



SOCIETY OF ACTUARIES

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NATIONAL CONFERENCE DISCUSSES GROUP PRACTICE OF MEDICINE

The National Conference on Group Practice of Medicine, which convened in Chicago October 19-21 to explore means for stimulating group practice of medicine, was the third of a series called by the Secretary of Health, Education, and Welfare. Among the 150 participants were representatives of medicine, employers, organized labor, prepaid group practice plans, the Blues, insurance, government, hospital administration, and public health offices. The insurance representatives included four Fellows of the Society.

Partly because the scope of the meeting was considerably narrower than earlier conferences, more was achieved in the way of specific conclusions and steps for their implementation than in the case of the earlier Conferences. The concept of group practice in its various forms received strong endorsement.

Suggestions for Government

Several suggestions were directed toward action by the federal government, namely:

- The federal government should give its full support to the removal of limitations in state laws that interfere with the development of group practice and to the enactment of state laws that would foster the group practice movement as was done for Blue Cross; federal licensing was suggested as an alternative.

- The group practices section of the Public Health Service should be enlarged to provide adequate resources for data collection and technical assistance.

- Grants should be made available to plan group practice arrangements and to finance the establishment of such plans. A review of tax rulings which place medical groups at a disadvantage was called for, with steps directed toward their removal.

- Programs such as Titles XVIII and XIX should be modified so as to permit payment to group practice arrangements on methods other than fee for service.

Ideas for Non-Government Units

Suggestions were directed toward non-governmental agencies:

- Each such agency, including the insurance companies and the Blues, should bring to its membership the story of group practice and provide those desiring to establish groups with specific guidance on technical problems.

- The interest of insurance companies should be encouraged; this would include the provision of loans for planning, initial capital and initial operating funds for group practice expansion and development.

- Insurance companies and prepayment organizations such as the Blues contribute to group practice development by

- Permitting a choice of group practice or solo medicine under their plans;

- Marketing and administering both solo and group practice plans; and

- Promoting a direct tie between mass prepayment plans and group practice.

The Conference was characterized by an attitude of a free exchange of ideas and by a desire to remain flexible in seeking answers and new directions. It is expected that there will be further conferences on group practice under the auspices of the Department of HEW, perhaps on an annual basis.

After the close of the meeting, the insurance representatives met to consider their next steps for the possible involvement of the industry in the developments regarding group practice of medicine. It was suggested that a small *ad hoc* committee be formed to consider these many problems. □

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parable to the Standard Provisions in the laws of the various States. Nevertheless, the provisions in the Provincial Statutes applicable to Life Insurance contracts generally, some of which have no parallel in U. S. practice, have to be considered when preparing a policy form for use in Canada.

We are indebted to Mr. Barnsley for bringing this to our attention.

The Editor

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