

Our 'Patient' Gets More Tests on 2d Visit

By WILLIAM SHERMAN

(Second of a series)

A man complaining that a table had fallen on his foot was number one on line. An old woman, her calves bulging with phlebitis, stood behind him, and next to her a boy who said he is a junkie was holding a packed duffel bag and an old guitar. He mumbled something about stomach pains.

They were welfare clients with medicaid cards, waiting to see the receptionist at the Park Community Medical Building, 131-12 Rockaway Blvd., Ozone Park, Queens. After they registered their complaints they joined about 25 others sitting silently in the crowded waiting room. Every five minutes or so, another patient was called into an examining room.

Number four on line was a News reporter disguised as a patient with a medicaid card as part of a broad investigation of abuses of the city's medical assistance program. City welfare and health officials cooperated closely in the probe.

The reporter returned to the center last Wednesday, as directed by internist Dr. Henry Wilkins, two days after his initial treatment there for a feigned cold.

The first day, he was sent to see a podiatrist, an internist, and a psychiatrist for his complaint. The three doctors had prescribed six different medicines.

It is not yet known how much the Park Community center will decide to charge for

the first day's services, but the total potential bill, based on the city's medicaid fee schedule, was \$69.80.

The patient had refused tests ordered by the internist, except for a urine specimen. The tests included a cardiogram, chest X-rays, and three blood tests. The internist had told the "patient" to return to have his "cold" checked out.

This time, he told the receptionist he was "all better" and asked to see Dr. Wilkins.

As he sat waiting, watching the continuous procession of people through the center, a



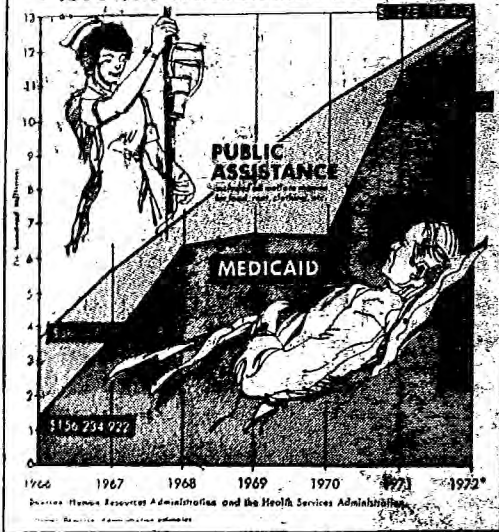
woman holding an infant walked up to him and complained, "Why are they telling me to take this child upstairs to see the dentist? He doesn't even have any teeth."

Then the receptionist called out the "patient's" name and said, "If you're ready, we'll give you those tests now. Then you can see the doctor."

The patient was escorted to the laboratory technician's room where he was told to give a second urine specimen. Then his sleeve was rolled up and blood was taken. The receptionist returned and whisked him into the X-ray room where another technician had him remove his shirt and stand in front of a

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Growth of Medicaid 1966-1972



NEWS chart by Charles Williams & Bill Kresse

Our 'Patient' Gets Lotsa Tests on Second Visit

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plate for front and side views of his chest.

With the last buzz of the X-ray machine timer, he was directed to the waiting room again, because, he was told, "There are electrocardiograms ahead of you."

Ten minutes later, the receptionist again called out his name, and the patient was escorted into a third room and told "remove your shirt, roll down your socks and lie down on the couch."

Another girl placed some dabs of ointment on his chest and attached the wires, with suction-cup tips, to various portions of his body.

Machine Breaks Down

At one point, the machine broke down, the girl said, but it was repaired and the testing continued. Then the patient was ushered out again to the waiting room and told, "Dr. Wilkins will be with you shortly."

One hour later, Wilkins called the patient into his office.

"How are you?" asked the doctor.

"My cold is all better."

Wilkins read the cardiogram, said it was "fine," and told the patient his initial urine specimen had come back from the lab and that it was okay too. Still, the patient had given a second urine specimen.

And Another Visit

This consultation was over in five minutes. When the patient told Dr. Wilkins that he had been directed by the psychiatrist to return on Monday, Wilkins told him, "I want you to come back and see me too." That would have meant a third visit.

The bill for the second day of treatment, according to the city's Medicaid fee schedule, could go as high as \$48.40, including \$4 for a cumulative blood count, \$4 for the second urine analysis,

\$4 for a blood sugar test, \$2.40 for a syphilis test, about \$12 for the internist's, \$12 for the electrocardiogram, and \$12 for the two X-rays.

The potential charge for the two days of treatment of the reporter's "cold" was \$112.20.

At this point, no one knows how much the center will charge for these services. Whatever bills the center forwards for this case to the Health Department will be scrutinized to determine which charges are allowable. Any cost determined to be legitimate will be reimbursed to the Health Department by THE NEWS.

Health Department officials cite "overutilization" of the program as a major factor behind the city's skyrocketing Medicaid costs. The growth of these medical costs has been nothing short of phenomenal.

A few statistics: In 1966, the cost of public assistance for city welfare recipients was about \$382 million for food, housing, shelter and all other expenses except medical care; medical care totaled \$156 million. While public assistance has more than tripled to \$1.3 billion in 1972, the cost of Medicaid last year was eight times what it was in 1966—and in 1973 it is expected to exceed the cost of public assistance.

\$2,000 a Year Average

Right now, it is costing the city an average of about \$2,000 a year for each of the city's welfare clients.

Two days after the patient's last visit to the Park Community Medical Building, the Health Department's senior medical auditor, Dr. Howard P. Katz, visited the center to audit practices there and evaluate treatment given the NEWS reporter.

