

Audrey Price

Professor Bradley

ENC 2135

9-26-19

### The Health Insurance Struggle in *Grey's Anatomy*

*Grey's Anatomy*, created by Shonda Rhimes, is set in an award-winning hospital that portrays doctors treating patients from all socioeconomic backgrounds. It shows people with little to no health insurance and how they handle receiving life-saving surgeries. Many people don't have strong enough health insurance to cover if they need major surgery. Were the writers able to correctly display the struggles people who don't have insurance experience when trying to get medical help?

There are approximately 2.3 million mixed-status families in the United States, containing varied combinations of citizens, permanent legal residents, undocumented immigrants, and individuals in legal limbo (Castañeda, 1891). Out of all of those, many are bound to need medical help but are unable to receive the help they require. In Season 1, Episode 2 of *Grey's Anatomy*, the show introduces the first occurrence of a healthcare issue. The scene starts when Izzie goes towards the back of the hospital and she finds an injured woman with an extreme cut on her forehead. She rushes to her side and wants to help this woman, and luckily, she speaks broken English. She explains to Izzie how she needs help, but she does not have a green card and is scared of going to jail. Izzie promises her that if she came in and helped her that she would make sure nothing happens to her, but the lady refused. Izzie brought out her tools to fix the gash on her forehead and she did it anyways without the hospital knowing. She emphasized to the lady that no one can know about this or Izzie might lose her job, and she tells

her to come back in a week so she can check on her head. If someone is in this country illegally, with no insurance, and scared to get important medical help because of that, they probably won't. The United States has seen an exponential growth in its immigrant population over the years (Edward, 5). Due to this growth, the amount of medical attention needed has also increased. Many people who have been in the United States illegally for less than five years do not have access to medical help. Dwyer states, "Most public insurance programs in the US do not cover long-term care for immigrants, legal, or illegal, until they can establish that they've been residents for at least five years." If someone who is living here illegally does happen to need surgery, or something like simple stitches, most times they will not risk stepping foot into the hospital due to the fact that they are not legal, or do not have enough to pay for the medical attention.

Health insurance is considered a basic need, like food and shelter. Agreement on the need for health insurance is broad, but not universal (Relmer, HealthAffairs). Fifteen seasons later, health insurance problems are still relevant in the show *Grey's Anatomy* and are still relevant in today's world, and not everyone has this basic need. In Season 15, Episode four, a doctor named Alex Karev is the main doctor in this scene. A patient named Julius comes into the emergency room after a fire in an apartment. He has had a problem on his lung, but this was not because of the apartment fire, this was a pre-existing condition. Julius is still on his mother's insurance, and this insurance plan only covers emergency room visits, not pre-existing conditions. Alex tells him he needs this surgery to fix his lung, but Julius refuses, saying he has been saving up to have the surgery, but he needs more time to earn more money to pay for it. Alex knows how poor this patient's condition is, and how time urgent this surgery is, so he figures out a way to go around this patient's insurance dilemma. He lightly cuts Julius on the side and claims that it is because

of the apartment fire, and he needs emergency surgery right now, which would be covered by the health insurance plan. Julius wakes up after the surgery and his whole family is extremely grateful for what Alex had done for him. Although morally Alex did what he thought was right, he could be faced with insurance fraud and the loss of his medical license. No one decides to report Alex to the board, so he gets away with committing this insurance fraud. In *Grey's*, if a patient needs life-saving surgery, but can't afford it, some doctors will lie about the severity of the surgery to get more of it covered on insurance. In a real-life situation, it seems to not be true in real life, but many doctors try their best to give patients the most affordable care they can. There are more plans that can help prevent this. A big difference between season 1 and season 15 is the Affordable Care Act, which was implemented in 2010 and the main goal was to try and give a lot more uninsured people health care and protects citizens from arbitrary actions that insurance companies might commit. The Patient Protection and Affordable Care Act included a Medicaid expansion component which extended access to health insurance coverage to over 20 million previously uninsured individuals, with a resultant 21% increase in Medicaid enrollment (Barakat, 2).

