because somebody did their homework of Healthcare Market Analysis, the results showed as technology is getting better and better every day, you can have up to 40% of house calls done via Tele Medicine. Similarly, on-demand services with delivery of Flu-Shots successfully for example in 35 cities by Uber Health was tried in a pilot phase of 2000 people who received Flu-shot at home rather than going to doctor office or clinic, which used to be a frequent reason to make the trip to the clinic.

Similarly, Wal-Mart has built 100 on-site Retail Clinics (like CVS Minute Clinic staffed by a Nurse Practitioner, not a doctor to cut down overhead and maximize profit. Now, if you go to Amazon.com and check out the Health Care Categories. You will see as if you are shopping in a virtual pharmacy with First Aid, Eye care, Feminine Care, Pregnancy test, baby supplies, skin products, pain relief, Anti-reflux Medications and the impressive list goes on. Not only that, but nutrition supplies, Medical Equipment, Health and Wellness, Essential Oils up to 400 pages to shop from!

Medical Equipment include splints, Mobility aids, wound care, respiratory, urological care, Ostomy supplies, fitness devices, occupational and physical therapy aids. Sexual Health with all associated supplies and even Funeral Services!

Yes, Caskets, Cremation supplies for human ashes and more all are included. Thus, there is an Amazon Superstore for Medical Supplies in Florida where large populations of Senior Citizens and retirees live!

Medications as well as Blood work services also included with delivery even with Drones to remote locations and on long weekends and Holidays. Diagnostic testing for Colon Cancer screening (non-invasive) with Cologuard for those 50 years or older done as well. It has so many advantages over conventional colonoscopy as it is done at home, no procedure-associated risks such as perforation, bleeding needing surgery or blood transfusion, no special prep, do not have to take time off work with high accuracy up to 92% of colon cancer and can detect 69% of pre-cancerous lesions. It is FDA approved to test Stool DNA for colon cancer. All related educational material and Videos are also available for sale. Similarly, Diabetes monitoring supplies, blood pressure monitoring and related educational material. Diagnostic Imaging with CT scan or MRI or Ultra sound study is available.

Amazon also carries various catheters, infusion pumps, IV bags, Infusion tubing, sutures, and hospital beds. Now, you start to see that consumerism is going to be the main driving force shaping the Healthcare market. Amazon understands that aging population will generate more healthcare services and opportunities. It is also driving mergers and consolidation in the Medical Supply industry with recent 24-billion-dollar deal as Becton-Dickinson acquiring C.R. Brad!

Now, Amazon and Microsoft going into fierce competition not just in the cloud, but also in Healthcare market. Amazon is working with Electronic Medical Records, virtual Medical visits and applications for devices such as Amazon Echocardiogram!

Microsoft is doing the same with Health Vault and specific focus on pro-active Wellness and big data analysis to guide decisions. Amazon is going Global as well with videos /Music expanding to Middle East buying Souq.com which is online Market Place exactly as Souq in Arabic means Market place. Through its e-Commerce platform, Amazon has more than 130 million visitors to its site every month!

Well, now there is a big concern about Amazon expressed by President Trump in a Tweet saying (Amazon is doing great damage to tax paying retailers, towns, cities and States throughout the U.S are being hurt, many jobs are being lost) and replaced with automation and digitally-run e-Commerce Business.

Well, fasten your seat belts as we are going through tough rides and watch events shaping future of healthcare unfold!

13.4 Patient Education and Advocacy

<https://www.linkedin.com/pulse/help-patients-take-charge-health-adel-eldin-md-facc-facc/>

It sounds like everyday conversation with my patients regarding various choices of therapeutic options including medications for various medical conditions, procedures or surgeries. The discussion that usually takes place about the established guidelines regarding the specific issue with its indications, safety profile explaining side effects which could be potentially experienced as well as the expected benefits of being complaint with intake of this medication.

After all, a well-informed patient is much more likely to be complaint with diet, exercise, intake of medications at the prescribed times and the route of administration. He or she will have better outcome with less cost. The opposite is true as well; patients who do not take charge of their health are mostly non-complaint with more adverse clinical outcome which is obviously very costly as well

Simply, patient engagement is a key to better healthcare and can make a big difference from being stable and doing well medically to going back to hospital with its subsequent high cost. So, patients are encouraged to shop for good Doctors, good Hospitals and Surgery Centers to compare Services, prices and Customer Service because they are the customers and without them, there will be no healthcare industry.

So, this is how it should work, doctors will share their expertise and knowledge with their patients informing them about what needs to be done (proper nutrition, life-style changes, such as stop smoking and avoid excessive drinking, regular exercise and take medications when indicated? Certainly, patients have to do their homework for the plan of care to work. This is why (Direct Care Medicine or Concierge Medicine) is the best way to achieve the desired health goals, spend the needed time without rushing patients, answer their questions and give them reassurance and psychological support which they need as well.

I found throughout my medical career if you show your patients genuine concern about their health, patients could feel and appreciate that concern and respond in a very positive way. For example, some patients have been smoking for 1-2 packs per day for 40-50 years as I never give up on any one and take the time to explain the devastating health effects due to smoking and its associated cost. After a candid conversation with the patients, we had as high as 99% success rate in getting people to quit smoking and stay off smoking.

Those patients when seen in follow up visits feel so good about their accomplishment and show desire to share their experience with others. Technology can play an important role (for example sending reminders) to patients to review their Medical Notes (Open Notes) which helped patient engagement, compliance and outcome.

With Direct Care Medicine, there is more time spent on actual patient care rather than Computer care checking many boxes to justify payments. Thus, empowering patients to be active participants in their care and encourage open communications channels with the healthcare team through technology with Tele Medicine will certainly lead to achieving the goal of better healthcare delivery with less cost!

<https://www.linkedin.com/pulse/empathy-what-we-need-adel-eldin-md-facc-facp/>

Empathy is defined as identifying with and understanding of other person's situation, feelings and motives. In Medicine, patients seek empathy from their doctors. Thus, the whole point of empathy is to focus on the patient, build trust which will help patients to manage or deal with (bad news) and improve outcomes. Listening more attentively and showing genuine concern to what the patient is saying and expressing what they are going through will certainly help successful diagnosis, treatment and outcome and cut health care cost.

