

What's Crazy About Answering the Telephone

By Michael Fine

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I've now tried twice to make an appointment for a colonoscopy with a gastroenterologist. I also had to call Blue Cross, got put on hold after having to enter a zillion numbers and pressing 2 for this and three for that, and then 25 minutes later got called back by a nice young human! These are the kind of experiences we have all become accustomed to after years of managed care and health care bureaucracy.

No surprises. Health care organizations are not that different from other impersonal bureaucracies like banks or government agencies. We've all stopped using the phone as much, and now often try, at the direction of the robots and automatons, to check the website instead. Which almost never has the answers to our question of the moment, but only answers frequently asked questions, as if *my* question doesn't matter if it isn't frequently asked, as if the person doesn't matter anymore, on the assumption that we are all so much alike that the individual humans we are don't matter, because all that matters is scale, the notion that we can be grouped and packaged and then moved from place to place en masse, in the interest of someone's profit. Not even someone, really. In the interest of some anonymous corporation's profit, corporations having become these distant anonymous entities for which no real humans are responsible, acting in a way that no real human chooses, without memory, conscience, or moral purpose.

But those phone calls got me thinking, back to a time when I started and ran a small family practice. Then, we hired actual people to answer the telephone -- and tried to teach them how to help the people who were calling. We invented a few ways of doing that. We had them ask everyone who called, "Do you want to see your doctor today?" instead of press one if you speak English, press two if you speak Spanish, press three if you need a prescription refill and so on. The way we answered the phone worked out pretty well. People felt heard, most of the time. Their problems got addressed. They were individual humans. We knew their names, their families, and their stories.

But time wounds all heels. We grew. We got more phone calls. We started a call center of our own, so we'd have enough people dedicated to answer the phone and wouldn't keep people waiting. I wanted to pay our receptionists twice what the market required, and hire only college grads, people between college and nursing or medical school so our receptionists would know how to think and how to listen. (Answering the phone at a medical practice is a really hard job, and requires a high degree of verbal and intellectual skill, because the people who call often don't know what is wrong, and often don't know the right words to use or what to ask for.)

But the business pressures of the day overruled my better judgement. We often hired minimum wage folks, right out of high school. Pay people more, we were told, and there won't be enough money to hire doctors, and doctors are what you need to grow a practice. So we scrimped on what we paid receptionists. We grew more. The doctors made out. The nurses and medical assistants and receptionists, not so much. I left the practice. It joined a large group. The large group got sold. I don't know what is happening there now, but I doubt you get people you know when you call, people who listen.

When I placed my third phone call to the gastroenterologist today, got put on hold for ten minutes and then sent to voice mail and didn't get called back, or when I called Blue Cross and got a human, eventually, after punching a thousand buttons and repeating my ID number, my date of birth, and my address about ten times because the automated and real attendants didn't know me from a hole in the wall and had to "validate" my identity, to make sure I was who I said I was, I thought, that that goes around, comes around. We've made health care about profit. Someone is maximizing their income by having an automated attendant, by putting me on hold and never calling back, by sending me to the website and so forth. Maximizing profit. When what I needed was a human being on the other end of the line, a human being who knows me and could listen.

We could pay medical receptionists thirty dollars an hour, of course, and hire two or three times as many, so there would be people to answer phone calls and listen. We could hire bright young people who need jobs, give them the kind of experience they need to be great nurses and doctors, and allow them to save a little money so they could go to health professional school and not graduate drowning in debt.

Instead, we choose to maximize income.

Which is crazy: what we do, or what we *could* do to have decent and human health care? You tell me.