Boundaries Without Barriers:
Cross-border Health in the European Union

While United States government officials spend endless hours debating what should be the income limits for children's health coverage; whether or not its citizens deserve universal health care; whether services should be national in scope or vary state-by-state; and what type of system to have, how to pay for it and how much choice to allow, developments on the other side of the Atlantic suggest the types of portable coverage and cooperation that are possible when health takes precedence over profits and practical concerns eclipse politics.

A Europe in which borders are not barriers, exemplified by the adoption of the Euro as a common currency, increasingly has its counterpart in the health field. More than 20 years ago, the Court of Justice of the European Communities held that the EC Treaty confers upon all European citizens the right to travel to other member states in order to receive medical services. Although this ruling gave patients freedom of movement, its practical meaning was not put to the test until 1998, when the Court further ruled that reimbursement for cross-border patients was a right rather than a privilege. Since 2004, access to cross-border care has been facilitated by a European Health Insurance Card (EHIC). While this is designed primarily for unplanned and unexpected care and is not designed to cover persons who are traveling for the express purpose of getting medical treatment, it allows the bearer access to any necessary health care in any of the member countries. In some cases, the card may cover services even in countries that are not members of the European Union but have adhered to participating in the health scheme (e.g., Switzerland, Norway). Although the card covers only non-elective care and some restrictions apply, the card entitles the holder to services across borders without having to get prior authorization or incur out-of-pocket payments. In the future, the EHIC is planned to be an electronic “smart” card, encoding patient information that is readable by computer. It is therefore not surprising that the card has been seen as a powerful symbol of European solidarity: like the Euro, it is “another piece of Europe in your pocket.”

While still an emerging and marginal phenomenon, crossing boundaries for the express purpose of seeking health care is rising as travel becomes easier and people gain greater knowledge of and access to services. Policy analysts have identified five main drivers motivating people within the European Union to opt for medical care outside their national borders: familiarity, availability of care, perceived quality, costs, and bioethical legislation. While most countries provide universal coverage for its citizens, not all are in position to provide all services for everyone. Some countries are too small to support an array of tertiary care services for their populations. Others lack the capacity to address all needs, resulting in long waiting periods or queues for specific medical services. Patients may find it easier to seek care in an adjacent country, and therefore rely on services provided outside their national boundaries.
In some cases, national health services have formalized the exchange, crafting agreements to facilitate care elsewhere, either permanently or until they have developed the capacity to meet demand locally. And some of the mobility is generated by individuals who — seeking better, cheaper, or quicker care — opt to cross borders to obtain health services. Finally, there are those who seek special services that are not available in their countries on ethical or legal grounds; these include abortion, some types of fertility treatments, and euthanasia.

Just as patient mobility is prompted by different motives, it has assumed a variety of forms. The following examples suggest some of the novel ways patients are expanding their medical horizons and nations are addressing their long queues, unmet needs, or under-capacity:

- Because the population of Malta is too small to support high-technology care, Maltese patients go to England for highly specialized treatment. For Malta, this arrangement alleviates the need to develop costly facilities with low utilization rates and high stand-by costs; at the same time, English hospitals benefit from the opportunity to develop a more optimal case-mix of patients, address overcapacity in some areas, and lower their costs per unit.

- Austrians travel to neighboring Hungary for dental care, which is cheaper than in their own country. Similarly, patients from Finland and Sweden travel to Estonia for prosthetics, orthodontic appliances, and advanced dental surgical procedures.

- The Netherlands and Belgium cooperate in serving those populations living in their border region, thereby avoiding the duplication of facilities. Moreover, some Dutch patients may find Belgian facilities closer than those in their own country, a case which has been described as "abroad being nearer to home."

- Residents of the Republic of Ireland have shortened the waiting list for some services by traveling to Northern Ireland or England for treatment.

- The English National Health Service has contracted with Belgian hospitals to take care of NHS patients requiring hip- and knee-replacement surgery. Contract negotiations leading to this were long and intricate, requiring defining the details of treatment, patient pathways, and cooperation between hospitals. Furthermore, a "buddy system" was set up to facilitate collaboration between English and Belgian doctors, as the former would be both referring patients and resuming responsibility for patient care upon discharge. In addition, non-medical liaison officers, EuroPals, have been employed to assist patients.

- In the Pyrenees, the French national government and the Catalan regional authorities cooperate to provide health care to their common population, which is united by a shared culture and geography more than it is divided by national boundaries.

