



## EDITORIAL

# Harry and Louise redux

It's the year 2010 and Harry and Louise are contemplating their choice of consumer-driven (directed) health care.

Before them at the kitchen table are piles of glossy brochures from the established health care giants extolling the virtues of their consumer-driven health care (CDHC) plans. "You are in control"; "We offer health care your way"; "We're on your side."

"This one has such a nice cover, Harry."

"Yes, Louise, but the deductible for Viagra is higher, and look at the color scheme of their waiting rooms."

"Well, Harry, here is one that advertises a latte with each urgent care visit."

"Dear, it just is so complicated, how are we ever going to make a decision?"

Welcome to the brave new world of consumer-driven (directed) health care.

The propaganda goes something like this: we provide you with a competitive choice of plans from which you rationally choose how to spend your health care dollar.

Closer to the truth is the bait and switch of dramatically limiting employers' responsibility for health care provision and shifting costs to consumers.

The end result is Harry and Louise purchasing higher-deductible plans, reducing utilization of services (making choices based on short-term savings, not a rational consideration of longer-term value), and falling prey to marketing gimmicks rather than important attributes of quality.

Of course, big business and insurers love this development. In the name of consumer choice, employers emerge from the burden of skyrocketing health care expenses and the burden of plan negotiation. The wealthy supplement their care through health care savings vehicles. And the poor fall further behind.

Only by guaranteeing a basic health care and catastrophic package for all—and developing true measures of quality and value—can CDHC become a dream and not a nightmare.

"Harry, I'm too confused; let's just watch TV."

**Jeff Susman, MD**  
Editor, JFP

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