

Monday, June 15, 2009

SANFORD / ATLAS: Alternatives to government health takeover

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COMMENTARY:

Sixteen years ago, a relatively young, ambitious new Democratic president arrived in Washington determined to transform America's health care system.

His determination was not enough. When the American people took a closer look at the only question that really matters on health care reform - will the proposed changes ultimately help or hurt the patient? - they found President Clinton's ideas lacking. HillaryCare, as it became known, died a fairly spectacular death.

It seems in this case that history does, indeed, repeat itself, as the central premise of the Clinton health care proposals - funneling hundreds of billions of dollars to government in the naive hope that bureaucrats are the answer to our health care system's shortcomings - has come back into vogue with the arrival of another relatively young, ambitious new Democratic president in the White House. That does not mean, however, that the ideas have suddenly become any less objectionable.

Whether it's four-year waiting lines for major surgeries in Canada or four-hour wait times for emergency care in Britain, in practice, government-run health systems by and large fail the very patients they were created to protect. In these systems, access to doctors, surgeries and new lifesaving treatments are severely limited. Innovation is discouraged, and medical technologies are deficient, forcing patients to undergo more invasive and dangerous care. Patient outcomes are worse, and costs keep escalating.

Buying into the notion that good ideas don't have a shelf life, we would offer that medically

sound and financially responsible alternatives are available to a government takeover of health care, keeping in mind the following principles.

- We believe there's benefit to decoupling employment from health insurance coverage by ridding the system of tax preferences for health care. This single change would reduce health expenditures hundreds of billions of dollars while easing the burden of health costs on businesses. A great unspoken truth is that health benefits from employers come at the expense of employees' take-home pay. Raising lost wages would be the first of many benefits to American workers and their families from delinking health insurance and employment.
- We think it's critical that power shifts to the American consumer and away from government, employers and insurers, as evidence shows medical care prices come down when patients pay directly. Government should offer tax relief, such as refundable tax credits, to encourage private health insurance purchasing - especially for low-income families. Similar ideas, like those in the Patients' Choice Act recently put forth by Republican members of Congress, are important for Americans to consider. We would do well also to consider creative ideas such as changing federal payments to state-based medicaid plans to individual vouchers or expanding health savings accounts, as has been done in South Carolina.
- Government can lower the price of health insurance and increase choice for Americans shopping for their own coverage by breaking down arbitrary barriers such as state lines and reducing costly and unnecessary coverage mandates. For instance, a national market for car or life insurance means South Carolinians can buy an Ohio policy or New Yorkers one from California. It makes similar sense to allow people to buy a health insurance plan, no matter from what state, that best fits their family and their values.
- We believe it's imperative that we fix our medical liability system. By some estimates, abuse of our legal system costs our health system \$80 billion annually. Key tort reforms, including reasonable caps on noneconomic damages; freedom to use dispute resolution outside of our courts; and requiring adherence to medical guidelines as a standard for liability in malpractice trials would be a good start.
- Finally, an estimated 80 percent of all the health care innovation in the world springs from American individuals, companies and universities. It is vital that government support an atmosphere that enhances such innovation and discovery rather than restrict it by overregulation. Specifically, the federal government should promote state-based experiments in health care delivery and technology in Medicaid and Medicare pilot programs (in preventive care and home-based nursing, to name two) and also facilitate and aggressively fund scientific research

and innovation in both private and public sectors on advances in diagnosis and treatment as well as in disease prevention.

It's easy to understand the lure of government offering to provide everything - whether during the Clinton years or in today's economically vulnerable times. However, as Thomas Jefferson warned, a government big enough to supply you with everything you need is a big enough to take away everything you have.

Our proposals are based on trusting Americans to use their own money and make their own decisions wisely instead of forcing people to transfer their hard-earned income and health care decision-making to the government. We believe that trust is essential to improving already what is - despite what we're often told - the best health care system in the world.

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