- Denmark and Germany share facilities and co-finance medical equipment to insure that populations on either side of their borders have access to care.

These examples do not mean that boundaries have disappeared and that all national barriers have fallen. Each country within the European Union has its own idiosyncratic health services scheme; at present, standardization is neither likely nor desirable. Collectively, member countries have adopted different approaches with respect to financing, patient contributions, and the monitoring of services. In some cases, bilateral agreements have been enacted only after protracted negotiations and the ironing out of multiple details. And some issues — e.g., different languages, liability in case of an adverse effect, fair payment to countries that are overwhelmingly at the "receiving" end of the exchange — continue to challenge and baffle authorities. Still, the health systems of the European Union adhere to basic overarching values of universality, access to good quality care, equity, and solidarity. As a result, no one is barred access to health care. That this goal has been achieved internationally is particularly commendable and noteworthy when the United States is still attempting to achieve this within its own boundaries.
Product Recalls

November 15, 2007 – December 14, 2007

This chart includes recalls from the Food and Drug Administration (FDA) Enforcement Report for drugs and dietary supplements, and Consumer Product Safety Commission (CPSC) recalls of consumer products.

**DRUGS AND DIETARY SUPPLEMENTS**

The recalls noted here reflect actions taken by a firm to remove a product from the market. Recalls may be conducted on a firm's own initiative, by FDA request or by FDA order under statutory authority. If you have any of the drugs noted here, label them “Do Not Use” and put them in a secure place until you can return them to the place of purchase for a full refund. You can also contact the manufacturer. If you want to report an adverse drug reaction to the FDA, call (800) FDA-1088. The FDA Web site is www.fda.gov. Visit www.recalls.gov for information about FDA recalls and recalls issued by other government agencies.

**Recalls and Field Corrections: Drugs - CLASS II**

**Ketoconazole Shampoo, 2%, Rx only, 4 fl oz.** For topical application only; Stability testing indicates product will be out of specification by 12 month time point (Subpotent). Lot #: 2472; Tolmar, Inc.; 9,348 units.

**Nicorette Original Stop Smoking Aid, (nicotine polacrilex gum), 2 mg, 130 pieces (Bonus 20 extra pieces).** This product is protected in sealed blisters. For those who smoke less than 25 cigarettes a day; Label error on declared strength; carton labeled to contain Nicorette 2 mg Original gum (130 ct) Bonus Pack actually contains Nicorette 4 mg Mint gum. Lot #: 6K18N, exp. date: 01/2008; GlaxoSmithKline; 960 cartons.

**NC Solution (anti-fungal solution), tolnaftate 1%, 15mL (1/2 oz); Unapproved New Drug; product contains DMSO.** Lot #: 207001, exp. date: 02/2011; General Therapeutic Corp.; 4,402 units.

**Theophylline Extended-Release Capsules, USP, 200 mg, 100 Capsules; Failed USP dissolution test requirement.** Lot #: 6B002, exp. date: 01/09/08 and 6B004, exp. date 01/09/08; Forest Laboratories, Inc.; Lot 6B002: 9824 bottles of 100; Lot 6B004: 9706 bottles of 100.

**Theophylline Extended-Release Capsules, USP, 125 mg, 100 Capsules; Failed USP dissolution test requirement.** Lot #: 6F004, exp. date 01/23/08; Forest Laboratories, Inc.; 6652 bottles of 100.

**CONSUMER PRODUCTS**

Contact the Consumer Product Safety Commission (CPSC) for specific instructions or return the item to the place of purchase for a refund. For additional information from the Consumer Product Safety Commission, call their hotline at (800) 638-2772. The CPSC web site is www.cpsc.gov. Visit www.recalls.gov for information about FDA recalls and recalls issued by other government agencies.

**Name of Product/Problem/Manufacturer and Contact Information**

**Air Hockey Tables.** The wires of the Cordless Air-Powered Hockey Tables with Rechargeable Battery can overheat or melt, posing a burn hazard to consumers. Gamemantics Inc., (800) 227-3528 or customerservice@hammacher.com.

**Babies' Feeding Seats.** The restraining straps can pull out of the waist strap slots of the First Years Newborn-to-Toddler Reclining Feeding Seats, posing a fall hazard to young children. RC2 Corp., (866) 725-4407 or www.recalls.rc2.com.

