Episode: *Author Interview: “Why Money Is Well Spent on Time”*

Guest: Michael R. Ulrich, JD, MPH  
Host: Tim Hoff  
Transcript by: Cheryl Green  

[Access the podcast.]

[bright theme music]

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 format for accessing the interesting and important work being done by Journal contributors each month. Joining me on this episode is Professor Michael Ulrich, an Assistant Professor of Health Law, Ethics, and Human Rights at Boston University School of Public Health and School of Law in Massachusetts. He is also the Solomon Center Distinguished Visiting Scholar at Yale Law School in New Haven, Connecticut. He’s here to discuss his article, *Why Money Is Well Spent on Time*, in the December 2022 issue of the Journal, *With Stillness and Solidarity*. Professor Ulrich, thank you so much for being on the podcast. [music fades out]

DR MICHAEL ULRICH: Thank you so much for having me.

HOFF: What is the main ethics point of your article?

ULRICH: The primary point of the article is emphasizing the need to spend time with patients and the value of that, but also to enable a shift in the health care system where emphasis is less on coding, for example, for specific services that are given and instead, again, valuing that time spent with patients, because that’s the way that the physician-patient relationship will develop more. And there’s a lot of evidence to suggest that it can help improve health in a variety of ways, so including getting to know and understand the values of the patient so that you can have more directed and personalized care, but also time spent with people in and of itself has valuable benefits. Learning about things that may be contributing to the poor health outcomes of the patient, for example, poor housing or job instability, things like that, all of those things take time. And again, to enable that to happen, we need a shift in the health care system that values and incentivizes that time spent with patients.

HOFF: And so, what’s the most important thing for health professions students and trainees to take from this article?

ULRICH: I think the main point is to understand that patients are whole people and that any specific kind of discrete health care issue that they might have may really just be sort of the tip of the iceberg, right? And diagnosing what that problem is and providing standard care and treatment for that may be useful in a sort of a short term, but at the same time, it might not in the long-term help to understand and appreciate the other health issues. And so, I think the main thing is to see opportunity and time with patients. Any sort of interaction, meeting with a patient is an opportunity to, again, not just see that discrete health issue, but to learn about them, to figure out what other things might be going on. Because a lot of times, that one visit might be the only visit that they have for that entire year. And so, taking the most of that opportunity, I think, can really be valuable.
HOFF: And finally, if you could add a point to this article that you didn’t have the time or space to fully explore, what would that be?

ULRICH: I think one of the things that I’ve been thinking about a lot lately is the way in which the health care provider and patient relationship has been sort of caught up in the political landscape and culture wars. Things from reproductive rights to gender affirming care are becoming sort of these hot button issues that are being legislated by politicians. And again, I think that one of the sort of general points of this article is that that physician-patient relationship is incredibly important and incredibly valuable and can really do a lot in a number of areas to address and improve health outcomes for people. And so, to the extent that is possible, I think everybody in public health and the health care field needs to frankly become more involved or at least more engaged with this political landscape. Because if health care is being regulated to the extent that it’s being attempted now, that’s going to be moving, obviously, in the opposite direction of what the article is trying to push for, which is, again, spending more time with patients and getting to know them and their values to provide more personalized care that is holistic as opposed to sort of narrow and discrete. [theme music returns]

HOFF: Professor Ulrich, thank you so much for your time on the podcast today and for your contribution to the Journal this month.

ULRICH: Thank you so much for having me. I really appreciate it.

HOFF: To read the full article as well as the rest of the December 2022 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.