

Universal Health “Insurance” does not equal Universal Health Care

Medical Rationing in Britain

In Britain, the National Institute for Clinical Excellence, or NICE, approves medical treatments. According to the British Medical Journal, “*The issue is not whether but how to ration.*”

<http://bmj.bmjournals.com/cgi/content/full/329/7459/227>

Single-Payer in Canada is Inferior to European Systems

“The comparative evidence is that the Canadian health care model is **inferior** to others in place in the OECD. It produces inferior access to physicians and technology, produces longer waiting times, is less successful in preventing death from preventable causes, and costs more than [most] of the other systems that have comparable objectives... The models that produce superior results and cost less than Canada's monopolistic, single-insurer, single-provider system have user fees; alternative, comprehensive, private insurance; and private hospitals. Canada should follow the example of these superior health care models.”

<http://www.fraserinstitute.ca/admin/books/files/HowGoodIsCanHealthCare2005.pdf>

Government Policies Have Inflated Medical Care Prices

Hospitals double their prices to protect themselves from government underpayment, placing the burden on the non-insured patient. See <http://hospitalvictims.com>. In fact, unintended consequences of well-meaning government policies have crippled our health care financing system.

<http://www.chcchoices.org/publications/Market%20Distortions.PDF>

They say...

- Everyone will be required to participate
- Diagnostic and treatment procedures will be set by a central authority
- All of it can be paid for by administrative savings

We say...

- The “administrative savings” will prove to be an illusion.
- Medical care will be governed not by what works best for you, but by legislators, bureaucrats, and lobbyists.
- “Single-payer” is no more likely to provide full coverage for your doctor’s treatment without hassle than does Medicare, Medicaid, and Washington Basic Health.
- Entitlements cripple those they are intended to help. We need solutions that people can understand, not more obfuscation such as Medicare Part D.
- We must have more confidence in those we wish to help.

Alexander Solzhenitsyn comments on single-payer medicine in *The Cancer Ward*.

"But is [the fact that it is free] such a great achievement? What do you mean by 'free'? The doctors don't work without pay. It's just that the patient doesn't pay them, they're paid out of the public budget. The public budget comes from those same patients. Treatment isn't free, it's just depersonalized. If the cost of it were left with the patient, he'd turn the ten rubles over and over in his hands. But when he really needed help, he'd come to the doctor five times over."

Links available online at www.RienstraClinic.com/insurance

Health Care System Reform

Health Savings Accounts

Health Savings Accounts are the best way for us to have maximum control over our health care choices at minimum expense. These combine

- the Health Savings Account itself, into which you put pre-tax dollars
- an insurance policy to cover major medical expenses, also paid with pre-tax dollars

You may use the Health Savings Account to spend on your regular medical and dental expenses, including medications. You add to the account each year. The account gains interest tax-free. Unused amounts carry over from year to year. Should any money be left at retirement, it can be transferred into your IRA. The insurance policy covers catastrophic medical expenses that exceed the amount in your Health Savings Account.

There are many uninsured people who might find a government-subsidized or sponsored Health Savings Account empowering. By giving that person a stake in the cost of medical care, there is a high probability the net taxpayer cost would be less than with any other plan.

Care of the Indigent

Care of the disadvantaged benefits all of us. For most, subsidized or free Health Savings Accounts would provide healthcare as well as make that individual a stake-holder in the process. We need to empower people, and hold them responsible as well.

Competition Lowers Costs

LASIK involves no insurance and plenty of providers. Notice the price. Provide the opportunity and people will compete for your dollar.

Fundamental Measures to Improve Health Care

- Give individuals the same rights a corporation has to purchase health insurance with pre-tax dollars. Don't tie health insurance to the employer.
- Medicare pays the hospital about 30% of what the "rack rate" is. If the hospital charges the uninsured patient less, then Medicare pays less. Solution: allow the hospital to charge patients less, while Medicare pays the same as it does now.
- Require all doctors and hospitals to publish the price of all medical services.
- Develop a system that allows individuals ready access to their medical records.
- Require providers to allow patient evaluation via the internet, for all to see.
- Compensate victims of medical errors fairly. End the litigation lottery.
- End restriction of the number of doctors trained. Promote competition.
- Give consumers the option of lawsuit-prohibited, low-cost medical facilities.
- Provide for a neutral online forum for medical technology assessment, similar to Wikipedia.com.
- Allow insurance companies to sell "no-frills" health insurance.
- Re-invent the pharmacy.
- Create a range of new medical training levels and specialties. Example: skilled technicians could perform colonoscopy or endoscopy under expert supervision.
- Allow the individual states to govern marijuana use, euthanasia, and other local medical issues.
- Increase public support of medical research so that we can learn which natural methods are or are not effective.

More information online at

www.RienstraClinic.com/insurance