**Booster Cables.** The Valucraft Booster Cables' clamps were assembled incorrectly resulting in reverse polarity. This poses an electrical shock and explosion hazard to consumers. AutoZone Parts Inc., (800) 230-9786 or www.autozone.com.

**Boyd Pillow Slipcovers.** The zipper pull on the Boyd® Slipcovers can break, posing a choking hazard to young children. In addition, paint on the zippers contains excess levels of lead, which violates the federal lead paint standard. The Boyd Company, (888) 713-3916 or www.boyd.com.

**Bowflex Home Gyms.** The fasteners used to secure the rod box to the frame of the Bowflex® Ultimate 2 Home Gyms can come loose, allowing the resistance rods or rod box to separate and strike the user or a bystander. Nautilus Inc., (800) 259-9019 or www.bowflex.com.

**Boys' Hooded Drawstring Sweatshirt.** The Boys' hooded sweatshirts have a drawstring through the hood which can pose a strangulation hazard to children. In February 1996, CPSC issued guidelines to help prevent children from strangling or getting entangled on the neck and waist by drawstrings in upper garments, such as jackets and sweatshirts. Scope Apparel L.P., (888) 692-7129 ext. 0 or www.scopeimp.com.
**CONSUMER PRODUCT RECALLS**

**Bunk Beds.** The Bunk Beds have gaps between parts of the upper bunk that could allow a child’s body to pass through but not a child’s head. This poses an entrapment or strangulation hazard to children and exceeds the space allowed by the federal bunk bed safety standard. Hooker Furniture Corporation, (877) 705-8408 or www.hookerfurniture.com.

**Candles.** Four-wick Decorative Candles' wicks are in close proximity causing the candle to burn unevenly and faster than expected, posing a potential fire hazard. AtHome America Inc., 800-928-4663 or www.athome.com.

**Candles.** The bark wrapping of the Birch Bark Wrapped Candles can ignite when the candle burns down, posing a fire hazard. Gate Five Group LLC, d.b.a. Roost, (415) 339-9500 ext. 212 or www.roostco.com.

**Children’s Bath Robes.** The Girls and Boys Bath Robes fail to meet the children’s sleepwear flammability standard, posing a risk of burn injuries to children if the robe caught fire. The Bon-Ton Department Stores Inc., (866) 798-2875 or www.bonton.com.

**Children’s Bracelets.** The Decorative Stretchable Aqua Bracelets contain high levels of lead. Lead is toxic if ingested by young children and can cause adverse health effects. Cherrydale Fundraising, (800) 551-5352 or http://www.cherrydale.com.

**Children’s Charm Bracelets.** Sparkle City Charm Bracelets and Tack Pin Sets contain high levels of lead. Lead is toxic if ingested by young children and can cause adverse health effects. Buy-Rite Designs Inc., (888) 777-7952 or www.buyriteinc.com.

**Children’s Drawstring Pants.** The TKS-brand children’s pants have a ribbon belt at the waist that can pose an entrapment or entanglement hazard to children. E.S. Sutton Inc., (800) 659-7026 or www.sears.com.

**Children’s Hooded Full Zip Sweatshirts.** The Children’s fleece hooded zip-up jackets with neck drawstrings have a drawstring through the hood, which can pose a strangulation hazard to children. In February 1996, CPSC issued guidelines to help prevent children from strangling or getting entangled on the neck and waist by drawstrings in upper garments, such as jackets and sweatshirts. The Bon-Ton Department Stores Inc., (866) 798-2875 or www.bonton.com.

**Children’s Jewelry.** Codeena Princess Children’s Metal Jewelry contains high levels of lead. Lead is toxic if ingested by young children and can cause adverse health effects. Codeea International, (877) 767-1888 or www.codeena.com.

**Children’s Necklace and Earring Sets.** La Femme NY Children’s Necklace and Earring Sets contain high levels of lead. Lead is toxic if ingested by young children and can cause adverse health effects. La Femme NY 2 Inc., (866) 667-5369 or www.lafemmeny.com.

**Children’s Necklaces and Bracelets.** Children’s Metal Necklaces and Bracelets contain high levels of lead. Lead is toxic if ingested by young children and can cause adverse health effects. Colossal Jewelry & Accessories Inc., (888) 808-5093 or colossusaljewelry@comcast.net.

**Children’s Snow and Sand Castle Kits.** The largest plastic castle block maker in the Snow and Sand Castle Kits could crack at the handle during use, creating sharp edges that can pose a laceration hazard to young children. Paricon Inc., (800) 873-8452 or www.llbean.com.

