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Fixing Medical Prices goes to the heart of the U.S. medical pricing process: to a largely unknown yet influential committee of medical organizations affiliated with the American Medical Association that advises Medicare. Medicare's ready acceptance of this

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committee's recommendations typically sets off a chain reaction across the entire American health care system.

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Doctors at the

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frontlines of medical care who manage complex conditions argue that they receive disproportionately lower fees than physicians performing services such as minor surgeries and endoscopies. “Fixing Medical Prices” goes to the heart of the U.S. medical pricing process: to a largely unknown yet influential committee of medical

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and chair of social
medicine in the School
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The AMA is part of a
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Doctors practising through separate legal entities, or within a legal partnership with at least one corporate partner, are considered competitors for the purposes of the Act. Fee setting in this situation is illegal price fixing, but in some circumstances may be authorised by the

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ACCC for a specific period of time.

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The RUC seems to embody a corporatist approach to fixing prices for medical services to create perverse incentives for physicians to do more procedures, and do less conversing with and examining patients, examining

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the best clinical research evidence about their problems, and rigorously thinking about how best to help them. More procedures at higher prices helps physicians who do procedures.

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Fixing Medical Prices explores the activities of a largely unknown but highly powerful committee affiliated with the American Medical Association (AMA) that advises Medicare on the relative value of

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If there is one obvious take-away from Fixing Medical Prices, it is that independent and transparent (medical coding and pricing) oversight is needed.

The Independent Payment Advisory Board (IPAB) should be expanded, empowered, and adequately funded by Congress to provide

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