From:	
То:	Exemptions
Subject:	Honeysuckle Health Buying Group Authorisation number: AA1000542
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To Whom it may Concern,

I write to express my grave concern, and firm opposition, regarding the recently announced approval for the formation of the Honeysuckle Health buying group. The formation of this entity between Honeysuckle health, NIB and Cigna exposes the people of Australia to having their health care decisions made by business administrators rather than by doctors. This is a a system that will not result in improved health care, and will certainly result in a reduction in health consumer choice, satisfaction and most importantly health outcomes. I don't know how a system that allows health care decisions to made by people who are not bound by the direct duty of care to the patients can be introduced in good conscience, nor who would want to be the person responsible for allowing the introduction of this care model into the Australian health care system

While I am currently an Orthopaedic surgeon in Sydney, I have spent a substantial amount of time training and working in health care systems in the United States, France, and multiple other countries. Having seen the different health care delivery models in different parts of the world it is clear that while there will always be things that can be improved, the Australian health care system currently provides the highest quality of health care to its population. This is under threat by this decision.

Central to our current system is the doctor-patient relationship. Doctors practice medicine to take care of people. They use their training, expertise and accumulated experience treating complex medical problems to continually fine tune and individualise the treatments they offer to the individual patients. They are bound by the Hippocratic oath and the doctor-patient relationship to put the health of the patient first in any decisions regarding their care, from the information they provide to the tests and investigations they order, to the treatments they recommend and institute. While there are multitude of factors to take into account in treating each patient, and no doctor is perfect, the primary focus in this system is on getting the best possible health outcome for each patient. It is simply unfathomable that a corporate entity who is not bound by such a relationship, does not have the same level of medical training, and has duties to other vested interests such as boards and shareholders would do a similar or better job in deciding what is best in the health care of an individual.

At present Australian patients have choice. They can choose their doctor, their hospital, and their treatment. They can choose the public or private systems, and the provider they wish to access based upon their specific priorities. Treatment is almost entirely determined by the treating doctors – those with the legal, ethical, and professional responsibility and duty to make such decisions with their patients. Allowing large corporations to subvert this process whether by explicit introduction of managed care

models of health delivery, or tacit approval of vertical integration and market power control will result in a loss of choices for patients. It must be strongly resisted.

We don't really need to hypothesise about what it looks like when these managed care models are used for health care. We need to only look at the United States. This system of fragmented insurance systems, complex relationships between patients, doctors, insurers, and government agencies, and clinical decision making regulated by the need of final approval from corporate entities rather than doctors, results in a system that costs almost twice as much (17.7% of GDP in 2019 Vs 10% of GDP for Australia) yet results in poorer outcomes (Life expectancy of 79.1 years Vs 83.9 years). The specific examples of denial of care, of which there is a steady stream from systems that use the managed care model, can be heartbreaking. These are denials essentially unheard of in the Australian system, but common in the US. The changes that will come with the introduction of entities such as Honeysuckle will not result in cost savings but actually in cost increases, and will not improve health outcomes but rather lead to a deterioration of the quality of medical care and corresponding poorer results. That is the result of their functioning in the US. This is without even examining the more existential issue of the disenfranchisement for both patient and doctor that results from corporatized health care.

While we are heading into the age of big data at breakneck speed, with more and more data guiding the best treatment for different conditions, we are far from a point where this data can be interpreted by an algorithm, or an administrator or accountant beholden to shareholders, about the best way to treat an individual patient. While there may be some "overspend" trying some treatments that will not always succeed, but that is the price of having your actual health being the main priority rather than the balance sheet. What constitutes a sufficient chance of success to try a treatment, and who should decide that ? The final decision on how best to treat a patient should remain with someone who has been extensively trained in the specific health care problem being treated, who has primary duty to provide the best possible health outcome, and an ethical and legal duty-of-care to that patient. That person is the patients doctor or doctors, not their insurer.

In summary I strongly oppose this decision to approve the formation of the Honeysuckle Health buying group both as a doctor, and as a future patient. I fully support the Australian Society Of Orthopaedic Surgeons (ASOS) position statement on this issue.

To conclude I ask you to consider who you would like to having the final say in a serious medical issue afflicting you or one of your loved ones. Is it a doctor expertly trained in the specific disease you are facing, who has an ethical, professional, and legal duty of care to you and your health, or would you prefer the final decision to be made by a case manager at a multinational corporation beholden to shareholders and following a series of checkboxes to decide if you will actually be approved to have the recommended treatment ? If it's the former you cant in good conscience approve the formation of the Honeysuckle Health Buying Group or any other serious steps towards corporatised managed care.

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Yours Sincerely

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