**Children’s Sunglasses.** Surface paint on the Children’s Sunglasses can contain excessive levels of lead, violating the federal lead paint standard. FGX International Inc., (877) 277-0104 or www.fgxi.com.

**Children’s Sweaters.** Personal Identity-brand V-neck sweaters with hood have a drawstring through the hood, posing a strangulation hazard to children. In February 1996, CPSC issued guidelines to help prevent children from strangling or getting entangled on the neck and waist by drawstrings in upper garments, such as jackets and sweatshirts. A & R Knitwear, (800) 659-7026 or www.sears.com.

**Collectible Mini Racing Helmets.** Surface paints on the Collectible Mini Helmets contain excessive levels of lead, violating the federal lead paint standard. Bell Racing Co., (866) 892-6059 or www.bellracing.com.

**Confetti Bursts.** The surface paint on the individual bags of DesignWare® Confetti Bursts contains excessive levels of lead, violating the federal lead paint standard. American Greetings Corp., (800) 777-4891 or www.ag.com.
CONSUMER PRODUCT RECALLS

Dollar Store Metal Jewelry. The Rachel Rose and Distinctly Basics Assorted Metal Jewelry contains high levels of lead. Lead is toxic if ingested by young children and can cause adverse health effects. Family Dollar Stores, (800) 547-0359 or www.familydollar.com.

Dollar Tree Children's Toys. Baby Toys Baby Bead & Wire Toys and Speed Racer Pull Back & Go Action! Cars contain excessive levels of lead, violating the federal lead paint standard. Dollar Tree Stores, (800) 876-8077 or www.dollartree.com.

Electric Toasters. The Cook's Essential Electric Toasters can turn on without bread in the slots and ignite items placed on top of it, posing a fire hazard. QVC Inc., (800) 367-9444 or www.qvc.com.

Elliptical Trainers. The cranks that connect the foot platforms to the rear wheel of the Eclipse® 1175e Elliptical Trainers can break during exercise, posing a fall hazard to consumers. Fitness Quest Inc., (800) 321-9236 or http://www.fitnessquest.com.

Firepits. The legs of the Grand Gourmet Firepits can bend or snap off during use, causing the firepit to tip over and in turn the fire can escape. This poses a fire hazard to consumers. Meijer Inc., (866) 280-8419 or www.meijer.com.

Flashing Pacifiers. The nipple of the Flashing Pacifiers or 2-in-1 Flashing Pacifiers with Whistle Necklaces can detach from the base, posing a choking hazard to young children. Sailing (U.S.) International Corp., (888) 284-8570 or consumeraffairs@unitedsci.com.

Fluorescent Shop Lights. When the two prongs on the plug of the Metalux Fluorescent Shop Light's electrical cord are touched simultaneously while lamps are installed, the light can pose an electric shock hazard to consumers. Cooper Lighting Inc., (800) 440-1676 or www.cooperlighting.com.

Girls' Clothing Sets. The Basic Editions-brand girls' clothing sets have a drawstring at the waist that can pose an entrapment or entanglement hazard to children. Millennium Apparel Group, (800) 659-7026 or www.kmart.com.

Hairstyling Irons. The WEE CHI Ceramic Hairstyling Iron's "on/off" switch was installed incorrectly. When the iron is plugged in and switch is in the "off" position, the iron remains "on," which could pose fire and burn hazards. Farouk Systems Inc., (800) 237-9175 or www.farouk.com.

Halloween Baskets. Surface paint on the bat, pumpkin and witch emblems attached to the Halloween-Themed Baskets contain excess levels of lead, which violates the federal lead paint ban. Hobby Lobby Stores Inc., (800) 326-7931 or www.hobbylobby.com.

Heat Recovery Ventilators. The thermal protector in these Heat Recovery Ventilators can fail, posing a potential fire hazard to consumers. Venmar Ventilation Inc., (866) 441-4645 or www.venmar.ca.


Holiday Ornaments. Surface paints on the 2006 Snow Princess Stirrup Ornaments, 2007 Holiday Stirrup Ornaments, 2007 Photo Frame Horse Shoe Ornaments contain high levels of lead, violating the federal lead paint standards. Reeves International Inc., (800) 444-4775 or www.breyerhorses.com.