This saving comes from limiting waste like repeated unwarranted testing, risk management and minimize burnout and litigation which can adversely affect not only the care-giver but also the institutions they work for as frustrated patients seeking help and understanding never got either or both. This need is seen in the teachings at

Universities such as Duke and others that teach doctors about how important but overlooked skill, Empathy.

Teaching Clinical Empathy which is ability to communicate understanding of the patient situation and willingness to help. A healthy doctor-patient relationship is becoming more important in boosting patient compliance to treatment plan as a good doctor is defined as the one who understands people and communicate well with them. It is all about patient satisfaction and experience that is closely linked to better outcome, incentives and reduce physician burn out as they are more satisfied professionally as well. This make Concierge Medicine the ideal model for practice of medicine as 90% of healthcare needs can be delivered on outpatient basis, no time- pressure, concentrating on quality personalized care rather that volume-based care where patients feel no body has time to listen to them, as they are being rushed in and out without having the opportunity to communicate with their care providers.

Empathy is needed in all aspects of service-based professions such as banking, law, insurance, etc. no wonder most of big companies have included Empathy in their corporate training manual to improve business operations by enhancing customer service and cut cost from potential lawsuits. So, automation and technology which is growing very fast will not replace the human touch and effect as Empathy involves the human interaction and cannot replaced with automation. That is why Clinical Empathy is being taught to both providers and medical students as only medical Knowledge and technical skills are not enough to fulfill patient needs and have a positive impact on overall healthcare system.

<https://www.linkedin.com/pulse/do-you-practice-honest-medicine-adel-eldin-md-facc-facc>

Do you practice evidence-based Medicine? Or you feel you were put in a situation where patient best interest is not being looked at as first priority. But rather as revenue generating for job security especially in the employed physician category!

To put it all in prospective, here are real examples to illustrate this challenge. A 58 year old female patient with persistent dry cough, a tickle in the throat who has seen multiple consultants including Ear, Nose and Throat specialist, then allergy specialist, then a Gastroenterologist (stomach doctor) who saw patient and performed upper Endoscopy and gave patient anti-reflux medication, but cough continued and a fourth consultant was added being a lung doctor, He did work up including CT scan of the chest which was negative and so was the multiple allergy testing done was negative.

Then I saw the patient and went over carefully her medication list that she was currently taking and Bingo, it was clear that these symptoms were obviously due to side effects of one of the medications she was taking causing her dry cough and tickle in the throat

symptoms. This medication belonged to a class of drugs called ACEI, or Angiotensin - Converting Enzyme Inhibitors which after being switched to a different class of medications called ARB or Angiotensin Receptor Blockers that does the same therapeutic benefit without the side effects. Wow, the patient after the switch of medications, dry cough, throat irritation and the need to clear her throat every couple of minutes miraculously went! Only, if this was done earlier, could have saved tens of thousands of dollars of unnecessary healthcare money and procedures and achieving better outcome for only few dollars spent instead!

The same can be seen in cholesterol lowering therapy that prevents progression of atherosclerotic plaques or hardening and clogging of the arteries which if left untreated will certainly lead to subsequent clinical events such as Angina or chest pain first on exertion and if left untreated will lead to Unstable angina and acute heart attacks, strokes and peripheral vascular disease leading to gangrene and amputation. That is why we all should address these issues seriously and aim to achieve target numbers for cholesterol and triglyceride lowering by diet, exercise, life style modification with smoking cessation, limit alcohol intake and medications to prevent close to 80% of cardiovascular morbidity and mortality affecting millions of Americans and costing billions of dollars.

86% of every healthcare dollar spent goes to chronic disease management which is largely preventable and achievable on outpatient ambulatory basis with empowering patient through education and advocacy.

The fast changes dynamics of healthcare will dictate the adoption of evidence -based Medicine for cost saving while improving outcome. Similar examples including unnecessary IV therapy including vitamins such as B12 and others, iron, fluids, antibiotics, etc. which can be given orally effectively unless than patient has a malabsorption syndrome and cannot hold anything down due to uncontrolled vomiting or diarrhea which is the only justifiable indication then. This will help patient to avoid unnecessary complications such as IV site infection with the risk of introducing Staph infection into the blood stream especially in cases where patient has hardware like pacemakers, defibrillators, artificial heart valves, or joints. This risk increases with every time the integrity of the skin is compromised with needle and catheter insertion plus the so many trips that patient make with some of whom are elderly, frail and cannot drive. Adding enormous stress on patients making these trips to justify billing the third parties for these services. And in many cases, the patients are stuck with the bill for unnecessary IV therapy or its complications putting additional stress on the already stressed patient. Believe me, those patients tell me their unfortunate stories.

In brief, patients are fed up with the non-sense and they need and appreciate their honest doctor who will tell the truth and support them no matter what!

13.5 Community-based Healthcare Solution

<https://www.linkedin.com/pulse/community-outreach-program-adel-eldin-md-facc-facp/>

Investing in the community is one of the best things anyone can do. Being useful, helpful, a problem solver, an up lifter and a lifesaver all together make a difference in people's lives which is badly needed in our community these days. So, going out and giving free healthcare to the less fortunate, giving food, mentoring young students and future doctors, mending fences among friends all will change the prevailing culture of doom and gloom into hope and happiness. The fact that you wake up in the morning in good health, safe in your home and have your sustenance for that particular day then you qualify to be on top of the world. Seventeen years ago, coming to Florida from New York City, pioneering the community outreach program which started with going off to different business, churches, and local chamber of commerce, home owner associations and have many educational programs for the community. And build strong relationships with many wonderful diverse groups and organizations, this is giving back to community programs such as going back to school, Youth Educational Services (YES Program), Thanksgiving Food Basket program, free health screening and in turn over the years these programs have helped develop direct relationships with my patients.

It is a very encouraging sign that yes patients are mostly no longer passive, and they are searching for both (trust) factor as well as the most economic way to fulfill their healthcare needs. Patients do feel sincere care from the heart rather than (production line medicine) which has built relationships that have overcome many barriers including language and culture. So, the local story is being now replicated globally as patients (consumers or clients) are searching for quality of care, compassion and transparency as we are now connected via Internet and social media everywhere. We certainly hope that our local community outreach program will impact positively on global healthcare delivery. It is the same local message however now it is being circulated across the globe.

