



VIEWPOINT

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Vulnerable Here

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Summary

In light of recent terrorist action in Britain, Ken Blackwell examines the interplay between health care reform and homeland security

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Almost overnight, health care has become a security issue. The news from London and Glasgow brings a striking reminder that Al Qaeda is willing to exploit any national weakness.

In the case of the British, it's an ongoing physician shortage brought on by the inherent shortcomings of their government-run health care system. The shortage allowed Al Qaeda operatives to legally enter the country and quickly become trusted members of its National Health Service.

Foreign doctors are given top priority and almost immediate entrance into Great Britain. In fact, they make up nearly 40% of all British doctors. In the aftermath of the foiled suicide bomber plots, the British must address this glaring threat to their national security.

Canadians face a similar dilemma. In both Canada and Great Britain, the provision of free medical care through a government-based system has created a patient demand that exceeds the health care supply. It is not too much of a stretch to say that this domestic challenge will make countries more vulnerable in a homeland security sense.

In America, health care is becoming the critical issue of the 2008 presidential campaign. All voters care about health care, but it is the deciding factor for more swing voters than for those in either party's base. And moderate women — who statistically can vote either Democrat or Republican — are keenly interested in health care.

Democrats favor a government-centered approach. Republicans are inclined to support a market-based solution.

Whether driven by presidential politics or mandated by patient demand, or even highlighted by a terror threat or a military need, one thing is clear: the way health care is delivered in our country will change. The peril is in thinking our current health care system is inferior — it is not.

America may not have a perfect health care system, but it certainly has the best hospitals, doctors, and medical research in the world. For proof, just go to the Cleveland Clinic, the Mayo Clinic, or Johns Hopkins Hospital and count the number of very wealthy foreign patients from counties with government-run



Health care as a security threat.

health care. When these folks get critically ill, they travel here for treatment rather than settle for what they can get for free at home.

Other nations have chosen to center health care around the collective. Our health care system, like most of our systems, is focused on the individual. Canada and Great Britain promise their citizens high quality universal health care. However, these government-run systems never deliver their promise.

British and Canadian citizens often encounter extended waits — days, weeks, months — for medical treatment. In our system, patients have customized health insurance plans to meet specific needs. Doctors are in ample supply and hospitals boast of cutting edge equipment. Patient choice drives the free market to constant improvement. The current debate to reform our system is a case in point.

As the debate develops, three issues must be addressed.

First, health care in our country is enormously expensive. Last year, we spent \$2 trillion on health care. It accounts for more than 15 percent of our GDP — an inconceivable amount of money.

Second, much of that cost can be avoided through modernizing the system. Health care personnel are educated professionals and are able to effectively use new Web-based computer technologies that could save literally hundreds of billions of dollars every year.

Third, costs can be dramatically cut through continued tort reform efforts.

There is an entire industry of trial lawyers out there who make multi-million dollar incomes off medical malpractice cases. One wealthy trial lawyer is even running for president. As a result, doctors routinely order unneeded tests or unnecessarily powerful medicines that cost thousands of dollars in order to avoid a paper trail that could be used against them in court. Doctors are under a constant threat in the current system. Every dollar these trial lawyers earn results in doctors having to raise prices on treatments for you.

As care becomes more expensive, fewer people can afford coverage. There are now 47 million Americans without health coverage, and the high cost is the reason for many of them. But even they are not going without care. Many of them are using emergency rooms as their primary care physicians, and thus driving up the cost of health care for everyone.

The next president must have a realistic solution to this problem. And this week's news raised the stakes.

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