Horseshoe Magnets. Surface paint on the Horseshoe Magnets contains high levels of lead, violating the federal lead paint standards. United Scientific, (888) 284-8570 or consumeraffairs@unitedsci.com.

Infant Teethers. The plastic nose of the Infantino® Lion Teethers can detach, posing a choking hazard to young children. Infantino® LLC, (888) 808-3111 or www.service.infantino.com.

Inversion Benches. The ankle clamp mechanism of Nordic Track and Reebok Inversion Benches can release unexpectedly, posing a fall hazard to consumers. Icon Health & Fitness Inc., (866) 506-9095 or www.iconfitness.com.

Lazy Lounger Chairs. The plastic support brackets of Lounge Chairs and Recliners can break and cause the chairs to collapse, posing a hazard to consumers. Dick's Sporting Goods, (866) 500-4982 or www.dickssportinggoods.com.
**CONSUMER PRODUCT RECALLS**

**Michaels Stores Metal Jewelry.** Crystal Innovations jewelry contains high levels of lead. Lead is toxic if ingested by young children and can cause adverse health effects. Pure Allure, (800) 536-6312 or www.pureallure.com/recall.

**Microwaves.** The door switch in the Built-in Combination Wall and Microwave Ovens can overheat and ignite plastic components in the control area, posing a fire hazard to consumers. The lower thermal oven does not pose a hazard. GE Consumer & Industrial, (888)-240-2745 or www.geappliances.com.

**Miter Saws.** The Performax and Wilton 10" Sliding Miter Saw handle’s switch can fail, causing the saw to smoke, spark, and trip circuit breakers, and disable the safety brake. The saw also can keep operating unless the unit is unplugged, posing a laceration hazard to consumers. WMH Tool Group Inc. (WMH), (800) 689-9928 or www.wmhtoolgroup.com.

**Old Navy Boys' Jackets.** The Performance Fleece-Lined boys' jackets have a waist drawstring with a toggle that could become snagged or caught in small spaces or doorways, which can pose an entrapment hazard to children. In February 1996, CPSC issued guidelines to help prevent children from getting entangled on waist by drawstrings in upper garments, such as jackets and sweatshirts. Old Navy LLC, (866) 580-9930 or www.oldnavy.com.

**Oscillating Ceramic Heaters.** The Oscillating Ceramic Heaters can overheat, smoke, or ignite which could pose a fire hazard to consumers. Collins International Co., Ltd., (866) 877-1889 or www.collinsinternational.com.

**Outdoor Vacuums.** The Billy Goat MultiVac Outdoor Vacuum’s fuel tank could crack and leak fuel. If gasoline leaking from the fuel tank is ignited, a fire or explosion can occur. This poses a fire and burn hazard to consumers. Billy Goat Industries Inc, (800) 426-7701 or www.hondapowerequipment.com.

**Paint Brushes.** Surface paint on the Shaving Paint Brush handles can contain excessive levels of lead, violating the federal lead paint standard. Discount School Supply, (600) 293-9314 or www.discountschoolsupply.com.

**Pencil Pouches.** The paint on the Children's Pencil Pouches' zipper pulls contains excessive levels of lead, violating the federal lead paint standard. Raymond Geddes & Co., (800) 533-6273 x1124 or www.raymondgeddes.com/psa.html.

**Pitchbacks.** The upper portion of the frame of the "Power Bolt" Y-Frame and Ultimate Y-Frame Adjustable Pitchbacks can collapse after both locking pins are removed, posing a laceration hazard. Dick's Sporting Goods, (866) 677-4771 or www.dickssportinggoods.com.

**Potty Training Sets.** Decorative plaque inserted into the back of the First Years 3-in-1 Flush and Sounds Potty Seats could have orange paint that contains excessive levels of lead, violating the federal lead paint standard. RC2 Corp., (866) 725-4407 or www.recalls.rc2.com.


**Scuba Diving Gear.** An internal component of the Oceanic and AERIS SCUBA Regulator First Stages that seals air between the high pressure first-stage and the intermediate pressure second-stage can fail. This can result in uncontrolled flow of air to the diver and pose a risk of serious injury or death. ROMI Enterprises, (888) 636-9390 or www.oceanicworldwide.com.

**Starbucks Coffee Mugs.** The plastic handle can detach from the body of the Starbucks Fusion Coffee Mugs when filled with hot liquids, posing a minor burn hazard to consumers. Starbucks Coffee Co., (800) 624-8678 or www.starbucks.com.

