Why Your Employer Should Buy You a Doctor Transcript

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Intro and ER doctor background

I was an ER doctor. I am still an AR doctor part-time, but I wasn't here a doctor for 15 years. And it's like, yeah, I could do so much more for you. But in the ER, this is what you get.

This is the test that I can run and this what get my favorite phrase was always follow up with your PCP, which stands for primary care physician, right?

So follow-up with you PCV, they'll take care of the rest. and I even chuckled a little inside knowing their PCB didn't have time to take of rest, Welcome to My MD Unscripted, where healthcare gets personal and the script gets tossed.

I'm Dr. Clint Carter, ER doctor turned direct primary care freedom fighter on a mission to challenge how our healthcare system treats patients in America.

In every episode, my expert guest and I dive into real conversations about what's broken and how we can fix it by making healthcare about people, not just managing disease.

It's time to rethink what healthcare should be and we how can make it better together. Welcome To The Fightcast. Hey guys and welcome back to the My MD Unscripted podcast.

I'm your host Dr. Clint Carter and today I want to ask you a question you probably haven't thought about before. Why doesn't your employer just buy you like not literally by a human, but by you access to a doctor.

So you're already probably thinking, well, my employer pays for insurance for me, or at least part of it, you probably pay a decent amount.

Podcast welcome and healthcare mission

But the truth be told, your employer is already spending thousands of dollars every year on healthcare. And I mean, insurance is expensive next to You know, paying you the most expensive thing next to payroll on your boss's profit and loss statement is their health insurance costs, almost for sure.

And you know the question then becomes if they're already paying thousands and thousands of dollars on buying health insurances, what if the pay just like a fraction of that What if a fracture that went directly to making sure you had a doctor to see you when you needed one, right?

And you're like, well, my insurance allows me to A doctor who knows you, a doctor you can text when you have a question. A Doctor who has time to talk to you.

Um, I doctor whose job it isn't just to treat you and you're sick, but to also help you be healthy. And so that's essentially what employers can do by adding direct primary care into their health plan.

Why employers should buy access to a doctor

And so to some extent, you know, those of you that are, just work at a job and are about to, the eyes just glazed over when I said the word health plans.

and you just want to know that your insurance card works when you walk up to the front desk of a urgent care. Today, let's talk a little bit about why.

more of your bosses should add direct primary care into their plans and what that would mean for you, okay? So let's start with my company gives me health insurance.

Well, from the employer's perspective, health, insurance is wildly expensive and they're paying for premiums and then so are you. They're probably funding claims if you work for a big employer, and or they're paying for prescriptions, they pay a price when the employee, when you have to miss work to go to the doctor or you're sick and can't get someone to help take care of you and so you are missing multiple days.

They pay indirectly when people spend half a day just going to get a wellness visit because they have spent so much time in a waiting room and what are you really getting out of that?

Um, but, um, most of the money that's being spent is being. Sort of after something's already gone wrong, right? Like the, the system's not built up to, to invest in preventative care.

Um I, you know, spend all day every day doing preventive care unless one of my people do indeed get sick. get hurt or need something urgently, then we pride ourselves in stepping in and keeping them out of the ER and out the urgent care and at work, which actually is part of way that this direct primary care thing saves the employer money and makes people healthier and happier as well.

Direct primary is not health insurance. your boss is paying for insurance and we can be built into those plans, we Can't even afford, I mean, as I can't, even for sure cannot afford health insurance because it's just crazy expensive and they're too small and the risk is too high.

You know, we can be a health benefit that is offered to patients, but we are not insurance if.

Insurance vs direct primary care

You need your appendix taken out. I can't do that. If you get cancer, I Can't fix that." So that's what insurance is really all about, right? It's about when something big goes wrong.

It when you take your, if you total your car, you use your insurance. But if need an oil change, You don't use insurance, Right? If you get a little thing here or there done for your car, your insurance doesn't pay for that.

That's not what it's for. So for you, if you need your blood pressure medication adjusted, or you have a question about your labs, you just want to get labs done and you want see how you're doing.

You don't feel quite right and want get checked up on. you want to lose some weight before you end up with diabetes like everyone else in your family, whatever it is, you don't, that's healthcare, man.

You don' shouldn't dictate whether you get to get those things done or not. Like, that's not what insurance is for. Insurance is the big, bad, you know, boogeyman.