Asylum seekers have been recognized as having unique and complex health needs which require attention both upon arrival and throughout the process of resettlement (Suurmond, ClinicalKey). In Season 15, Episode 23, a four-year-old Hispanic girl comes into the hospital named Gabi. Her father is here in the United States on a visa and they are asylum seekers. The rest of his family is not in the United States, but he is working multiple jobs, trying to bring them over. Although the father had a job, he was not able to afford his daughter's surgery. The doctors helped him consider options to help afford this surgery, they suggested he apply for state insurance that would immediately help him afford the surgery. He applies, but it turns out he

makes too much for the state insurance, but it still is not enough to cover the surgery. The main doctor on the case, Meredith Grey, knows that this little girl needs surgery, so she takes matters into her own hand. Meredith is a doctor, has great insurance, and has a little girl around Gabi's age. Meredith goes behind everyone's back, and files the young Gabi, under her daughter's name, making her surgery covered by insurance. Meredith soon gets caught by the Chief of Surgery, and he threatens how she could go to jail, and lose her medical license for committing this insurance fraud. This fraud was much more serious than fudging some forms or fixing an injury outside of the hospital. Later on, in the season, Meredith does happen to get caught with this fraud. She is sat down and she admits that she did this. Meredith was fired, and a handful of the people who knew and supported it were also fired. Instead of jail time, since Meredith has two children, she decided to do court-ordered community service. This example actually does show some of the consequences that doctors could face if they happen to commit fraud.

Most of the examples shown in *Grey's Anatomy* show the doctor doing the better thing, like committing insurance fraud or operating behind the hospitals back in order to help the patient. Although this is prevalent in the show, it does not happen as often in real life. In real life, it is more likely that the doctor commits insurance fraud to benefit themselves rather than the patient. Some doctors lie about what the patient's insurance actually does cover. Scenarios like this are extremely prevalent in cases that are dealing with elderly patients. Burnes states, "the financial exploitation of older adults is a growing issue that is associated with major consequences, such as shortened survival, hospitalization, and poor physical and mental health" (13). He continues to state, "Mild cognitive impairment is associated with poor financial decision-making, reduced financial literacy, and greater susceptibility to scams. Even among older adults without mild cognitive impairment or dementia, age-related changes in cognition are

associated with poor decision making and greater susceptibility to scams” (14). Taking advantage of patients for a doctors own good seems to be a more realistic scenario, rather than all of the good done on the show *Grey’s Anatomy*. Many doctors are quick to speak lies rather than the truth, in order for them to wrongly gain more. They might claim it does not cover as much to charge more and make more money. Morley states “knowingly making a fictitious claim, inflating a claim or adding extra items to a claim, or being in any way dishonest with the intention of gaining more than legitimate entitlement.” This shows how in some cases, people will lie for their own personal benefit, rather than like in *Grey’s Anatomy*, where the doctors would lie or smudge the files to give the patient the most affordable care they can get. Morley also states, “motivations to commit fraud vary, from opportunistic individuals submitting a fraudulent claim... to criminal networks that use fraud as a regular source of revenue generation” (163). People are willing to commit fraud for different reasons, which might be good or bad reasons. Another issue with how *Grey’s Anatomy* portrays how they help low health care patients, is the fact that they can get away with committing the insurance fraud so easily. Morley states “Studies of insurance fraud have typically focused upon identifying characteristics of fraudulent claims and claimants. (163)” There are many people in a huge hospital that review the cases and are trained to catch things like insurance fraud, or mistakes in paperwork. So, to have so many frauds committed without getting caught is a lot easier than they make it. In the end seasons, when Meredith commits that fraud pretending her patient is her child, she does get caught and she ends up getting consequences.

Although this may be the case, not every doctor is this greedy, but not every doctor bends the rules like in *Grey’s Anatomy*. This proves to not be 100% accurate on how doctors deal with these issues when they arise. Many doctors will actually follow the medical rules and guidelines

of what to do when someone does not have enough insurance or can't afford medical help. There are so many other options for people rather than lying to the insurance companies or smudging information on paperwork. "Many acts of fraud and abuse—such as reselling Medicare-reimbursed prescription drugs for illicit use, performing contraindicated operations to maximize revenue, and using untrained personnel to deliver care—threaten patient health and safety" (Hersch, 788). For people who can't afford insurance, there are other options for getting help. Programs like the Affordable Care Act and Patient Protection were implemented in 2010. Other things like pro-bono surgeries can be performed to correctly give the patient free surgery rather than lying and risking a job or medical license.