**Strollers.** A bolt that attaches each front wheel to the Xplory® Baby Strollers can loosen, causing one of the front wheels to fall off, posing a fall hazard to young children. Stokke LLC, (877) 978-6553 or www.stokkeusa.com.


**TV Stands.** The plastic feet of the TV stand can crack or break. The stability of the stand can be reduced, increasing the risk of a TV tipping-over. Sauder Woodworking Co., (800) 523-3987 or www.sauder.com.

**Visual Presenters.** Improperly installed fluorescent top lights in the Visual Presenters (sold as Image Presentation Cameras by Epson) can overheat, posing a fire hazard. ELMO USA Corp., (877) 275-3566 or www.elmousa.com.
**CONSUMER PRODUCT RECALLS**


**Youth ATVs.** Baja ATVs lack a tire pressure gauge and flag pole mounting bracket, which could pose a risk of injury to riders. Baja Motorsports, (866) 250-7188 or www.bajamotorsports.net.

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Joint Commission on Accreditation of Health Care Organizations

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brand-name to generic cholesterol-lowering drugs, which is the category on which insurers spend the most. Between January 1 and March 31, 2007, doctors got $100 for each patient that filled a generic prescription. Many primary care doctors in one 600-member physician group received bonuses of $1500 to $2000 for making the switch. Patients were not told about the physician incentives; instead, they were told that brand-name co-payments would increase.

Last August, the news that health insurers were giving incentives to doctors in Massachusetts to switch their patients from brand names to generics was the subject of both press and TV coverage, eliciting concern from patients whose medication was switched with little explanation. The switch involved the cholesterol drug Lipitor, which is a major best-seller. Patients were surprised to find out that the change was motivated at least in part by the fact that the physician was getting kickbacks for prescribing a generic drug. For their part, doctors claimed that they were also saving patients money, because the copays are lower for generics. Moreover, they did not know which patients they were getting a bonus payment for, since they did not know who was covered by what insurer. This, however, does not get doctors off the hook: they need to disclose their conflict of interest, because their prescribing may be responding to financial incentive. Failure to disclose their interest in making the switch is therefore unethical.

While we support the use of generics and urge consumers to save money by asking for the generic version of any prescribed drug, we are equally adamant in exposing and condemning medical conflicts of interest. Doing the right thing for the wrong reason is not acceptable. Neither is keeping patients in the dark when the doctor is swallowing the bait and the patient is left with the switch.
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Public Citizen's Health Research Group ♦ Health Letter ♦ 15
Pay for Performance? Incentives Gone Awry

Previous Health Letters have dealt with the "bonuses" that physicians get from pharmaceutical companies. These include not only free samples and promotional trinkets (mugs, key chains, etc.) but also lavish trips, the sponsorship of meals and medical meetings, and even the payment of professional organization dues for doctors finishing their residencies. These practices, and the conflicts of interest that they engender, are particularly insidious because of their lack of transparency; patients have no way of knowing the extent to which doctors are paying back a company for past favors, and may therefore be unsuspecting pawns in a game whose rules they do not know.

But it turns out that some of the same techniques of providing incentives are being used by health insurers and HMOs who want providers to change their behaviors in some way. Payers have a vested interest in controlling costs, and one way to do this is to lower the amounts spent on prescription medicines. Some payers have therefore adopted strategies to encourage physicians to prescribe lower-priced over-the-counter and generic medications.

Although the health plans began with subtle incentives akin to the drug companies' trinkets, they have now switched to cash. Under an overall strategy called Generic Advantage, Health Net, Inc. of California joined three other large state HMOs to provide educational materials for doctors and discount coupons they could give to patients to purchase generics. Later, Health Net offered the group 40 percent of the savings based on a quarter-to-quarter comparison of generic utilization. The rest of the savings was shared between the company (40 percent) and the employer (20 percent), the latter in the form of reduced copays or premiums. The effects of this were soon felt: by the second year, generic prescribing had risen 7 percent. Because each percentage increase saves Health Net $3.5 million, the pay-off is evident.

One of the participating physician groups earned $30,000 to $40,000 in bonuses, which it distributed among the top generic prescribers. In the words of the group's medical director, the dollar incentives were not chickenfeed: "... not enough to buy a yacht, but enough for a nice vacation." Health Net considered the program successful enough to warrant expanding it.

In Michigan, Blue Care Network instituted incentives to get 2400 doctors in the state to switch patients from

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