

# The Three Minute Read™

## Insights from the Healing American Healthcare Coalition™

September 2023-3



**From the Editor:** The pandemic is behind us, but its effects linger on. This issue's article summaries include Covid test availability, Walgreens bet on healthcare, the high cost of physician turnover and a promising treatment for PTSD. Click on the headline to read the full article. If you enjoy **TMR**, please subscribe [here](#).



[UN delegates approve political declaration on pandemic readiness](#),  
by Lisa Schnirring,

CIDRAP, 9/20/23

**TMR Topline** – The UN General Assembly approved a political declaration that spells out steps to better prepare the world for the next pandemic. It recognizes the need for member states to finish work on a [Pandemic Accord](#), a legal instrument that would be used to ensure that countries are better prepared to prevent and respond to future pandemics. WHO Director-General Tedros Adhanom Ghebreyesus, PhD, welcomed the pandemic preparedness declaration and called it a "historic milestone." A final proposal is due in May 2024.



[Biden administration announces \\$600M to produce new Covid-19 tests](#), Associated Press, 9/20/23

**TMR Topline** – The Biden administration is providing \$600 million in funding to produce new at-home Covid-19 tests and is restarting a website allowing Americans to again order up to four free tests per household. Orders can be placed at [COVIDTests.gov](#) starting Sept. 25.

Funding has been awarded to 12 manufacturers in seven states to produce 200 million over-the-counter tests. The tests are designed to detect Covid variants currently circulating. Intended for use by the end of the year, they will include instructions on how to verify extended expiration dates.



[Walgreens continues its big bet on healthcare, VillageMD clinics](#),  
by Diane Eastabrook,

Modern Healthcare, 9/21/23

**TMR Topline** – Walgreens moved aggressively into healthcare services in 2021 under former CEO Roz Brewer, who [stepped down](#) earlier this month as the company's US healthcare services segment has struggled. John Driscoll, president of Walgreens' US healthcare division, said the company plans to add VillageMD to Walgreens clinics at locations where there the population can support them and there are opportunities for primary care physicians and pharmacists to collaborate more closely on patient care. [Walgreens](#) has co-located 200 VillageMD clinics with stores across a dozen states. Earlier this year, VillageMD [acquired](#) Summit Health-CityMD for \$8.9 billion.

Walgreens US healthcare services unit reported a \$172 million operating loss in its third quarter ending on May 31<sup>st</sup> and a \$483 million year-to-date operating loss. Driscoll admitted these are complicated times for Walgreens, but said the board of directors and their executive team are not changing the healthcare unit's strategy. Driscoll added, "Our bet is this model will win in the communities we are in."



[The cost of physician turnover](#), by Laura Dyrda, Becker's Hospital Review, 9/21/23

**TMR Topline** – Physician turnover rates are increasing as more clinicians experi-

ence burnout and decide to retire early. The Association for Advancing Physician and Provider Recruitment's [report](#) on physician turnover in 2022 found 76% of physicians leaving organizations were due to retirement, with finding a new position elsewhere also a top response. Losing a physician is costly: [Merritt Hawkins](#) estimates that the revenue loss can exceed \$3.0 million a year depending on specialty until the physician is replaced. It can take up to 10 months to find a replacement and interviewing costs can exceed \$30,000 according to a [report](#) from the New England Journal of Medicine. Newly hired physicians often receive several financial perks. More than 90% of hospitals offer up to \$15,000 for relocation expenses and 41% offered \$75-90,000 in student loan repayment. Over 90% offered \$20-30,000 signing bonuses to new physicians, and as much as \$250,000 for difficult to recruit specialties. Some hospital systems also pay for the newly hired physician's malpractice insurance.

**TMR's Take:** The Association of Medical Colleges has predicted a shortage of as many as 934,000 physicians by 2025. Given the revenue loss and high cost of recruiting and replacing clinicians, implementing tactics to reduce burnout should be a top priority. In a [2022 AMA survey](#) of 11,000 doctors and other medical professionals, over half reported feeling burned out and indicated they were experiencing a great deal of stress. Similarly, a survey of over 12,000 nurses by the [American Nurses Foundation](#) found that 43% said they felt burned out.



[FTC sues U.S. Anesthesia Partners, private equity firm](#), by Alex Kacic, Modern Healthcare, 9/21/23

**TMR Topline** – The Federal Trade Commission sued U.S. Anesthesia Partners, one of the nation's largest anesthesia providers, and its private equity owner Welsh, Carson, Anderson & Stowe for allegedly consolidating its practices in Texas to drive up prices for patients. The FTC complaint alleges that the company created a monopoly by buying up nearly every large anesthesia practice in Texas, made price-setting agreements with remaining independent practices and struck a deal with an unnamed competitor to keep it out of the market.

FTC Chair Lina Khan said that Welsh Carson created the company to “*rake in tens of millions of extra dollars for these executives at the expense of Texas patients and*

*businesses.*” The complaint also alleges the company worked with competitors to divide the Houston, Dallas and Austin anesthesia markets in Texas among them. A 2022 peer-reviewed analysis of six years of data published in JAMA Internal Medicine found hospital outpatient departments and ambulatory surgery centers served by private-equity backed anesthesia companies raised prices by an average of 26% more than facilities served by independent anesthesia practices.



[MDMA Therapy Inches Closer to Approval](#), by Rachel Nuwer, New York Times, 9/16/23

**TMR Topline** – MDMA-assisted therapy seems to be effective in [reducing symptoms of post-traumatic stress disorder](#), according to a recent study published in Nature Medicine. If approved by the FDA, “*MDMA-assisted therapy would be the first novel treatment for PTSD in over two decades,*” said Berra Yazar-Klosinski, the senior author of the study. The diverse group of 104 participants in the new study had been diagnosed with moderate to severe PTSD and had lived with the condition for an average of 16 years. Each participant worked with a two-person therapy team and received three 90-minute preparatory, talk therapy sessions followed by three treatment cycles, spaced one month apart. 53 received MDMA; 51 received a placebo. Researchers reported that 86.5% of the MDMA group achieved a measurable reduction in severity of symptoms, and 71% no longer met the criteria for a PTSD diagnosis. Of those who took the placebo, 69% improved and nearly 48% no longer qualified for a PTSD diagnosis.

Also known as Ecstasy or Molly, MDMA has been classified as an illegal substance by the DEA since 1985. The Multidisciplinary Association for Psychedelic Studies ([MAPS](#)) has been advocating the legalization of MDMA-assisted therapy since 1986, and supporting research of its use in treating PTSD since 2001. The Heffter Research Institute, another nonprofit group, has been doing the same for psilocybin, the active ingredient in magic mushrooms, since 1993. PTSD affects about 5% of the US adult population each year.

**TMR's Take:** Treatment for PTSD clearly needs to be improved. With 5% of American adults suffering from PTSD, MDMA used in a controlled environment appears to be an important advancement in treatment.