<https://www.linkedin.com/pulse/bringing-heart-back-medicine-adel-eldin-md-facc-facp/>

As we observe the month of February known as the Heart month, as well as Black History month, and even known for Valentine's Day. However, also in in February this year, we celebrate the fourth anniversary of our Low-Cost Quality Healthcare with its

initial vision, to “Bring the Heart back in Medicine”. We have been continuously working hard over the course of four years to fix the ills of unhealthy healthcare delivery system. It should be driven by doing what is right by patients, address their needs, but sadly the main driver for the healthcare system is (Profit)!

Doctors who dedicate their life to being trained to take care of patients are supposed to be the ones who control 100% of health care dollars as no patient can get out of bed unless there is order written by the doctor. Similarly, tests, procedures, and even type of meals are only done according to doctor’s orders. However due to the change in the healthcare system, doctors have been pushed to the bottom of the chain of the healthcare industry. This ended up in harming patients in many ways.

For example, when acquisition mania started in 2008 ended up in 50% of independent physicians to be forced to work for corporate. This in turn caused consumers to pay for the rising cost of health care. In addition, this also created an environment where the employee has to serve the employer’s interest in order to produce and help gain profit. However, the employee ultimately gets reimbursed based on the famous formula of Relative Value Units, (RVUs) they produced.

For example, for Emergency Room Colleagues, there is pressure to admit patients to help generate revenue until recently where when CMS (Center for Medicare Services) started to impose penalties for patient readmission to the hospital. In an instance where a patient suffers from Congestive Heart Failure, they would have to pay up to \$ 2500 per readmission. This is the penalty for a patient being readmitted within the duration of 30 days for another episode of Congestive Heart Failure. In 2015, the penalty is expected to increase even more because of a strained budget. This model has not proved to be effective, as people have begun to realize that ‘you cannot keep kicking the can down the road any further’. Serious steps must be taken to face the ever-increasing healthcare cost that is running individuals to bankruptcy and potentially our current healthcare system as well!

According to a recent published article in The New York Times, the importance of disease prevention and outpatient delivery of most healthcare services will constitute significant saving up to 30 billion dollars simply when the same services done in an outpatient setting. This will get rid of the big gap in pricing between in-patient and outpatient for the same test as usually the price difference is being dumped on the patient to pay out of pocket.

In the Internet Era, most patients or a member of their family have already done some sort of a quick Google search about a medical condition they might be experiencing. They read about the required testing and therapeutic options, after that, they will shop

around for the best price and will question any additional cost because of the economic pressures that so many are facing nowadays. Patients will go to 'Dr. Google' to help them with their condition as seen in an instance where a patient will simply type in their symptoms into a search bar and will receive all information needed to relieve the symptoms however this did not work and usually patients will ultimately be admitted.

Now with digital technology, there are applications that will help physicians take care of patients. For example, there are applications that pick up on abnormal heart rhythm and can differentiate between a serious heart rhythm and an insignificant rhythm thus helping in patient triage.

So I believe the middle of the road approach which will best serve the patient (consumer) and also change the current culture of looking only at bottom line, will be a hybrid approach which will allow patients/ consumers to get most of their healthcare needs 90-95% on outpatient basis with emphasis on Disease prevention, Comprehensive Wellness and Stress Management, all elements needed by everyone and keep the catastrophic coverage to cover any emergencies that could happen!

The key elements of future healthcare is Low Cost which we have proven in our program over the past four years that is real and achievable with so many testimonials on social media to share their experience with our program, but never the less, all this was achieved without compromising the quality of healthcare!

Patients do appreciate such programs as they shop around for the best prices for caring affordable healthcare provider that will serve them, save them plenty, educate them and advocate for them as well. Also, as we look into those, we served we noted how we made a positive impact in their life, took the added stress away, and helped give back to our community fight hunger especially during this cold winter days as there is so much need for it out there!

It is a dignified model for the patient, provider and the entire community as we strive daily to 'Bring the Heart back in Medicine', not just during the Heart month, but rather all year round!

13.6 Nutritional Aspects of Healthcare

<https://www.linkedin.com/pulse/more-compelling-reasons-end-food-deserts-adel-eldin-md-facc-facp/>

Food deserts were first described in the United Kingdom in the 1990s as low-income neighborhoods with no access to nutritional food. If you happen to be living where local residents do not have access to a supermarket or a store with fresh fruits and vegetables within one mile, you might be living in a food desert. Thus, individuals are forced to either eat at fast food restaurants or a convenience store with soda, chips, high carbohydrate meals leading to high incidences of heart disease, diabetes, obesity and increased adverse cardiovascular events such as acute heart attacks, strokes and mortality.

Food deserts affect more than 23 million Americans with a majority of low-income status individuals. So, geographic location as well as economic status determines where food deserts are; these food deserts create eating habits that end up with the consumption of food that causes inflammation in the body which mediates all disease. Thus, the importance of an anti-inflammatory diet comprises of fresh fruits and vegetables, in addition to no red meat, no processed food or chemicals. The best anti-inflammatory diet is the Mediterranean diet, which is rich in Omega 3 Fish Oil and other anti-oxidants well.

The list of anti-inflammatory food would include green-leafy vegetables, Chinese cabbage, beets, broccoli, blueberries, pineapple, salmon, walnuts, flax seeds, chia seeds, turmeric and ginger. Food deserts are characterized by residents who have little to no access of transportation, communities of color, low income communities, communities that are highly saturated with liquor stores and fast food outlets which serve high sugar, high salt, and/or high carbohydrate and processed food(s).

Unfortunately, instead of dedicating more funding for food security, there have been budget cuts of more than \$150 billion dollars in programs such as SNAP (Supplemental Nutrition Assistance Program), Meals on Wheels and Medicaid. Other factors such as social determinants of health (such as low income) heavily co-exist and affect access to healthy diets in the Food deserts!

A fresh approach to this critical problem of food deserts could help save billions of dollars in preventable healthcare!

Solutions would include making nutritious food available even in smaller outlets and institutions to prevent many chronic diseases related to poor nutrition in food deserts. At the same time, minimizing the huge amounts of wasted food in America as to create less disparity in different socioeconomic communities. According to the *Guardian Report*, roughly 50% of all produce in America is thrown away which translates to 60 million tons a year, or 150,000 tons of food a day! In other words, 30-40% of the entire

US food supply is being wasted, reaching a value of \$160 billion dollars in wasted food! The American family of four would average \$1600 worth of discarded food products.