And so, unfortunately, the current system makes the easy stuff hard, right? So think about a normal experience. You wake up sick. So you call your doctor and maybe they can see you in a few days.

So that's too long. You go to urgent care and you fill out a lot of paperwork and wait. Someone who has never met you before, maybe you get a prescription and will definitely get the bill.

There will be money up front even though you have insurance. they're going to want money upfront. Hopefully that's all that you have to pay. Sometimes there's co-insurance and deductibles and things that come into play, especially at urgent care, which is why a lot of people go to the ER and because the E R doesn't ask for money up front.

Typically, you know, You have a co pay, but they don't make you pay it before they take care of you because it's an emergency room. And so then those, that debt just starts piling up and there is definitely co insurance and, and

other, you know, billing that's going to come down the line from an ER visit for sure.

And then you take that sort of, I could have just, needed to see a doctor about being sick. urgent and or emergent care and, you know, which is, the most expensive way to get healthcare, but also I didn't get really good care.

And then you multiply that times hundreds of employees and family members within, or even thousands within a company. Um, and you can see where like the cost of just having access to healthcare just compounds, the complicated nature of getting simple things.

If you have a really complicated, serious problem, maybe there needs to be some steps involved to get you to the right person.

How the current system makes care hard

It's complicated by definition. But if it's a simple, straightforward problem and what you're really looking for is some primary care, why does it make it so hard?

You know why people go to the ER? Because it's easy. Because you just show up and they take care of you. Unfortunately, it is wildly expensive and you don't really get good care.

I was an ER doctor, I am still an EM doctor part-time. But I've been an doctor for 15 years and it was like, yeah I could do so much more for you, but in the EM this is what you get.

This is the test that I can run and this what I get, my favorite phrase was always, follow up with your PCP, which stands for primary care physician, right?

So follow-up with you PCPs, they'll take care of the rest. And I even chuckled a little inside knowing their PCPS didn't have time to take of rest, but what if your employer actually bought you access to a doctor?

Like what would that same experience look like, so let's talk about, having access. So depending on the direct primary care practice, they're all a little different, but for the most part, you're getting office visits with no co-pays.

Okay. Especially if it's part of an employer plan, it should and always will be free for you to go see your direct permanent care doctor because they want you go to them because we take good care of you and we don't build a plan.

Like we've already been paid for, right? We do same or next day sick urgent care visits. The visits you do have when you're doing preventative care are long, 30, mostly 45 minutes to an hour.

And there's no way, I don' even have a waiting room in my, please do not come 30 minutes before your appointment. I do know what to do with you, right?

Like when you come, we'll room you. We'll battle you will get you in here and we will just start talking and will do a quick physical exam and get into a good look at your labs.

You know, you're gonna get a sort of a deeper dive into your wellness, but we're also gonna have time to cover more things. So it's kind of both deep and wide, which is awesome.

Um, You're going to be able to text our practice when you have a question or you need anything. And, you know, I've got like 15, 20 people out there checking texts and making sure that everything works.

We have an app. So you would text through the app and then when it needs, when need me, they direct it to me and I take care of it. Um, we love to take of things virtually that you wake up sick and you're at home and, You know you, can't go to work and You got these symptoms.

It's like, maybe I need a physical exam to figure out what's going with you. But a lot of time I don't. If the flu's going around and you have all the classic flu symptoms, I don't even really need to see.

I can call in your flu medicine and I give you the advice and the supplements.

What direct primary care offers employees

And if you wanna come in and get an immune boost or some other sort of immune boosting IV or injection or supplement or something, highly recommend it.

I think that's great. But a lot of it, you're just sick. You just wanna stay home. If you do come, there ain't gonna be no hour long visit. We're gonna get you in, get out, right?

You don't, just want to go home, we'll get a note for your work and we get to take care of. A lot times if we're built into the plan, send the note directly to the work on your behalf.

We won't talk to your boss about your private medical information. we don't do that. Um, we're still your doctor, but, uh, your bus loves for us to take care of you, um, not because he wants to know what's going on, because we do a better job and we'd do it for less.

And in the end he gets to offer you a benefit that you actually like. Right. So in true preventative care, chronic disease management, getting to go deep and wide, long visits, no wait, all the urgent care stuff.

Really the biggest benefit isn't any one of those individual services. It's really more the relationship, right? Like when my patient calls me and says, hey man, I'm sick, and I go, whoa, didn't we just talk about the fact that you're supposed to be going on a trip in a week?

