Health Care Reform: Deliver us from evil, 4 steps to the Pearly Gates

by Laura Casey

What are we really saying when we state our health care system is broken and needs reform? Do we explain what we are really asking for or do we presume some other being will just fix it for us? When is the health care consumer going to jump into the fray? We relentlessly complain about sub-standard care, long waits, and cost and yet the system has not responded appropriately to requests. I wonder why?

Main Entry: 1reÂ·form*1 a : to put or change into an improved form or condition

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Before we remodel our health care delivery system how about a plan? The average health care consumer has no idea how to ask for the care he needs or wants, what she really purchased when she bought insurance (or chose it from her employer) and why we continue to camp out in waiting and emergency rooms wasting hours of our life-time. All the while we abdicate our responsibility and ignorantly scream reform!

If we follow Websterâ€™s guidance and seek an improved form or condition, may we please begin the reform process with evaluation of quality of life. Each and every human life form has a voice, can make choices, and consequently is empowered to craft oneâ€™s very own life by defining a set of standards for oneâ€™s personal quality benchmark.

As we crawl toward enhanced care for ourselves, letâ€™s place quality of life in our hearts and mindfully navigate from a place of personal responsibility to uphold our personal vision of that quality of life as top priority. With a clear goal and image of our life and health standard, we can persistently and constructively ask for the right change which will ultimately create an improved form or condition.

b : to amend or improve by change of form or removal of faults or abuses

What happens when our quality of life slides away? We seek expertise, assistance and care from the doctor in an attempt to restore our standard of living as quickly as possible. In todayâ€™s climate, however, most of us know little more than our doctorâ€™s name. We havenâ€™t researched his or her credentials. We havenâ€™t created a relationship with this person called the doctor, and consequently the doctor knows little about our priorities and our personal standard of living goals and expectations.

As we stand and begin to walk toward enhanced care for ourselves we must require the health care system hold the patient-physician relationship on its just pedestal. Patients and physicians need quality time to bond. Without a mindful sincere relationship, the process to restore your personally defined quality of life will take more of your time and cost more of your dollars. Hmmm, might that feel moderately familiar?

Again following Websterâ€™s advice, remove the faults or abuses. Instead of rewarding the doctor for churn and production, give the physician time to care and know her patients. And, pay those physicians who practice the art of medicine, with quality of life as the sacred goal, handsomely.

2 : to put an end to (an evil) by enforcing or introducing a better method or course of action

What do we do when the system threatens our quality of life? How do we navigate situations that do not meet our quality of life standards? The threats could be side-effects to medications, waiting for care, uncaring doctors or nurses, unclean facilities, rude staff, confusing insurance coverage, billing errors, or lost medical records.

When the system threatens our quality of life and we know we have clearly communicated our goals, we must divert or withhold our health care dollars. There are many creative ways to put an end to (an evil) by enforcing or introducing a better method or course of action. If we hold our quality of life at the central point of our personal health care decisions, then participating in the care conversation becomes easy and natural, even if that conversation is between you and the doctor. Communication with your doctor should be easy, open and flowing.

If, for example, your medication cocktail wasnâ€™t carefully planned and the combination interrupts your quality of life, then talk to your doctor about it and make a new plan; possibly take fewer or different medications. Scour the planet for the right doctor who cares and will listen to you. Be certain his or her staff is professional, compentent and caring.

Stop paying for bad experiences and poor service. Report all non-clinical issues to your local Better Business Bureau (BBB) and use the BBB to research doctor, hospital and insurance company track records. Report sub-standard care to your insurance company (tell them not to pay) and your state board of medical examiners for doctors and JCAHO for hospitals and facilities.

Stop paying for bad experiences and poor service.

3 : to induce or cause to abandon evil ways

Ask our lawmakers to create a system that upholds our quality of life values. Managed Care insurance models (HMO & PPO) create a care environment that allows the consumer to obtain unnecessary care for a quick $25.00 co-payment while systematically setting doctorâ€™s sights on the next patient instead of the one sitting in front of him. Hence the rushed care experience and wait times.

Ask our lawmakers to create a system that upholds our quality of life values. The mass marketing of medications fills the consumerâ€™s mind with hope, fear, worry and fantasy. Consequently symptoms described on the TV send us all running to the doctor for the latest drug because we have convinced ourselves we are symptomatic. Physicians are inundated with medication data so complex they are now shuffling patients and their drug questions to the pharmacist (and we are letting them pawn us off).

Ask our lawmakers to create a system that upholds our quality of life values. That may mean our lawmakers need to butt out of our care choices and decisions. Mandating all sixth grade girls in the state of Texas get inoculated with HPV vaccine may run counter to the quality of life vision for some parents. Mandating all

people purchase health insurance like the laws Massachusetts and California have enacted, may run counter to a personâ€™s quality of life vision.

Ask our lawmakers to create a system that upholds our quality of life values. KISS the current system goodbye. Instead of adding layer upon layer of systems and models at both a state and federal level, step away and Keep It Simple Stupid. Mandating all state residents have to have insurance, expanding Medicaid programs, neglecting to create a standardized medical record system adds to the cost of care every day. Itâ€™s time to come down the mountain and deploy simplified, localized common sense systems.

Rooted in the consumerâ€™s ability to judiciously and selectively utilize health care services and continually communicate about what is most important to us as patients and patient advocates, we shall induce or cause the system to abandon its evil ways.

*www.MerriamWebster.com

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