Additionally, this enormous amount of wasted food is contributing to global nitrogen pollution, thus having a direct relationship to global warming, and its impact on the environment. Bacteria in organic waste products produce methane gas which is 25-72 times more potent than carbon dioxide and contribute to global warming. Thus, minimizing the wasted food would not only help solve the food desert but eliminate hunger in more than 50 million in America, and save our environment. This will decrease nitrogen emission from wasted food products which contributes to floods, hurricanes and wide spread destruction with increased frequency here in the United States and around the world.

Simple solutions of minimizing food waste should be implemented to fight hunger and acute or chronic diseases resulting from poor nutrition. Having a number of large refrigerators to keep food fresh and safe for consumption, have available transportation to access the healthy food (especially in the food deserts), is pertinent in order to provide access to high-risk communities. This also will increase food security and boost our national security by keeping our country safe from devastating consequences related to climate changes such as hurricanes and coastal flooding.

After eliminating hunger in America, statistically, there would be still so much food left, which can be donated to food-starved places around the world like Africa, for example, as it is estimated that there are 795 million people in the world who are undernourished. This kind gesture can avoid so many conflicts, uprising, and instability which are caused by people that are hungry and cannot find food to eat. It would be a win-win strategy.

Successful companies in Europe that handle the food waste recovery use mechanical separation technology as food items can be also utilized for feeding animals as well. Some innovative companies in Europe are using food waste in energy companies which use thermo-mechanical technology to process food waste and packaging into dry stable bio-fuel!

There is an increasing trend in hospitality industry to have Green Restaurant certification to be environmentally friendly with food waste recycling policies. We can work together implementing these solutions, ending hunger, preventing disease, saving billions of dollars in food, using technology for food waste management to feed more people and animals, reducing risks of devastating environmental and geopolitical changes, and turning food waste management into a great business strategy here locally and globally!

<https://www.linkedin.com/pulse/eat-healthy-stay-adel-eldin-md-facc-facp>

Very Interesting recent article published in JAMA (Journal of the American Medical Association) found a link between consumption of high calorie subsidized food and the subsequent development of the obesity and many related Cardiovascular and metabolic diseases and their complications.

The study used the seven subsidized food items in a (Subsidy Score) including corn, soy beans, wheat, rice, sorghum, dairy and livestock as a percentage of total calorie intake. Then, various clinical parameters were used including Body Mass Index (BMI) which is a simple ratio of waist circumference to height, C- reactive protein (a marker of inflammation) blood pressure, HgA1C which is an indicator of blood sugar control, and (NON-HDL) cholesterol which is basically the bad cholesterol. Also, avoiding any other possible contributing risk factors such as smoking, physical inactivity, poverty, and food insecurity.

The study showed with higher consumption of high calorie subsidized food items; there was higher incidence of heart disease and diabetes, all related to obesity resulting from consuming those subsidized food items. The current cost of treating those diseases and related complications would reach \$ 300 Billion dollars annually, which would exceed the money spent on subsidizing these high calorie nutritional items

This study supports the current nutritional recommendations to limit carbohydrate intake, use fresh fruits and vegetables. Also use unsaturated fat to replace saturated fats and trans-fats. After all, you are what you eat. So, if you eat healthy food, you will stay healthy and if you eat unhealthily, then will lead to many chronic illnesses, exactly like the car to run well, it needs good gas!

In our Concierge Medicine program, we put big emphasis on proper nutrition, use food as medicine to strengthen the immune system thus preventing disease, provide energy and improve quality of life.

<https://www.linkedin.com/pulse/you-what-eat-adel-eldin-md-facc-facp/>

Some people used to say, "It doesn't matter what you eat..." but now almost everybody knows that it does actually matter. It can make a big difference- eating healthy or eating unhealthy shows that it affects your overall health.

Because it costs so much money to be sick, especially if you ended up being hospitalized and having procedures done will now make a dent in your financial health

and could adversely affect you now and in the future, simply because of consuming wrong food. It's like using the wrong gas for your car!

The evidence is overwhelming with the impact of diet and proper food on your health. For example, using the dash diet (low-salt diet that helps controls blood pressure), or the Mediterranean diet, which showed a positive effect in lowering blood pressure and the rate/risk of strokes. Simple components include extra virgin olive oil, omega-3 fish oil, fish that is barbecued or sautéed (not fried!), beans, hummus. They are starting to become popular in supermarkets as the word is getting around because it affects close to 70 million Americans with hypertension (which leads to heart disease, heart failure, strokes, and renal failure requiring dialysis- especially among the African-American population). The good news is, that we can do something about it. We can change the natural history of these diseases and improve both morbidity and mortality, resulting from hypertension.

Similarly, there are about 20 million American with hyperlipidemia (elevated cholesterol and triglycerides) that is related to clogging of the arterial tree from head to toe. A process of the hardening of the arteries called atherosclerosis, which can clog the carotid arteries leading to strokes, clogging coronary arteries leading to heart attacks, and clogging kidney arteries leading to kidney failure, and clogging of the arteries of the lower extremities causing leg pain, claudication, and ischemic ulcers (that would progress to gangrene) which would lead to amputation.

Also, poor nutrition leads to other diseases entities like diabetes, obesity, cardiac arrhythmia, arthritis, sleep apnea, and many cancers (which would become chronic diseases claiming more than 85% of healthcare dollars spent).

Luckily, there is a cultural change of learning about healthy nutrition, adopting conservative lines of therapy that are less expensive and non-invasive, without compromising the quality of healthcare delivered with measured clinical endpoints.

For example, "Courage Trial", that was published in *New England Journal of Medicine* have shown for stable coronary artery disease that would have equally effective therapy; one of them being optimal medical therapy and lifestyle modification with exercise and diet was found to be equally effective as expensive, and invasive coronary angioplasty with similar clinical outcome data.

Also, the adoption of clinical guidelines that will have evidence-based medicine for various therapies and interventions only to be reimbursed by insurance companies if they are in accordance with the guidelines. Not only that, but evolving technology, just like every aspect in our lives, also, in medicine have new technology like CT

angiography which is noninvasive to actually reconstruct 3D images of the coronary arteries and which have replaced conventional invasive cardiac catheterization in many instances. Also, MRI is evolving and improving to replace the need for many invasive surgeries as well.

Even guidelines established for the intermediate blockages in the coronary arteries to be studied first with physiological flow study before putting a stent as a knee-jerk reflex as it used to be done in the past!