Specific examples of committing insurance fraud like they do in *Grey's Anatomy* would include jail time, removal of a medical license, and losing their jobs as doctors, along with many possible fines. These are not always shown in *Grey's Anatomy*, but in real life, they are huge consequences if someone is found committing fraud. Insurance fraud is a huge deal and is not that easy to get away with, so if caught, they have serious consequences. In today's world, not many people are willing to risk their jobs for someone who they don't really know. Doctors see so many patients that if every time someone could not afford a surgery and they gave them free surgery or committed insurance fraud they would be out of a job extremely fast.

Furthermore, *Grey's Anatomy* does show some correct scenes when dealing with health insurance, but also has many flaws. The show displays what a family is experiencing when money is a problem, what health risks could happen without medical help, and different ways someone could get medical help. On the other hand, it does not show how all doctors handle low insurance cases, or how accurate it is to commit insurance fraud for a patient. Not every doctor is the same and they all don't act the same. *Grey's Anatomy* is a fictional television show, which

does have some actual correct scenes when discussing health insurance issues, but like any television show, there are lots of flaws.

## Works Cited

- Barakat, Monique T., et al. "Affordable Care Act and Healthcare Delivery: A Comparison of California and Florida Hospitals and Emergency Departments." *Plos One*, vol. 12, no. 8, Mar. 2017, doi:10.1371/journal.pone.0182346.
- Burnes, David, et al. "Prevalence of Financial Fraud and Scams Among Older Adults in the United States: A Systematic Review and Meta-Analysis." *American Journal of Public Health*, vol. 107, no. 8, Aug. 2017, pp e13-e21. EBSCOhost, doi:10.2105/AJPH.2017.303821
- Castañeda, Heide, and Milena Andrea Melo. "Health Care Access for Latino Mixed-Status Families." *American Behavioral Scientist*, vol. 58, no. 14, 2014, pp. 1891–1909., doi:10.1177/0002764214550290.
- Dwyer, James. "When The Discharge Plan Is Deportation: Hospitals, Immigrants, And Social Responsibility." *Bioethics*, vol. 23, no. 3, 2009, pp. ii-iv., doi:10.1111/j.1467-8519.2009.01714.x.
- Edward, Jean. "Undocumented Immigrants and Access to Health Care: Making a Case for Policy Reform." *Policy, Politics, & Nursing Practice*, vol. 15, no. 1-2, 2014, pp. 5–14., doi:10.1177/1527154414532694.
- Fabi, Rachel, and Brendan Saloner. "Covering Undocumented Immigrants — State Innovation in California." *New England Journal of Medicine*, vol. 375, no. 20, 2016, pp. 1913–1915., doi:10.1056/nejmp1609468.
- Hersch Nicholas, Lauren, et al. "Medicare Beneficiaries' Exposure To Fraud And Abuse Perpetrators." *Health Affairs*, vol. 38, no. 5, May 2019, pp. 788-793. EBSCOhost, doi:10.1377/hlthaff.2018.05149



Morley, Nicola J., et al. "How the Detection of Insurance Fraud Succeeds and Fails." *Psychology, Crime & Law*, vol. 12, no. 2, 2006, pp. 163–180., doi:10.1080/10683160512331316325.

Remler, Dahlia K., et al. "Estimating The Effects Of Health Insurance And Other Social Programs On Poverty Under The Affordable Care Act." *Health Affairs*, vol. 36, no. 10, 2017, pp. 1828–1837., doi:10.1377/hlthaff.2017.0331.

Sommers, Benjamin D., and Wendy E. Parmet. "Health Care for Immigrants — Implications of Obamas Executive Action." *New England Journal of Medicine*, vol. 372, no. 13, 2015, pp. 1187–1189., doi:10.1056/nejmp1414949.

Suurmond, J., et al. "The First Contacts between Healthcare Providers and Newly-Arrived Asylum Seekers: a Qualitative Study about Which Issues Need to Be Addressed." *Public Health*, vol. 127, no. 7, 2013, pp. 668–673., doi:10.1016/j.puhe.2013.04.004.

"Watch Grey's Anatomy TV Show - ABC.com." *ABC*, abc.go.com/shows/greys-anatomy.