We gotta get you well, like this isn't okay. You're gonna go on a trip and you're like, ah, how's that bum knee doing? Like, it's really pissed right now.

Okay, well maybe we do something to temporarily bolster that, you know, a steroid or something that's not really gonna fix anything except that you'll be able to enjoy your trip, and we'll come back and talk about it more.

you know, just, it's so personal, as in some folks, that's a great idea. And some, folks that a terrible idea, right? So you just have to follow up on it.

When something changes in your life, you're a direct primary care doctor is there to sort of help move with those changes because every season has its thing.

So I love that part of the direct permanent care. That's why I'm still a doctor. I was a, burned out and didn't care about being a doctor anymore and direct primary care and the relationship, the patient doctor relationship is what pulled me back in and it has made this fun again.

Um, so, you know, that's really why your employer who already pays for insurance might be interested in paying for direct, primary, care as well. Right.

Because the expensive part of healthcare is, what happens because you didn' have access to quality primary care. And I don't mean that the primary-care physicians in my town and probably your town that are working within a system, it's not, I'm not saying they don' do a good job.

They do great job probably, most of mine in town do, with the time they're given to do it, right? So they dont know what I know about preventative care and longevity medicine because they are not taught it.

I wasn't taught. It I had to go find it I have to I had to take extra steps to go learn it because it's not taught to you if you work within the insurance system, because the interest doesn't reimburse for it.

You don't really have time to talk about it, there's really no point in knowing it unless you're curious about for yourself.

The value of relationship-based care

There's plenty of doctors and providers and PAs and nurse practitioners who I've been telling people forever how to lose weight. And it really wasn't working, but it was probably because their patients were non-compliant.

Then when that provider got old enough and they needed to start losing some weight and took their own advice and it didn't work, they were like, could it be that the advice is wrong?

And then they open up, it's the information agent. They go to a weekend course and some things and start realizing, oh my God, There's so much more to this than I was taught.

That's what I accepted to me. Quite frankly, I Was angry was angry that I wasn't taught it until I sort of just took a step back and realized there was no point in teaching me that in residency, when would I have used that?

So, you know, there's And because even though those guys and gals are doing the best they can with a 10 minute visit, it's also, you wait for a long time.

It's a short visit. There's not a ton of value there. So most of us just don't go, right? Like I've got a little high blood pressure, but I'm not gonna…

worry about it. It's not that bad. I'm not hurting anywhere. If I start getting headaches, I'll tell someone. You know, and I keep gaining weight, but you know I am just going to Google it and see what I can do.

My doctors just tell me to exercise and eat better anyway. There are just so many things that aren't being done to prevent downstream badness Either because your doc doesn't have time, but even more likely than that, or equally as likely and as powerful is you just don't go because there's not a ton of value in it.

And it all adds up, right? Right. I mean, for you, it's, you know, things start breaking and you're hypertensive and now you don't know it, but you are pre-diabetic and things are starting to break and don t feel well.

But also down the line, those things you re going to have to be dealt with. And you will have that heart attack at an earlier age. You will need extra medical care.

That sucks for the medical plan, if you will, more money, which just means that everyone is spending more on healthcare than they need to because everyone's waiting too late to get into the game and get it prevented and treated.

And so you may or may not realize, but your health insurance goes up every year, not at the same rate as inflation, but at two, three, four, five, and 10 times the rate of inflation.

Right? There's a lot of people with 30% increases in their health, insurance premiums this year. They didn't have a terrible year it's just that the cost of medicine is going up.

Why employers benefit from DPC

Everyone, there's, just a of poor health. And there was a a, um, a healthcare cost is supported by insurance based plans. Obviously after age 65, the government kind of kicks in and starts taking over.

You can imagine they don't do a better job, uh, than an insurance company. And ultimately, um, those are our taxpayer dollars going, Um, into it. So the more that we can be healthier, that happier we are.

Also the further our dollar stretches, both at work and, and you know, and tax dollars and all that stuff, but that's not

really the point, right? The point is that your boss wants to give you good healthcare.

They're not skimping on you. There just isn't good health care, good heath plans anymore, like the insurance plans that are out there are expensive as heck.

And every year they get more expensive and every your deductible goes up and your benefits go down. It's just math, it's ultimately how it works. It's not designed to be, it's just how it works.

The idea behind employer sponsoring direct primary care built into these plans is that you spend a little more intentionally upstream, taking care of people first, and then you spent a lot less money downstream.