So cost is becoming an increasingly significant factor on which patient gets a specific therapy for a similar outcome and the choice will go with the less cost and less invasive therapy. And, if someone decides to do procedures that don't match the established guidelines in addition to not getting reimbursed may also get flagged.

Over the past five years, we have demonstrated better outcome for less cost to the patient who enrolled in our Health and Wellness program in addition to patient education an empowerment as a part of a comprehensive approach to healthcare delivery. Your health depends on your decision of what goes into your body.

Wellness

<https://www.linkedin.com/pulse/all-wellness-folks-adel-eldin-md-facc-facc/>

For more than three decades of being involved in delivering Healthcare in the USA, it has been always my passion to introduce real solutions to our unhealthy Healthcare system. Here are basic facts to start with.

We spend the most money on healthcare but ranked number 37th in the World according to healthcare outcome!

We face many challenges relating to implementing the needed change of culture into Health and Wellness. . Main elements for culture change to take place are Clinical, Business and policy elements and I have been fortunate to be involved in all three elements to varying degrees. Hopefully, this will add a critical element in providing real healthcare solutions to provide better care for less cost.

I believe, we need to promote concepts of Free Healthcare Market including (direct contracting) between patient and doctor without third party hassle and abuse to both.

The cash flow is what keeps any business viable and would not thrive without positive cash flow (more money coming in that going out) to also allow future growth and

operational development. This is case of Concierge Medicine which brings back the direct relationship between Patient and Doctor for better health outcome and less money spent. Promoting the concept of early risk factor detection and intervention to prevent future health problems which are certainly getting more expensive every day. Simply, Wellness is great business for Employers, Employees, individuals and the entire society.

It also helps to keep the small businesses alive, (traditionally) small businesses are considered the main engine of the economy contributing to 84% and Corporate contribute to 16% of total economy.

Unfortunately, during the past 10 years this ratio flipped and thus many small practice (businesses) have shot down due to nonpayment by the insurance companies or get very little that does not cover the operational overhead forcing many physicians to go out of business, early retirement, declare bankruptcy, or change to non-clinical positions at a time that our Nation is suffering from critical physician shortage!

Or simply have physicians consumed with paperwork adding to the physician burnout which is affecting more than 60% of physicians nationwide. This is clearly adding harm to our unhealthy Healthcare system.

It costs an average of one million dollar to recruit and train a replacement physician and costs an average of one million dollar to settle a malpractice claim originating from burnout physician. This will add financial strain due to added costs

The issue of Automation of Medicine and increase in rate of Physician extenders including Nurse practitioners and Physician Assistants can potentially help to ease the work load on physicians in a supportive and collaborative way rather than replacing physicians with lesser pay providers which would affect bottom line dollar spent!

This is important to point out that doctors would be always needed for delivering quality care and meet demands of patients who for the most part request to see doctors only!

The proper use of healthcare Information Technology to facilitate, co-ordinate the patient care cannot be over stressed. Technology can help reduce healthcare disparity, promote patient education, engagement, improve patient safety, reducing errors and help implement the practice of evidence-based Medicine.

The current model of Healthcare is better described as (Sick Care) with quick fix and neglecting to address the root cause of the problem till it comes again or other diseases arise.

Thus, we must switch our attention to Wellness and Disease Prevention by early detection and Intervention. This has been proven to be economically successful across the board to patients, employers and the whole Nation as healthcare cost is consuming about 20% of the GDP.

Thus, smoking cessation, staying physically active with regular exercise, limiting alcohol intake and proper nutrition are critical goals in achieving better health outcome with billions of dollars saved in cost!

This will prevent many chronic diseases such as high blood pressure, high cholesterol, diabetes, obesity, arthritis, cancer and chronic pain with associated depression from the disease process and the high cost involved leading to further economic devastation resulting in many cases in Bankruptcy.

The status of our healthcare and economy are closely correlated. So, restoring the healthy status of both which will decrease the added stress on low and medium class of hard-working Americans. Help their respective employers become more productive economically by keeping them healthy on the job.

Ultimately, consumerism will play a key role in the choice of healthcare providers, products and services. Consumer-driven healthcare would also increase demand for Healthcare advocacy to help patients (consumers) to navigate through a very complicated system with complicated choices of coverage and providers as more consumers take charge of their health management through active education and engagement to empower patients (consumers).

Consumerism would also drive completion towards better-personalized care, price transparency and overall experience and hopefully the consumer will be the winner at the end of the day.

The goal is to help alleviate the pain of many Americans resulting from ongoing healthcare crisis. By helping patients, doctors, economy and the entire community by implementing successful Health and Wellness program through Direct Contracting.

<https://www.linkedin.com/pulse/promote-culture-prevention-adel-eldin-md-facc-facp/>

The concept of prevention is not practiced in so many aspects of our day-to-day life for which a real culture change is needed.

For example, viewing the most recent tragic mass shooting in Parkland High School is a continuation of similar tragic events that have taken place. Since Dec 2012 when Sandy Hook Elementary School shooting killing 20 children, there has been 1607 mass shootings killing at least 1864 and wounding 6459 fellow Americans.

According to a study done at Harvard University, published in the (American Journal of Public Health) which showed strong relationship between violent homicides and fire arms ownership, similarly with high rate of suicide. This strong relationship is true of firearm ownership and homicide even among law enforcement officers (American Journal of Public Health 2015; 105:2042-48).

Preventive measures which proven effectiveness in reducing gun-related death/violence include Universal background check for high risk individuals such as felons, those with mental disorders and violent behavior and drug abusers. Banning high-capacity magazines, bump stock and limiting purchase of a firearm for only those above 21 years of age as Technology can easily accomplish that effectively.

Thus, decreasing the number of guns (a study in 2013, found 357 million guns in America which has increased since then surpassing the total number of US population!). It is clear now that gun violence is a Major public health risk affecting everybody, not just the kids who are getting scared going to their schools to learn in a safe environment.

The value of prevention cannot be overstated. Preventing disease for example comes with eating healthy food, drinking clean water, regular exercise, avoid harmful agents such as tobacco, high salt, sugar intake, excess alcohol as well as management of stress through Wellness and Relaxation Programs This will save lives, money and improve quality of life

A good example of successful public health preventive strategy is wearing seat belt while driving and vaccinations to prevent spread of diseases.

