

Healthcare Reforms

The last objective may seem disconnected from the others. Neither law enforcement nor criminal justice, however, can be reformed without broader societal reform. I have already briefly touched on education. Here, I touch on healthcare. Healthcare impacts the full range of human life from birth to death. Healthcare professionals are esteemed and the impact of their opinions can be humanizing or dehumanizing.

Further, the efficient delivery of health care services has a huge impact on employment. Today, health care services make up almost 20% of gross domestic product. To whatever degree this financial burden can be reduced on employers, meaningful employment has the opportunity to grow.

Currently, patients may have access to certain parts of their medical records, but they do not own them. Medical records are generally owned by the healthcare professional who created them. It is dehumanizing to request a record that would not exist without the requestor only to be denied the record or to be constructively denied the record through an exorbitant research or copying fee. A federal law establishing individual ownership of medical records and limiting the cost of access to those medical records to the actual copying cost empowers patients to control healthcare information that is intrinsically theirs.

Next, express authorization for medical expenses should be required from patients. Many patients visit a healthcare professional and receive an invoice a week or so later from another healthcare professional or entity that they have never heard of and often cannot explain. The patient may have signed a blanket authorization which technically authorizes the expense, but this is a long way from collaborating with the patient about their health care expenses. Patients should be empowered to choose their own laboratory provider, MRI or CAT scan provider, and so forth. Even if patients choose to defer to their primary care professional, empowering patients to make these decisions is humanizing.

Likewise, patients should be able to make informed decisions about their healthcare providers. Currently, any incident which results in disciplinary action, legal action, or financial settlement by a medical doctor is reported to a national database. This database is kept private from the general public, patients, and prospective patients. This database should be made public for any medical doctor who is licensed by a government entity or paid by the government through payment such as Medicaid or Medicare.

Today, almost every state limits the amount of civil damages against healthcare professionals who commit malpractice. Further, they are afforded additional due process protections that are not enjoyed by all other citizens. For example, there are restrictions on the type of evidence that can be used against them. Often, the burden of proof is higher to prove against healthcare professionals or a higher evidentiary standard is required to prove a case against them. There are certain societal

pressures, such as expanded healthcare access, that may justify these damage limits and due process protections. Even so, there is no correlated limit on healthcare professional income. If a person who has been harmed by a healthcare professional is going to be limited in their ability to seek redress, there should be a correlated limit on the healthcare professionals' income.

- [Author](#)
- [Recent Posts](#)



[Brandon Blankenship](#)

Presenter at [Enemy In The Camp](#)

Brandon L. Blankenship is a continuing legal education presenter and business educator. He is the author of [Unmasking Hour](#). He writes weekly posts on the legal industry and is a contributor to the [Nobility Academy](#). He and his wife Donnalee live on their hobby farm south of Birmingham, Alabama.



Latest posts by Brandon Blankenship ([see all](#))

- [Not Your Grandfather's Law Practice Anymore](#) - November 4, 2020
- [Confrontation is a Christian Virtue](#) - September 7, 2020
- [Wholesight](#) - September 5, 2020