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Stop Payer-Bullying of Providers: How Can Control of Healthcare Be Returned to Providers, Who Are Smarter, and Far More Trustworthy?

1. Insurance companies have hijacked doctors' decisions through prior auth. which has harmed patients.
2. Payers take a disproportionate share of the healthcare dollar relative to their value. Their PR efforts divert the cost focus to providers rather than on their grotesque profits.
3. Judges have found that payers put profits before patients - Character is Destiny
4. **Terminating contracts with safety-net hospitals and medical groups, e.g., Montefiore and Envision at the height of COVID reinforces profits over patients**
5. To justify their behaviors, insurance companies use self-serving-unverified-cherry-picked-half-truth statistics. They also cite research from ivory-tower-desk jockeys with no real-world care delivery experience using over-simplistic theoretical ratios and the unproven industry theory de jour. If these researchers and consultants had real-world experience, they would know their conclusions and recommendations will reduce access and quality.

Providers are far from perfect but are smarter and far more trustworthy than insurance companies. How do we stop payers from bullying providers? Just askin? N8

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United Healthcare (UHC) should be ashamed for BULLYING a safety-net hospital that is trying to survive and serve the poor while the company generates billions in profits.

United Healthcare is now out of network with Montefiore (not my client.) They claim Montefiore's rates are higher than other NYC hospitals. How else can the health system survive and serve its disproportionately large indigent population?

In their propaganda, UHC highlights Montefiore's high imaging prices but fails to mention that access to those HOPD services requires UHC's prior authorization that is rarely granted. OOPS! UHC forgot to publish the many services for which they pay Montefiore well below the hospital's cost. The hospital's operating margin is -37.5%. ([AHD.com](#))

UHC blames hospitals for increased premiums. But over the past years, there is little correlation between hospital rate increases (which averaged 2.5% per JP Morgan) and premium increases. Maybe they should look in the mirror

Is this the same UHC who, according to Judge Joseph Spero, is guilty of using their prior auth system to deny behavioral healthcare to generate profits?

In my opinion, bullying a safety net health system and then claiming it is for the benefit of the community is disgusting. But what do I know? Just Sayin' n8

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