

# How Can We Better Coordinate Care for Ill, Injured, and Disabled Workers?

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# Reflections on What We Have Heard

**...What did you hear?**

**...What I heard?**

# How Can We Better Coordinate Care for Ill, Injured, and Disabled Workers?

- **Do not forget to treat the “whole person”**
- **Do not forget to avoid unwarranted medicalization**
- **Do not forget how that person fits in the big picture, humans are capital**
- **Do not forget to make sure incentives are aligned appropriately**

# Do not forget to treat the “whole person”

**“It is much more important to know what sort of a patient has a disease than what sort of a disease a patient has.”**

**“The good physician treats the disease; the great physician treats the patient who has the disease”**

William Osler (Canadian Physician 1849-1919)

# Do not forget to avoid unwarranted medicalization

**“How does a person with a problem become a patient with an illness?”**

Nortin Hadler, M.D, (Univ. North Carolina)

**“The young physician starts life with 20 drugs for each disease, and the old physician ends life with one drug for 20 diseases.”**

William Osler (Canadian Physician 1849-1919)

# Do not forget to avoid unwarranted medicalization

- **We must know what we are treating: acute injury or chronic diseases?**
- **We must know how to treat, and we must know when to STOP**
- **Some things and patients can not be FIXED**
- **We must keep focused on the individual's personal functional restoration**
- **If “something” does not help, why do “more”?**

# Remember Humans are Capital... the Most Important Capital in Industry

**We bring our:**

**Skills**

**Motivation**

**Health**

**and we exchange them for:**

**Wages**

**Opportunities**

**Rewards**

# Remember Humans are Capital... the Most Important Capital in Industry

- **We must continue develop skills and match them to the right jobs**
- **We must keep motivated and be motivated**
- **We must optimize our health and maintain and improve health of our workforce**



# Do not forget to make sure incentives are aligned appropriately

- **Physicians view patients and treatments through their own perspective (experience/ training)**
  - Providers do what “they do” and what “they know”
- **Providers do what gets paid**
- **More care sought and more utilization happens when someone else pays...good and bad ???**