## Tomorrow's O&P: A Survival Guide, Part 2...continued from page 39

"The Canadian and European government-provided healthcare systems sound good, but the care is not there," Janisse adds. "Many are forced to use the 'brown paper bag' method of getting care: paying a doctor under the table to have their surgery done quicker, or to get a better doctor, or to make sure they don't lose their place on the E.R. schedule and get bumped to the end of the line."



Hovorka

However, Christopher Hovorka, MS, CPO, LPO, FAAOP, director of the master of science in prosthetics and orthotics program at the Georgia Institute of Technology (Georgia Tech), feels that universal healthcare may offer some answers. "If you look at Canada's system, there are certainly advantages: All the costs of medical care are paid into the system by all wage earners. In the

current American system, the millions of folks who are uninsured or underinsured create a dilemma. What happens to the quintessential person with obesity and comorbidities such as hypertension and the potential risks for stroke, diabetes, and arthritis?"

Hovorka also points out the philosophical aspect. "If we as a society don't consider a fundamental change in our attitudes and beliefs about caring for the sick and the elderly, who's going to do it? How will that neglect impact the fiscal and physical health of the community? To illustrate his point, he refers to an example in the Atlanta area. "The county hospital had been in a financial

crisis," he says. "To address the situation, the Atlanta community realized if the hospital was not supported and failed, that other "for profit" hospitals would be impacted through a dramatic rise in uninsured and underinsured patient visits. As a result, the community stepped up and re-structured the community hospital administration and infused the needed capital to prevent its collapse. The community realized that if folks in need of basic healthcare today are not provided for, their health may deteriorate to the point that emergent or catastrophic care is required via treatment through the Emergency Department. The costs for emergent or catastrophic care exceeded the costs for preventive and maintenance care." In a Nutshell



Kirk

Thomas Kirk, PhD, CEO of Hanger Orthopedic Group sums up the issue. "In the short term, our biggest concern in this economic crisis is our patients. If they start losing their jobs, the natural fallout is that they lose their insurance and start neglecting and jeopardizing good healthcare. So the short-term influence of unemployment is that we may

see some deterioration in the O&P business.

"In the long term, the country has set itself up for huge deficits that may result in tax increases in a couple of years. Higher taxes can put crimps in people's disposable income. And on top of that, insurance is very expensive."

Hovorka agrees that things are bound to get tougher. "In this down-turning economy, belt-tightening is one obvious answer, which will continue in healthcare. Healthcare policies will continue to restrict or reduce reimbursement on a greater number of services, particularly with regard to high-tech and very expensive treatments.

"We still have limited reimbursement and coding for some of the new O&P technologies, and I think there will be more...skepticism by the third-party payers when deciding whether to provide reimbursement for a fancy bells-and-whistles device, when the conventional knowledge or attitude may be that the patient's function may be optimal with something less. This is where evidence-based care will be critical in the rehabilitation and O&P professions. The O&P community has the opportunity to provide evidence to demonstrate that optimal patient outcomes may require more than the bare minimum in device design as part of a treatment plan.

Hovorka says that in order to deal with the trickle-down effects of reduced reimbursement and increased costs associated with the delivery of care, practitioners are going to have to streamline procedures and implement low-cost outcomes measures in the provision of O&P patient care. O&P EDGE

Judith Philipps Otto is a freelance writer who has assisted with marketing and public relations for various clients in the O&P profession. She has been a newspaper writer and editor and has won national and international awards as a broadcast writer-producer.

**Author's note:** Our series concludes next month with part III of the O&P Survival Guide, "An Ideal O&P World—Can We Build One?" Some of our experts will explore their hopes, dreams, and schemes for the industry's future, and examine how the new blood entering the profession is already making an exciting difference in shaping that future.



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