What does the future hold?

Chip Carson
University of Texas Health Science Center at Houston

Disclosure

• I have no pertinent conflicts or financial associations.

Where do we go from here?

• We have talked about our history.
• We have talked about what makes us unique.
• What do we have in common with other medical specialties?

What do we have in common?

• We are all physicians
  – The same general medical knowledge.
  – The same initial hospital-based clinical learning year.
• This gives us a seat at the table that we may not be taking advantage of.

What challenges do we share with other specialties?

• A health care system run amuck!
  – A system dominated by operatives who do not practice medicine or provide health care.
  – A system that eats 60-90% of the resources put into it, leaving only 10-40% for actual care.

What challenges do we share with other specialties?

• Increasing regulation by government and insurance companies and risk-shy institutions.
• A highly litigious practice environment.
  – High professional liability insurance costs.
  – Increased licensure and maintenance of certification requirements.
What challenges do we share with other specialties?

• A desire to provide excellent patient care, to save lives, and to improve general health.

What challenges are specific to OEM?

• Low specialty recognition.
• Insufficient output of new trainees to address the need for Board-certified OM physicians.
• Fewer opportunities to expand our practices into the traditional preventive medicine arenas.

What opportunities may exist?

• Disaster preparedness (natural disasters, terrorist attack, etc.)
• Affordable Care Act (ObamaCare)
• Increasing numbers of medical practitioners returning to corporate practice.
• Workforce wellness promotion.

Disaster preparedness

• Since September 11, 2001 many new systems have been put in place to improve our response to and ability to learn from disaster situations.
• Some of these are in government, but many are within business and the voluntary sector.

Affordable Care Act

• The ACA has elevated prevention services to level equivalent to other medical provider services.
• Are we taking advantage of our skills in this area to produce centers of excellence in community/workforce/school illness prevention?

Practitioners returning to corporate practice

• The big/wealthy/long-term employers are starting to get it; that medical consultation in-house can be a very valuable adjunct to regular business planning and execution.
• They are asking for our help.
• There is a huge volume of businesses that have not yet received that message.
Workforce wellness promotion

• Very strong and increasing evidence that every dollar spent through a properly designed health promotion program returns a larger amount in health benefit cost savings.
• This is true for companies, for patient populations and for communities.

References


Our future is what we make it!

References