

The Social Cost of Automation

February 18, 2024

Dear Residents,

Greetings from **London**. I'm here for a long weekend, visiting family. Luckily it isn't too cold. The last time I was here for my niece's wedding, 12 years ago. It coincided with the London Olympics, and it was a hectic time. It's much quieter this time around. My niece works for Deloitte now and she and her husband have a lovely home in East London.



Fried okra from Dishoom - The best Indian food is not in India - it's in London!



Hanging out with my niece at the Spitalfields Market in East London



St Paul's Cathedral (Christopher Wren) in London

I've had a few interesting experiences lately that highlight the way in which our lives are changing. **Automation**, while efficient and sometimes truly delightful, when it fails, it fails magnificently. System handoffs are the weak link be it package delivery, electronic prescriptions, or the insurance claim system. What's most worrisome is that customer support is powerless and there is increasing evidence that there is an <u>emerging social cost to automation</u>. The hospital or clinic submits a claim to your insurance company often utilizing automation, sometimes through an intermediary clearing house. The insurance company accepts/adjusts or denies the submitted charges. Deductibles and network tiers come into play. You receive an EOB (explanation of benefits). For

some of you, there has been "sticker shock." It appears that there may be some ongoing issues with the automation and the algorithms that have been loaded.

Many of you have experienced such **problems with the new insurance plan at Parkland**. Instead of blowing this off as isolated events, both Parkland leadership and UTSW GME have taken the reported issues very seriously. A recommendation has emerged to report the individual issues through the Parkland intranet. This will allow the collection and reporting of problems confidentiality and securely. The resident council will send out information on how and when to report issues you may have experienced with the new health insurance plan. Rest assured that we will work to resolve these issues,

In medicine we are collaborative. But many systems around us are hierarchical. We navigate and "solve" system issues on behalf of our patients and expend personal resources to do so. We should expect the same from our leaders when we face similar issues with our own healthcare and I'm glad that they are stepping up and helping.

I'm grateful to have my own golden weekend of sorts. When I return, I will work on finalizing the rank order lists and move forward with chief resident selection. Thank you for your input.

Warm regards,

Dino Kazi