

TICK TOCK, THE MEDICARE CLOCK

Without congressional action, finding a doc is going to get a lot more difficult for thousands of local residents by ELIZABETH M. ECONOMOU

WE CALL IT PILL HILL—the section of Seattle's First Hill neighborhood where hospitals, doctors' offices, research sites and clinics rub shoulders, delivering the cutting-edge medicine that has given our city a reputation of being the best place to be if you need major medical treatments. But thanks to the current Medicare mess, Pill Hill's prescription may soon run out. ¶ Even as presidential candidates talk about the importance of overhauling our health care system, the clock is ticking for those who use Medicare as their primary insurance. They may find it difficult to find a doctor willing to take them on as a patient. ¶ So dire is the current state of Medicare that local doctors are urging beneficiaries to contact their congressional representatives to prevent planned cuts to the Medicare program. "I'm very concerned about patients' access to Medicare in our state," says Dr. Brian Wicks, an orthopedic surgeon who heads The Doctors' Clinic in Silverdale, and who is also president of the Washington State Medical Association (WSMA).

"Throughout the state, physicians are either limiting the number of Medicare patients they see, or no longer taking any new Medicare patients," he says.

It's unlikely that, as an orthopedic surgeon, Wicks will make any changes in his own practice. "The real access problem is going to come in the primary-care arena when many docs are going to have to close their practices to new Medicare patients," he says.

At the center of the crisis lie paltry reimbursement fees that Medicare pays out to physicians. And the problem could soon get even worse.

Without congressional intervention, come next month Medicare will slash payments to physicians by more than 10 percent and another 5 percent at the beginning of 2009. Payment rates will be cut a total of about 40 percent over the next nine years while the costs of practicing medicine are expected to rise 20 percent during that period.

Our state could take an even bigger hit than most, because Medicare reimbursement rates are already comparatively lower here, says Wicks. "These lower rates mean that we already have fewer docs who are willing to treat Medicare patients," he says.

Seniors aren't the only ones who'll be affected. Military retirees and families of those on active duty are also at risk, because cuts to Medicare mean cuts to TRICARE, the medical care program for military retirees and families of those who serve in our armed forces.

In all, says Wicks, about a million people in Washington state could feel the impact: more than 700,000 seniors and upward of 300,000 veterans.

"Unfortunately, the sad truth is that this comes down to simple economics; Medicare payments do not pay the cost of providing most services," Wicks says. "As a result, doctors are forced to make really difficult decisions about treating their senior citizen neighbors while trying to keep their practices afloat to serve the broader community."

And while it's difficult to quantify how many seniors are being refused service locally and statewide, Wicks says informal surveys by member physicians "clearly