

Regarding: **Accounting for Social Insurance**

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GENERALLY, the revision addresses accounting treatment for Social Insurance, as well as life expectancy, actuarial assumptions regarding costs and SOSI. The actuarial assumptions are the main technological methodology(ies) along with Stochastic Modeling and traditional probabilistic, conditional probabilistic, statistical inference methods, theories and techniques. Complex probability trees with multi-branch networks are another part of the known techniques in the subject of probability. An expanded service model might include some or all of the following elements.

Critique:

A goal of the issuance is to enhance the future ability to pay benefits and normalize costs.

There are emerging technologies in varying stages of development which could supplement or enhance the existing SOSI and mathematical models. A complete technological assessment seeks to determine which technologies will impact medical costs and actuarial life expectancy optimally.

For instance, artificial intelligence and "Advice Giving" algorithms may provide physicians and relevant others with a consensus of expert opinion developed by polling a community of experts for input onto the knowledge base. In the artificial intelligence art, the knowledge engineer is responsible for polling the community of experts and inputting the information onto the knowledge base for use in rendering "Advice Giving" to physicians and relevant others. The overall purpose of this exercise is to achieve a correct diagnosis with a minimum of encounters in the medical care delivery system. This technology is available right now.

Enhancements to the genetic code is another area with significant intermediate to longer term benefits to patients. The mapping of the genetic code is nearing completion.

Emcell implantation is an emerging technology for potential application in a variety of disease processes like diabetes, sickle cell anemia, the liver and other vital organs.

Food technologies and nutrition are other areas for model refinement. For instance, there are natural replacements for sugar which do not have the same adverse impact on glucose management and control. The Paleolithic diet and Mediterranean Diet are known to have better health outcomes than the junk food diet.

Successful medical outreach to underserved communities will obviate the necessity for more costly encounters later in life. In addition, integration of medical treatment with other federal programs could optimize the delivery of service. For instance, the Hill Burton Program and NIH programs exist to deliver expanded care to patients who either could not afford the care or the level of care is so complex that only a centralized think tank of physicians could arrive at an optimal diagnosis and treatment program on a timely basis and at a reasonable cost.

Taxes targeted to the consumption of alcohol, tobacco and junk food map the added revenue to incremental medical care required to manage diseases caused by excess consumption of the substances cited above. By way of example, a single pack of cigarettes could have a considerable tax levied to pay for the expected future costs of medical care for smoking earlier in life.

Medical research and development is another dimension of technology assessment in medicine and related fields. R & D here seeks to define risks to the delivery system and patients, forestall negative effects, articulate alternative methods for achieving the same goals and identifying corrective measures to deal with the negative side effects.

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