Prevention and management of stress would lead to a better outcome and enhanced productivity which will prevent depression and suicide. Prevention and management of pain by avoiding obesity, overweight, doing regular exercise, balanced diet, physical therapy, acupuncture, message therapy, cupping and non-pharmacologic therapy which will be a great alternative to opioid therapy which have been way over prescribed for obvious financial gains killing thousands of Americans annually and costing billions of dollars.

Prevention of poverty by improving education, job training as there is a strong association between low socioeconomic status and drug abuse, violence.

Prevention of STD s (sexually-transmitted diseases) and their complications by avoiding high risk behavior and promote abstinence.

Prevention can help avoid most of the 76 million cases of food poisoning in the United States annually leading to 60,000 hospitalizations and 1800 deaths. Proper sanitary food handlings, thorough washing of fruits and vegetables, proper packaging, cooking and thorough hand washing of all food handlers would dramatically reduce food poisoning.

Prevention of fake news as it has become another public health risk, since false news spread much faster than real true news, thus adversely affecting health, businesses and even our democracy itself. Solution is promoting truth and honesty in all aspects of our life.

Prevention of hospital-acquired serious infections including Penicillin-resistant Staphylococcus Aureus or MRSA), Catheter-related infections, ventilator-associated pneumonia, catheter-associated urinary-tract infections by following sterile techniques and early administration of effective therapies and measures to contain and control infections.

Fall prevention among the elderly who are at high risk for falling especially those with advanced degenerative joint disease or those with unsteady gait by taking precautionary measures to minimize falls and its adverse impact on social and economic well-being.

Preventing wars by engaging in active diplomacy and dialogue aiming at peaceful resolution of conflicts rather than engaging in escalation.

The same message can go on to reinforce culture of prevention with early effective intervention strategy that works well, thus will save lives and money by maintaining the well-being of the entire community.

Ignoring our problems by not implementing the appropriate preventative measures will only result in additional adverse outcomes measured by every metric out there!

<https://www.linkedin.com/pulse/invest-your-health-adel-eldin-md-facc-facp/>

Everyone agrees that without Health, any amount of Wealth has no value. Also, everyone hopefully agrees that Physical Health is closely linked to Financial Health. So, adopting healthy life styles at homework and everywhere have been proven to be a good investment to combat stress, lower incidence and complications of chronic diseases, improve productivity and minimize waste. This means also job security with good health versus losing the job over being too sick or unfit for the job health-wise!

Physical activity incorporated in the daily schedule decreased incidence of many obesity-related diseases such as heart disease, arthritis, diabetes, high lipids, Sleep Apnea ...etc. By Limiting time spent watching TV, as it was found that more than 3 hours daily watching, was associated with increased incidence of premature death (could be related to snacking while watching). Similarly, sedentary office work was found to be associated with 5.3 million deaths globally higher than 5.1 million deaths globally due to smoking!

Research from Eastern Kentucky University showed companies spend more than \$300 Billion dollars on healthcare and lost productivity due to missed work as a consequence of workplace stress. According to the survey used, 73% of those surveyed reported psychological symptoms such as being irritable, angry, nervous, lack of energy and emotional outbursts. Also 77% of those surveyed encounter physical symptoms such as fatigue, headache, upset stomach, feeling muscle aches.

Many companies adopted solutions such as personal Resilience Program, Yoga Classes in addition to having regular social events to help manage workplace stress. The good thing here is that no one can go on ignoring stress and the importance of reducing it as no one can get rid of 100% of stress!

Even when people approach their retirement age, they are often reminded to plan for covering medical expenses and put aside saving to cover health expenses calculated an average person above 65 years of age to reach about \$200 thousand dollars.

We believe in the Concept of Comprehensive Health and Wellness being physically, emotionally, socially and spiritually will be the ultimate investment. That is why we implemented those Wellness Components in our Concierge Medicine Program which has kept enrolled members healthy, saved each one thousand of dollars (between 7k to 10k per person enrolled per year). The Program kept them away from going to Hospitals as none of these members was admitted to hospital over the past 7 years and patients feel great especially for those who used to be admitted to hospital two to 4 times a year on an average every year, not anymore. It is simple, we work with our patients to improve nutrition, have regular exercise routine, get rid of bad habits such as smoking

and excessive alcohol consumption, limit salt and sugar intake and have a positive approach to daily challenges which will ultimately minimize stress. Having direct contacting between patients and doctors for trusted care will simplify life, cut cost, get rid of unnecessary hassle causing stress during challenging economic times for so many hard-working middle-class Americans. They patients pay so much out of pocket with deductibles, copayments and added (patient responsibility portion of the bill on top of their Insurance premiums). Just about all patients complain of the unbearable costs. So, the advice here to all my patients and everyone reading this important blog is to pay cash and save so much money and headache. This is our solution for healthcare crises for individuals, small and medium size-Businesses to get relief felt immediately after making a small investment in your health. Our Wellness program is time tested, with proven efficacy and recession prof. You, the consumer now will make an informed decision about your investment.

13.7 Leadership Role in Healthcare

<https://www.linkedin.com/pulse/physicians-must-lead-healthcare-adel-eldin-md-facc-facp/>

February is the American Heart Month; physicians are at the Heart of Healthcare and they should be the brains leading Healthcare delivery as well. One major element in the current Healthcare crisis is the almost complete absence of the physician leadership in healthcare! Physicians sitting on the top of the pyramid as they are in charge of 100% of the healthcare dollars, as there is no hospital admission unless patient is seen by a doctor or have approved and attested the note if seen by a non-physician staff being a nurse practitioner or a physician assistant. There is no surgery; procedure or a treatment plan is valid unless approved by a physician. Any decision for specific device or therapy, discharge planning, follow up plan is worthless unless approved by a physician. Any medical facility cannot get paid for medical services delivered unless it has the physician signature. Even if not physically on site, the physician will be set up with a remote access to sign any of the forms or consults with (E-sign). The physician gives orders when to give or stop a certain medication. The physician writes orders if patient can eat or kept NPO (Nothing by Mouth) and what to eat being clear liquid diet, soft mechanical diet or regular diet with diabetic (low calorie) or cardiac restriction (low salt, low cholesterol diet) or when a patient has renal failure (low protein, low potassium diet). In some cases, physicians would allow only parental nutrition through a feeding tube or Intravenous line in certain cases when patient cannot have food by mouth. Doctors make decision if patient is allowed to have any activity as to being allowed out of bed or to have activities restricted. You now see what I mean, the physician approval

and signature to all orders including verbal ones. The physicians are the one who discusses with the patient and family the medical condition prognosis and explain adverse events to help family in making the best decisions regarding healthcare and decide on the code status in terminal and critical cases. Everyone else job is to help the physician delivering the best care possible to patient. That is why the physician will lead a team which consists of (nurses, physician assistants, pharmacy staff, nutritionists, social workers, infection control, quality and risk management staff and occasionally students).

