

# [Health care provider](https://assignbuster.com/health-care-provider/)

[](https://assignbuster.com/)[Health & Medicine](https://assignbuster.com/essay-subjects/health-n-medicine/), [Healthcare](https://assignbuster.com/essay-subjects/health-n-medicine/healthcare/)

A. S. Course: HealthPolicy $ Ethics in Public Health April 8, 2013 Health care as a right or privilege Our moral duty is to take care of each human been regardless the cost. There is nothing more valuable that we possess rather than our health as well there is nothing that should be more costly and more protected then life itself.

On the question “ whoseresponsibilityis to protect” our personal health, the right answer, about the individual or society responsibility most probably “ lies somewhere between” those choices, furthermore by having healthy basis each of the society from one side and society from the other side as well should “ have something to gain”.

Neither of individuals or society should expect that the other should take on whole responsibly, therefore individuals should take at least some responsibility, as well society will serve as a “ safety net”. (Williams, 2012). Over the time, taking care for people who are unable to allow themselves a health care was based on charity, compassion, benevolence rather than some principle of ethics or justice.

Within United States of America and mainly industrialized countries, the “ primary barrier to health care” is related without appropriate “ insurance reimbursement” (National Center for Biotechnology Information, 2001) The constitution of World health Organization at the time will be the first international step to ensure the highest enjoyment health standards settle them up as fundamental and necessary right for everyhuman beingas (“ the right of health”), those internationalhuman rightsas a set of social—norms, laws, institutions based on agreements that secure the right of health enjoyment.

Furthermore every world country is a part of at least “ one human rights treaty” that involves health related rights as well this one will include and health necessary conditions (World Health Organization, 2013). Common set ofgoals, and objectives for both private and public sector partnerships actions to help ethnic, and racial minorities will be provided by the national stakeholders Strategy for Achieving HealthEqualityunder whose umbrella will be covered incorporates ideas, suggestions and comments from “ thousands individuals and organizations, country wide.

National Partnership for Action will state: “ Health equity is attainment of the highest level of health for all people” (National Partnership for Action, n. d. ) Furthermore, across United States 45 million citizens reaming uninsured, borderline or underinsured. The ones who are living in “ poverty” are experiencing the worst health status, keeping in mind several important factors as educational, employment, income and race that determinate personal ability and adequate health care access (National Center for Biotechnology Information, 2007).

Opposite, for instance health plan members in California have many rights, as to have appointment when they need one as well waiting time is limited, to have appointment with a specialist when you needed, to have continuity of care, to receive continuity of care, to receive treatment for certain mental health conditions, second doctors opinion, to know why your insurance plan denies a service or treatment, the right to understand your health problems and treatments, to see writhen diagnosis, to be informed consent when you have a treatment, the right to file a complaint and ask for an independent medical review, right to choose your owndoctor, the right to language services, the right to see medical reports and keep your medical information private, the right to have an advanced directive est. (Department of Menaged Health Care, 2012). The Affordable Care Act The affordable care Act brings consumers back in charge of their own health care.

Undress this law the “ Patient’s Bill of Rights” was created and gives all the United states of America’s people the stability and flexibility they need to make informed choices about their own health: \* Provides coverage to Americans with pre-existing conditions \* Protects your choice of doctors \* Ends lifetime limits on coverage \* Ends pre-existing condition exclusions for children \* Ends arbitrary withdrawals of insurance coverage \* Reviews premium increases \* Helps you get the most from your premium dollars \* Restricts annual dollar limits on coverage \* Removes insurance company barriers to emergency services In the frame of health care law after the Patient’s Bill of Rights was adopted, the Affordable Care Act in regards “ has provided additional rights and rotections” as preventive care at no cost to you and as well guarantees your right to appeal (U. S. Department of Health & Human Services, 2012). Furthermore the Affordable care act will frame individuals, families and business owners in control regarding their health care. Working families and working families will reduce their premium costs providing tax relief as of billions of dollars, which one will represent the largest middle class tax health cut in the United States. From the other side noninsured Americans will have the option to choose health insurance that best works or them in a new open and competitive market (U. S. Department of Health & Human Services, n. d. Unfortunately, today huge gaps remain between poor and rich countries, has been widened mainly in Africa what is not case with the wealthy nations, income inequality has been increased for instance worldwide one billion people live on less than one dollar a day and New York city will remain one of the “ world’s wealthiest cities, but its south neighborhood is one of the nation’s poorest communities” and health care even available is not applicable. Based on this “ public health workers incorrectly” will use the word disparity as a synonym for poverty and a the same time they will establish link the disparities in regards health care availability between rich and poor, White and non-White, native or foreign born, and so on (National Center for Biotechnology Information, 2006).

Keeping in mind that most countries around the world decided that health care is a right instead of privilege the congress session in 2011 immediately will vote to repeal the healthcare reform bill where the reforms will came to the question: “ Is health care a right or privilege? ” (John L. Marshall MD, 2011) References: National Center for Biotechnology Information. (2001, June). Retrieved April 7, 2013, from Justice and the right to a decent minimum of healthcare: http://www. ncbi. nlm. nih. gov/pubmed/11890080 National Center for Biotechnology Information. (2006, December). Retrieved April 7, 2013, from Health for All in the 21st Century: http://www. ncbi. nlm. nih. gov/pmc/articles/PMC1698153/ National Center for Biotechnology Information. (2007, March 28).

Retrieved April 7, 2013, from Healthcare access as a right, not a privilege: a construct of Western thought: http://www. ncbi. nlm. nih. gov/pubmed/17391522 Department of Menaged Health Care. (2012). Retrieved April 6, 2013, from Health Care Rights : http://www. dmhc. ca. gov/dmhc\_consumer/br/br\_rights. aspx U. S. Department of Health & Human Services. (2012, February 6). Retrieved April 8, 2013, from Patient's Bill of Rights: http://www. healthcare. gov/law/features/rights/bill-of-rights/ World Health Organization. (2013). Retrieved April 7, 2013, from Human rights: http://www. who. int/topics/human\_rights/en/ John L. Marshall MD. (2011, February 3). Medscape. Retrieved April 7, 2013, from Is Healthcare a Right or a Privilege? http://www. medscape. com/viewarticle/736705 National Partnership for Action. (n. d. ). Retrieved April 7, 2013, from Health Equity ; Disparities: http://www. minorityhealth. hhs. gov/npa/templates/browse. aspx? lvl= 1; lvlid= 34 U. S. Department of Health ; Human Services. (n. d. ). Retrieved April 7, 2013, from The Affordable Care Act, Section by Section: http://www. healthcare. gov/law/full/index. html Williams, A. (2012, December 2). Is health care a right? And whose responsibility is it? The Washington Times. Retrieved April 7, 2013, from http://www. washingtontimes. com/news/2012/dec/2/williams-is-health-care-a-right-and-whose-responsi/