

Episode: *Author Interview: "Should Physicians Be Able to Refuse to Care for Patients Insured by Medicare?"*

Guest: Kaarkuzhali B. Krishnamurthy, MD, MBE, HEC-C

Host: Tim Hoff

Transcript by: Cheryl Green

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[bright theme music]

[00:00:04] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Kaarkuzhali Krishnamurthy, the system director of epilepsy and the system lead of ethics at Steward Medical Group in Boston, Massachusetts. She's here to discuss her article, "*Should Physicians Be Able to Refuse to Care for Patients Insured by Medicare?*," in the December 2023 issue of the Journal, [Belonging, Placement, and Turfing](#). Dr Krishnamurthy, thank you so much for being on the podcast.

DR KAARKUZHALI KRISHNAMURTHY: Thank you so much, Mr Hoff, and thank you to the editors and organizers of the podcast series for inviting me to be part of this.

[00:00:53] HOFF: So, to begin with, what is the main ethics point of your article?

KRISHNAMURTHY: So, this is an interesting article that spans a number of different ethical issues. On the one hand, there is a question about whether or not patients have the right to receive care from physicians, particularly if they are transactionally using Medicare to pay for said insurance. On the other hand, it explores the rights of clinicians to decline to accept patients who are using Medicare as part of their insurance plan. It also talks a little bit about the idea of when the patient/doctor relationship gets started. So, we explore these topics and think about whether or not there should be some consideration of whether the boundaries of what we currently allow should be permissible or whether there are some embedded obligations as part of the training process, particularly in the United States, that means that we should rethink about whether there should be an obligation to accept patients who are using Medicare for their insurance.

[00:01:58] HOFF: And so, what's the most important thing for health professions students and trainees specifically to take from your article?

KRISHNAMURTHY: I would say the first important thing is that physicians should pause before making decisions related to which patients they are and are not willing to provide care for, to take a pause to think through the ethical implications. For example, in this particular case, the clinician has an apparently well-established policy that they do not accept patients who receive Medicare. On the other hand, as this patient arrives to initiate care, the patient gets what seems to be a mixed message where although the front desk administrator says the doctor doesn't normally take patients like this, a few minutes later, the administrator comes back and says, "The doctor's decided to make an exception for you." So, ensuring that before decisions are made, not only is the idea thought out well and the ethics considered, but also, every person within that office and within that practice needs to be very, very clear about what boundaries exist and whether or not those boundaries have any ability to be transgressed.

I think the second part that is very important for clinicians to be considering potentially in advance of making a decision like this is at what point they also have an obligation to ensure that patients get care. Even if that care is not going to be provided within the patient's, sorry, within the physician's own practice, we need to be sure that patients are given a way to access care. In this particular case, we were able to conclusively say that patients should—potential patients, prospective patients—should be given a list of providers who would be able to provide them with

care under their Medicare policy. So, ensuring, again, that patients' rights and welfare to get access to care are appropriately met.

[00:03:59] HOFF: And finally, if you could add a point to your article that you didn't have the time or the space to fully explore, what would that be?

KRISHNAMURTHY: This is a really interesting question, and I'm grateful to have the opportunity to explore it a little bit in this podcast. I very, very briefly touched upon the notion that Medicare, for many of us trained in the United States, helped to pay for a part of our training. So, Medicare, as part of the regulations related to it, pays academic teaching hospitals for a portion of the salary related to residents, also for some of the other ancillary costs associated with paying resident education. And I just began to touch upon whether or not there should be therefore an obligation for physicians once they have completed their training to, in essence, pay back or repay some of that obligation by making sure that they provide care for patients who use Medicare for a portion of the time. Again, space constraints did not permit me to fully explore this topic. I look forward potentially to exploring it in another venue if the opportunity provides itself. [theme music returns]

[00:05:13] HOFF: Dr Krishnamurthy, thank you so much for your time on the podcast today and thanks for your contribution to the Journal this month.

KRISHNAMURTHY: Thank you so much both for the opportunity and for the time.

HOFF: To read the full article as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.