Unfortunately, due to lack of physician leadership, physicians have suffered major losses in their independence, autonomy and ability to make the proper decisions for the patient care. When majority of physicians who became employed workers and became totally helpless as they are frequently reminded, they are just employees and must do what they were told to do even if not in the patient best interest as it is all about the bottom line. Physicians are frequently reminded that they could be replaced anytime and for any reason (such as not generating enough revenues for example) and in some cases terminated without cause!

This has resulted in an alarming high incidence of physician burnout that is threatening the quality of healthcare delivery to patients and being able to serve them well. Physician must unite to regain the natural role of Healthcare Leadership after many years of training, testing and mentoring. This could be accomplished by simply being you. Don't be consumed with what the others are doing, excel in what you know and do the best job possible. Physicians have to adapt to changes through a continuous self-improvement and education to stay competitive. Stop complaining and always think solutions and turning problems into opportunities to do well. Be flexible by accepting a new niche, consider switching into the Wellness World, Disease Prevention and changing the current sick care or spot -fix model of healthcare to get better outcome with less dollars spent!

A good clinical example is focusing on the (Mechanical) approach to treat Coronary Artery Disease by using Balloon Angioplasty or implanting Coronary Stents as a spot-fix and focusing on the mechanical part such as choosing the proper wire type to cross the stenosis (blockage), which guiding catheter to use, which device to use to de-bulk the lesion to make room for the stent (metal mesh used as a scaffold to keep artery patent) to be implanted and prevent the arterial re-narrowing (recoil) which happens frequently after using POBA (Plain Old Balloon Angioplasty). Then the choice of stent mostly now drug-coated with a polymer that prevent cellular replication (endothelial hyperplasia) which is another mechanism leading to re-narrowing of the artery at the stented segment with recurrence of symptoms of Angina (Effort-induced Chest Pain, relieved with rest.) That is mostly done without addressing the entire arterial tree as if stents

were inappropriately implanted, this will create a new disease which may require additional stents leading to eventual need for Coronary Artery Bypass Surgery after failed (full-metal jacket) of multiple stents placed. This can also lead to repeated Angina attacks, heart attacks and subsequent Congestive Heart Failure adding to already high cost healthcare bill. Even after Bypass surgery, the bypass grafts can get clogged with further stents placed which may fail leading to a redo Coronary Artery Bypass Surgery in few years due to progression of Coronary Artery Disease!

Evidence from clinical trials showed aggressive risk factors modifications to control hypertension (High Blood Pressure), High Cholesterol, Diabetes, obesity, regular exercise which could be as simple as walking, improving diet to limit carbohydrate intake and increase fresh vegetables and fruit intake. Abstaining from Tobacco and alcohol abuse, illicit drugs, pork consumption and processed food will have a profound effect on overall health, cardiovascular and cancer mortality as well.

A new risk factor recently reported to be associated with increased cardiovascular mortality is the degree of Economic Health! Yes, Income Volatility and the incidence of cardiovascular mortality direct relationship is well established!

Physician leadership is critical in educating the public about Wellness to avoid added financial stress to the physical or mental illness, empower patients and certainly make a healthy partnership to involve patients in healthcare choices. To have their skin in the game by making them aware of significant potential savings for them when adopting Wellness strategy rather the old model of (sick-care strategy) as to see the doctor only when you get sick. Patients will listen to the doctor they trust and the one who shows sincere empathy and compassion. Working together with physician leaders, we can bring the Heart Back in Medicine!

<https://www.linkedin.com/pulse/critical-role-physician-ceo-adel-eldin-md-facc-facp/>

Physicians are considered to be the ideal leaders in healthcare as they have been through tough training for many years and they are in charge of 100% of the healthcare dollars spent. They know medicine but unfortunately, they lack management skills such as strategic planning, negotiation, budget and financial decisions.

There is a big need for these skills to be taught and doctors to be trained to fill this gap. For better healthcare management, physicians have to be involved and engage more with extra mentoring. Only few physicians take on the leadership positions and become successful. Those physician leaders will communicate, coordinate, advise and lead so as to achieve their target goals of their particular institution.

In addition to their clinical skills, they need Information Technology skills and conflict management skills which they will be better suited for. As the non-physician CEO may sometimes be treating doctors as their adversaries rather than a physician CEO who will treat fellow physicians as partners alleviating a lot of friction especially when doctors feel that have lost autonomy as they are constantly told to increase (productivity) by increasing the number of patients seen during the work day with some doctors do not get to have a lunch break or even go to the bathroom because of the increasing work load and tasks assigned to them. Then comes other intrusive issues as they are told what medications to order (the cheaper ones even if patients cannot tolerate them, what tests to order and even which sub specialists to refer to!

A real story comes to mind about a very well-respected colleague who had a very big private practice for about 24 years and when the acquisition mania started few years back, hospitals started buying small and medium size medical practices and those doctors became hospital employees. Once this senior physician who became a hospital employee and requested a physician-to-physician communication within the company regarding issues related to patient care. He was intercepted by a young administrator (younger than the physician son) who found about it and came reprimanding the senior physician that he should not have bypassed him, and the doctor has to go through him (the administrator) first!

When the senior physician explained that this is a physician to physician discussion and that the administrator is not a doctor, then the administrator simply fired the good doctor on the spot and the doctor was given only 15 minutes to clear his desk and take his belongings, but he was not allowed to have access to his patient charts from his own private practice that he spent his life building as they became hospital owned and was the good doctor was left out in the cold!

Needless to say, he suffered a very severe psychological trauma and he now had to start from scratch all over again more than 25 years later. Similar stories have been reported with some physicians resigned and went out to start their private practice one more time. Some, with Concierge Medicine to escape stress and mental torture of being controlled by a non-physician CEO who may not understand or appreciate what doctors have to go through on daily basis taking care of their patients.

