On February 10, 2016, the Oberlin Club of Metropolitan NY (OCMNY) in collaboration with Lenox Hill Hospital sponsored a health care networking event: the Changing Landscape of Healthcare. The networking event, which was open to the public, drew over 60 attendees from a wide range of Oberlin class years. The format included a moderated discussion with five Obie panelists with various specialization and an range of experience, followed by a Q&A session.

Jerome Kogan ’80, Chief of Psychological Services, Department of Psychiatry, Lenox Hill Hospital, Northwell Health and Lei Zhao ’08 president of OCMNY were on hand to open the networking event. The discussions covered topics such as the declaration of Zika virus as a public health emergency, Translational Research, Big Data, the utility of the Affordable Care Act (ACA), and other alternatives such as a Single-Payer Health Care system.

As an immigrant who has worked for a reproductive center, the discussion that resonated with me the most was the emergent of Zika virus. Not too long ago, Ebola was the new threat in town and Zika poses similar challenges. Both were declared global public health emergencies, have no definitive treatment, have fatal consequences, and their etiologies are still not fully understood. The bioethical questions that arose ranged from women’s reproductive choice, government intervention in the private sphere, in this case dictating to women when they should begin conception and how to enforce such an order, accessibility to contraceptives including abortion,
the capability of low-income economies managing a generation of brain damaged children and the media’s role in disseminating information (more science, less fear) to the general public. The panelists were in consensus that the WHO was right in declaring the Zika outbreak a public health emergency. With globalization comes the fiduciary responsibility for all, especially world leaders, to respond to global health emergencies with urgency. The global north can no longer live in isolation and assume that whatever happens in the global south does not impact its well-being.

It wouldn’t be a health care event without a discussion on health insurance. The conversations surrounding the ACA - aka Obamcare - touched on the pros and cons and how it impacted each panelist’s line of work. The panelists affirmed that the ACA expanded health care access to millions of people and also made it difficult for insurance companies to discriminate against those with pre-existing conditions. Insurance companies can no longer deny coverage or hike their prices for those with pre-existing conditions. Nonetheless, trade offs abound. One panelist noted that the ACA negatively impacted those in private practices, as reimbursements are significantly lower than hospital employed providers. Additionally, keeping up with the paperwork takes away time that could be used to see more patients. Another panelist commented that services that largely benefit patients such as clinical ethics committees and palliative care have little to no reimbursements. A question that then arose was whether a single payer health care system would be the answer. It was discussed that such a system would mean giving up autonomy in favor of utilitarianism. Counterintuitively, such a system could have the inadvertent impact of widening the socioeconomic gap as those from higher socio-economic backgrounds have the financial ability to bypass this system to obtain superior care. Ultimately, giving up choice is perceived as anti-American, as such, implementing a single payer system would face societal as well as logistical obstacles.

In sum, for those who worked in the healthcare field, the event provided a meaningful networking opportunity and for those simply interested in the topics discussed, the event provided a variety of insightful perspectives on issues that impact us all.

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