

# [The case for health care reform](https://assignbuster.com/the-case-for-health-care-reform/)

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The Case for Health Care Reform. Answer the following questions intelligently What social contract for healthcare exists today? What should it be? 2. Our system (US) is based on public/private collaboration. What are the attributes of a well-functioning system? 3. What are the principles and values that should guide health care policy?
Medicare and Medicaid are two prominent healthcare programs that come under the purview of the Federal government (with some autonomy given to states) and are funded through taxpayer money. Both these programs came into effect when Lyndon Johnson Administration made amendments to the Social Security Act in 1965. The Medicare program is intended to cater to the healthcare needs of senior American citizens as well as disabled persons. There are four main parts that constitute the program. Part A and Part B cover hospital and medical insurance respectively; Part C offers flexibility whereas Part D covers cost of Prescription drugs. The Medicaid program, on the other hand was created to take care of the healthcare needs of those who are economically disadvantaged, but exceptions are made for special cases and circumstances. Put together, these two public healthcare programs give coverage to about 80 million American citizens, whereas the total population is more than 300 million. Moreover, the coverage extended by the two programs are for well-established medical conditions and well-entrenched treatments and procedures, thereby denying support for those patients who resort to emerging and innovative treatment regimes. Although these programs cost the federal government close to $800 billion and comprise 5. 6 %of the nations GDP, they cover less than a third of the population and that too only for select medical conditions and treatments.
It is a well known fact that the United States healthcare system is one of the most inefficient among the advanced economies. Despite being the leading economic power, its ranks below Scandinavian countries Denmark, Norway and Sweden and Western European countries such as France, Britain and Germany in terms of costs incurred, health outcomes, etc. This is a clear indication that the predominant role played by private business corporations (in the form of hospitals and insurance companies) has hampered our healthcare system from meeting its full potential. In a well-functioning system, the private involvement will be limited to the extent that it brings efficiency and innovation to the system. The lack of such checks on private ownership here in the United States has significantly reduced access to quality healthcare to many disadvantaged groups in the population. For example, it is believed that close to 50 million Americans do not have any health insurance to fall back on. This compares unfavorably with more equitable and socially engineered healthcare systems of Scandinavia and Western Europe.
As it functions today, the health care policy framework designed to ensure sustained profitability of insurance companies, private hospitals, etc. This condition should alter radically and the emphasis should be laid on meeting the health-care needs of patients. In other words, peoples healthcare needs should be placed above corporate profits. Even the recently passed healthcare reform legislations do not address core issues head-on; rather they only try to tinker with and correct a few aspects of a deeply flawed system. Hence, the adoption of a social-democratic policy framework is essential in order to favorably turn the situation around. The successful examples are already there; what is required is the requisite political will.
Works Cited:
Centers for Medicare and Medicaid Services, retrieved from on 1st November, 2010.
What is Medicare? What is Medicaid?, retrieved from , on 1st November, 2010.