Physician CEOs in addition would appreciate autonomy that fellow physicians need to make decisions that would be good for patients and good for business most of the time. They will be better qualified as trained leaders to lead towards evidence-based, cost effective healthcare which we are all need now more than ever.

Working with Florida Law makers

<https://www.linkedin.com/pulse/good-news-florida-adel-eldin-md-facc-facp/>

It is about time for good news for Florida; with so many people in the Sunshine State who are either uninsured, non-insured or cannot afford current health insurance anymore, the Direct Primary Care (DPC) Bill passed in the Florida House by 97-10 Vote. This is really great for small and medium-sized businesses as they cannot retain good employees or attract new hires without offering healthcare coverage. The current costly insurance premiums make it almost impossible for small business owners to afford employees, let alone offer other benefits to employees. This will certainly break the bank for small businesses struggling to thrive!

Now, there is another option to choose without going through the insurance bureaucracy, on top of the hassle and ever so rising out of pocket expenses added with paying high premiums already. Direct contracting is great for physicians and their staff avoiding the daily stresses with insurance companies' denials, paperwork, filling forms (which can consume about 35% of the time that could be spent on taking care of patients). Direct contracting offers personalized service to keep patients healthy so that patients will not go broke with so many expensive bills. Today's system can become a further nuisance, especially when patients get sick and end up in the Emergency Room or even get admitted to hospital. That is where there is an exponential increase in healthcare costs which will add further stress on patients who are already economically strained.

Governor Scott finally signed DPC Bill into law on 3/23/2018, which comes after many years of perseverance and hard work. The overwhelming majority of lawmakers agree on its importance and positive impact on all Floridians. The Bill got additional traction after the shrinkage of ACA (Obama care) and "skinny insurance" that does not cover much as an emplacement.

Support Bill HR 37! | Adel Eldin, MD FACC FACP | Pulse | LinkedIn

Some individuals were inspired and took leadership role to sponsor the bill even after many previous failed attempts to pass it. I am personally very proud to be a part of this effort for years; I have made many trips to Tallahassee and talked to several lawmakers to explain the rationale and benefits. I gave an example of a model that we started eight years ago with emphasis on early detection of risk factors and management to prevent future adverse events and save thousands of dollars to patient, millions of dollars to local economy, and billions of dollars to the nation.

Patient Testimonial

<https://www.facebook.com/Heart-Health-and-Wellness-Program-278124625560440/?fref=ts>

The signed HB37 by Governor Rick Scott was to amend the Florida Insurance Code to clarify that the DPC arrangement between patients and physicians does NOT constitute the making of insurance and consequently will NOT be regulated under insurance laws.

Thus, the direct agreement between patients and doctors, while describing the services offered outside the traditional insurance model which is currently going from patient to insurance to provider. However, the direct agreement makes it patient to provider directly and keeps the insurance out of it.

A different kind of doctor's office: Patients pay directly, keeping ...

This will help to bring back the healthy relationship between patients and doctors, with less cost to patient, better outcomes, and less hassle for both parties. It broadens the access to healthcare by empowering consumers to choose the best service for the best price. Improving accessibility and affordability through direct contracting will enhance the medical experience for both sides; The doctor(s) will spend more time with the patient(s), rather than pushing the patient(s) out under many pressures emanating mainly from insurance-related pressures, and thus creating a more friendly environment at doctor(s) office, as patients pay directly for services they know they are getting with transparent pricing coming directly from the doctor and their staff.

<https://www.facebook.com/hearthealthandwellnessprogram/videos/10210909771772302/UzpfSTI3ODEyNDYyNTU2MDQ0MDoxOTk1NTc2NjUwNDgxODg3/?fref=ts>

Additionally, DPC will help management of acute and chronic disease with reduced need for costly and repeated emergency room visits, and costly hospitalization admittance and its related procedures. DPC model is certainly very innovative in reducing cost, which is becoming a critical element in healthcare. The rising rate of healthcare cost is much faster than the rate of inflation, which would compel local and state governments to adopt such a model for cost containment. Therefore, DPC is good for all stakeholders, not just patients and doctors. We would certainly welcome the opportunity to collaborate with those who are interested in starting or adopting such a great model for dignified practice of medicine to doctors and patients.

<http://brooksvillecardiology.com/?page=ARTICLES/Preventative%20care>

We also have used this model to help promote patient total wellness through education, active engagement, empowerment, and advocacy. That is the way to go Florida!

<https://www.linkedin.com/pulse/support-bill-hr-37-adel-eldin-md-facc-facc/>

Four days ago, on January 14th, Bill HR 37 was presented in Tallahassee by its main Sponsor Rep. Castillo Known as Direct Primary Care, DPC and was approved by the House and now moves to the State Senate for approval. Everyone realizes that there is a Healthcare crisis all over America and certainly in Florida as it costs so much, and many millions are still without affordable coverage. That is why, we move away from acute care to proactive care with emphasis on Wellness and Disease prevention and Stress Management to save money.

As for the growing trend, moving towards open Healthcare Market delivering fair, transparent, competitive market with regards to price of services.

So, this is accomplished by empowering the patients with tools and advocate for patients to better care for themselves to reduce the main cost driver in Healthcare being the (chronic diseases) by early detection and intervention.

Looking forward to joining other 13 States which approved Legislation which defines DPC agreements or Services as outside the Scope of State Regulation (Washington, West Virginia, Oregon, Utah, Arizona, Louisiana, Michigan, Mississippi, Idaho, Oklahoma, Kansas, Missouri, Texas). Florida having more than million plus uninsured and so many providers are unable to take of patients as they are overwhelmed with bureaucracy, paperwork, overhead includes costly billing services. With DPC, the doctors will focus on delivering quality care to their patients and spend more time with them thus achieving higher rates of customer sanctification without the third-party control or hassle. Thus, putting value instead of volume to the Healthcare.

You can read the entire HR37 bill and watch the entire presentation in the links below <https://www.flsenate.gov/Session/Bill/2016/0037/Analyses/h0037a.SCAHA.PDF>
<http://thefloridachannel.org/videos/page/2/>

Join me and so many great providers in the State of Florida to urge the Senate President and leadership to pass HR 37 and do not repeat in 2016 what happened in 2015 as the Bill stopped at the Senate. We want to be able to provide the service that so many Floridians who need at a price they can afford, save patient and the State so

much of Healthcare dollars and improving outcome. We know because we have the model to prove that and have been already active in 13 other states already!