

Members Ask a Voice in H.I.P. Service

By GRACE LICHTENSTEIN

Consumers who belong to the Health Insurance Plan of Greater New York have begun in recent months to demand—and win—a voice in getting better care from the 28 community medical groups that serve them.

The growing consumer role at H.I.P., the nation's second-largest prepaid group health plan, parallels similar developments in health care in other communities. But it also has echoes of previous New York battles over decentralization and community control.

The 750,000-member plan has been losing ground to the metropolitan area's two other big medical plans in the last few years. Critics believe that one reason is a widespread dissatisfaction among H.I.P. members with the kind of facilities and treatment they get.

Blue Shield Up 4%

While H.I.P. enrollment has remained "stable" in the last year, that of Blue Shield has increased by almost 4 per cent, to 6.2 million, and that of Group Health Insurance by more than 3 per cent, to 1.5 million.

H.I.P. differs from the other two plans in that subscribers join a community clinic that provides service. Family physicians and specialists, X-rays and laboratory work for the basic monthly fee. The other two plans have no clinics, just networks of participating doctors. But subscribers can go to any doctors they choose.

Some H.I.P. community medical centers have had small consumer councils for years. But two years ago, a group called the People's Committee for Accountability started to press

more aggressively for improved service.

'Screaming to the Altar'

Robert Nichol, an antipov-erty worker who is among the plan's consumer activists, said top management was "dragged screaming to the altar" of consumer participation. But H.I.P. officially embraced the idea by mandating member groups in its latest contract to set up consumer councils.

James Brindle, the plan's president, acknowledged that many of the physicians who run the community group centers opposed the idea at first.

"Physicians won't accept the idea of consumers in decision-making roles on clinical matters," he said in a recent interview at the H.I.P. central office, 625 Madison Avenue.

But now the doctors are getting used to the program, he said, with the understanding that the consumer groups will advise, not share, in the running of the centers.

'Channel of Communication'

"We see the consumer councils' not being complaint bureaus per se but a channel of communication, for input," added Murray E. Ortof, the head of the plan's consumer affairs department.

H.I.P. began forming the consumer councils last spring. By March, every center in the region will

cently consolidated organization will have one, according to Mr. Ortof.

However, while the plan's management talks in terms of "advice," "input" and "communication," some of the more-militant consumers are thinking in terms of confrontation, demands and control.

Last October, about 40 angry adults and children affiliated with the Committee for Accountability stormed uninvited into a directors meeting. They insisted, among other things, on a 24-hour emergency "drop-in" service for East Harlem, a service they contended was required in the H.I.P. contract.

House Calls Resume

"In 24 hours we got an emergency service, and home calls that hadn't been made in six weeks began to start again," said Don Rubin, another activist.

Activist councils, such as the Circle Manhattan group on the Upper West Side and the Yorkville group on the East Side have been holding monthly meetings, firing off letters to administrations and pushing for such things as greater minority-group representation in management, a more "sensitive," less arrogant attitude on the part of some doctors, better optometry and physiotherapy programs and an end to three-hour waits for appointments.

One H.I.P. board member, Lillian Roberts of the District Council 37 public employees union, said that this pressure has been "instrumental" in gaining improvements, such as Saturday office hours at some centers.

Ombudsman Wanted

But activists like Mr. Nichol and Mr. Rubin have a much broader goal: They would like H.I.P. directors to be elected by subscribers instead of appointed. They also want an independent ombudsman to judge complaints and panels of consumers who can screen doctors wishing to join a group.