The facilities, it was learned, are owned by the podiatrist, Dr. S. David Geller, and another doctor, Geller, who treated the NEWS reporter despite his pro-

tests that he came to the center only with a cold, earned \$10,879 from his Medicaid practice in podiatry in 1971.

However, Dr. Katz's audit, and an examination of city records and documents submitted to the Health Department by Geller, reveal that his podiatry income is far from the total he receives from the Medicaid program.

He receives rent from Rakal Pharmacy on the second floor of the center, and from several dentists who also have offices on that floor.

In addition, he also receives a flat rent, he told Katz, and/or 30% to 50% of the Medicaid billing of 13 other medical professionals who practice at the center, including a radiologist, a dermatologist, a pediatrician and a psychiatrist.

Lab Pays Rent

He told Katz his income from the center includes \$500 a month rent from Biometrics Laboratory for a four-by-five foot room. This outfit does all of the center patients' lab tests. Medicaid billing emanating from the center for 1972 will, it is conservatively estimated, be more than \$200,000.

This operation is by no means one of the largest group practices billing the city. The Health Department has counted 173 such centers, most in slum areas, and some of which have grossed several million dollars each since the program began in 1966.

However, Katz was concerned not solely with Park Community's income, but also with the quality of care being dispensed.

"Ping-Pong"

And during the audit of the center, Geller told Katz that receptionists routinely direct patients to physicians other than those handling specific complaints. The practice was called "Ping-Pong" by Katz; but Geller told Katz he thought it was "good preventive medicine."

Then Katz examined Dr. Wilkins' records and found that four patients in a sample were given B-12 injections "for no apparent reason." Dr. Katz said another was given penicillin with no indication, and that in that case, the city was billed \$15 "for an apparent short visit."

Treatment Checked

A lab report on a fifth patient revealed an infection, but Dr. Wilkins' charts showed no indication that it had been treated. Another "patient's" cardiogram showed "pathology," but although a cardiologist is on premises, there was no indication that the patient received consultation.

With regard to THE NEWS reporter's records, Katz said:

- The electrocardiogram was given without indication, contrary to city Medicaid regulations that patients under 40 should not be given e.k.g.'s without a specific reason.

- The penicillin was prescribed without any medical indication, as were the blood tests and the X-rays.

- The patient "was seen by a psychiatrist without notation on the chart as to necessity, and the records are not available."

- No indication as "to what medicine was prescribed although there is knowledge of six prescriptions given to the patient."

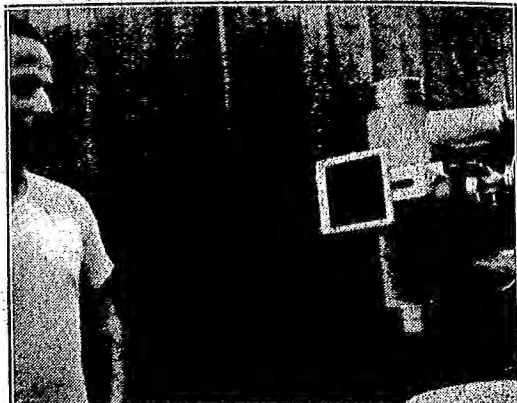
- Psychiatrist Dr. Samuel Kramer's previous invoices all indicated one-hour visits billed at \$20 each, while in the case of THE NEWS reporter, at least, the visit lasted about 15 minutes.

- The patient was seen by a podiatrist without having complained of any foot trouble.

A Sixth of the Pie

Medicaid payments to group practitioners like the Park Community center and other noninstitutional providers cost nearly \$162 million in the city in 1971. That's about one-sixth of the city Medicaid pie.

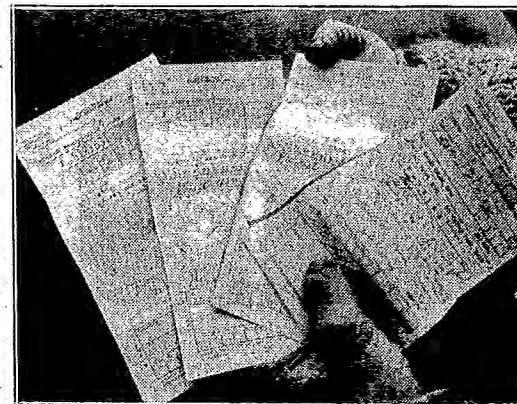
The rest, nearly \$959 million in 1971, went for medical care at hospitals, nursing homes and other institutions.



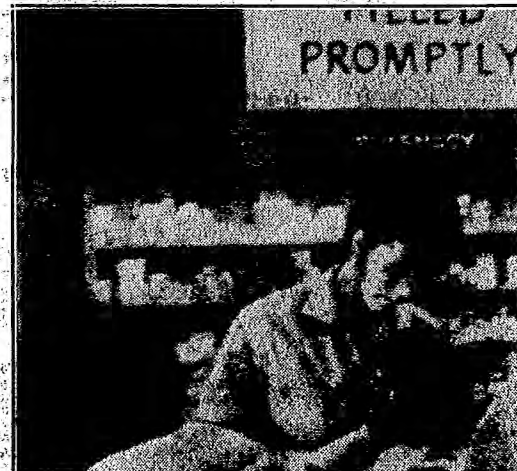
Reporter William Sherman enters X-ray room.



Next, the "patient" takes electrocardiogram test.



Reporter winds up with a handful of prescriptions . . .



... which he has (The) medical center pharmacy...
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