And you may or may not care how much it costs, but chances are a of the cost of your health insurance is being passed to you. I have several, um, Plans with companies that have been with us long enough that the employees no longer have to pay any That the plan has done so well that The employer can uh, the cost of the plant has gone down and the employer Can now just pay what they were always paying and not and you don't have To pay Any and You have a you know, sometimes if you go through your direct primary care provider for your things.

A lot of times there's no deductible, but those plans vary. But ultimately you end up with less deductibles, less out of pocket expenses and better care and you feel better.

So that's a big part of the frustration for employers is your boss ultimately wants to give you a good plan and don't appreciate it because quite frankly it sucks and it's expensive.

And then when it's time to use it, you don't know how to do it. Right? Your kid gets sick. You don' understand where to go and where not to and how the plan works and what you should do.

you need your medication refilled. Well, okay. Who do I reach out to? Who's in charge of what? I've been trying to lose weight. It's not working. What does my plan, what resources are available to me?

So much of these things, they're just so complicated. At open enrollment, you just, he's just like the most miserable day of the year is open enrolment where they're going through your plan design and you're like, yeah, and then, just give me my card so I can give it to the person at the front desk and I, can, I could be seen.

Open enrollment and plan design

And ultimately that's, um, That's part of the problem, right? Like the part, of, the, problem is that it's just so confusing that we can't comprehend it.

We just give them a card and pray that you can afford it so, you know, what we're looking for, or what, we like to help. Bosses be able to provide is access trust.

It really provides a different culture in the workspace knowing that they're providing that their boss has provided this cool service that's you know, whether they, where the employees know it or not, it's also saving the plan money, which benefits both the business and the employee, both now and later.

Um, and so ultimately we can get people taken care of quickly. Uh, we could get chronic conditions, well managed, um, in healthcare just starts to feel different.

So this, It's a fun talk. Obviously I could go on forever. Um, the important distinction is here is like direct primary care is not insurance. But it working with your insurance is amazing.

And so, you know, You guys, either boss is out there that are listening to this. You're doing a, many of you are doing are really, good job of trying to get the best benefit for your people.

It's your job and it's also your responsibility, and many of you take it as a responsibility and a privilege. And it is just

really hard right now. I would implore you to look into a plan design that allows you add indirect primary care.

You know, you cover a membership built into the plan that covers the membership for everybody on your plan to be taken care of in this way and it just, everyone wins.

It's the coolest thing. If you're not an employer, which most of you are not, Um, you know, this might be a good time. It's re enrollment, it's open enrollment.

Um. And when you start and you started getting, when people start talking about their health plan, might it be great time to talk to HR or whoever about, um, whether or not direct primary care or DPC is the kind of thing that they should try to build into their plan.

Maybe next year and see if it can't save the company money and get. um get their people healthier and make people happier um because i know i'm a boss and i can't afford to provide commercial insurance to my relatively small business however um i am proud to be able to offer direct primary care as as the primary health benefit and soon we're gonna we have enough employees to build a plan around direct primarily care that's going to affordable for me, the boss, and amazing for our employees who are awesome and deserve it.

Closing thoughts and call to action

And that's part of what your boss wants too. Your boss want you to love working for him or her so much that you never want to leave. um and so that's they they you know they're competing for the best employees and if they offer a crappy plan and someone else offers a good plan or vice versa then it's something that people talk about and they notice and it"s part of keeping good people so um thanks for putting up with me today um i love that uh You know, when I started this direct primary care clinic, it was because I was tired of being a doctor in the, in, um, system.

And so this was a last ditch effort to be a. But I knew one thing for sure. I. Was out of the insurance game, right? People paid me off the street, a membership, and I took great care of them.

Um, And then eventually. We've come full circle to where this non insurance clinic is part of the solution to the insurance problem. And so here I am.

You know, neck deep in the insurance world, trying to fix insurance from the inside out. And I don't mind it because I'm, you know we're in a way it's kind of a life hack for beating the crazy increasing cost and decreasing benefits of health insurance.

You guys hang in there, be healthy. We'll talk next time. Thanks for joining me today on My MD Unscripted. I hope today's conversation opened your mind and inspired you to imagine a better path for your health and therefore life.

If you found value in this episode, be sure to subscribe, leave a review, and share it with someone passionate about transforming healthcare. Real change starts with real conversation, so let's keep them going.

Until next time, stay well, Stay curious, And never stop pushing for better.