

EDITORIAL

Where a world leader might follow

How did Japan, in less than forty years, become one of the world's most successful industrialized nations? After World War II ended, Japan sent hundreds of observers abroad to study other nations, to determine which systems worked best, and then found ways to superimpose successful systems upon Japanese culture.

Japan succeeded beyond her own highest expectations. We in the United States might do well to emulate the Japanese. What works well for one society is quite likely to work well for another.

Consider, for example, national health care systems. We hear about socialized medicine, but few of us have any clear idea how it works. Canadians for twenty years have enjoyed national health care; even non-socialists there admit today that while opposed initially, they now believe they were wrong. Their health plan is an overwhelming success and, while nothing is perfect, doctors and patients alike are more than satisfied.

Canadians are among the first to concede the cost is high; they pay around \$30 billion (Canadian) annually for medical care. If their system were in operation in our country, costs would be about \$240 billion for we have a much larger population. Total medical care in the United States, however, already costs that much and more, and the price is rising faster than any other commodity. Medical bills are paid by Medicare, commercial insurance, private and individual plans, state aid to the indigent (Medicaid), and... heaven help them... individuals without insurance coverage.

Every Canadian is eligible for the finest in health care at no cost. The procedure is automatic. No claims are filed. No haggling about charges for tests, lab work, or surgery fees is necessary. No one faces financial disaster because of illness. Everyone is free to choose his doctor, just as we are in the United States.

In Canada, health care is administered by the provinces. While the federal government helps fund the plans, provinces also raise money through sales taxes, premiums deducted from payroll checks, and other plans designed to apportion medical costs among the population. While many Canadians once were skeptical, few would scrap the plan today.

Doctors would like to be allowed to add small charges over and above the standard fees paid by the provinces, but Canadians feel physicians do quite well. House calls are rarely made. No office hours are kept on Wednesdays. Average annual incomes among doctors in general practice range from \$128,000 to \$182,000. Specialists do much better, of course.

Canadian doctors mail out one bill each month... to their provincial governments... and are free from collection headaches. Malpractice suits (the reason our doctors say they up their fees) are essentially nonexistent in Canada, probably not because negligence doesn't occur, but because it is illegal on pain of disbarment, in Canada, for an attorney to take a case on a contingency fee basis. Malpractice claims in Canada are so rare that the Canadian Medical Association assumes responsibility for most defense actions when court cases do arise, and pays any resulting charges and awards. The anti-contingency fee ruling applies across the board for all legal actions.

Is there something to be said for a system where medical bills are never a Damoclean sword, where the best of care is available to all, where physicians need not protect themselves against outrageous legal action, and where lawyers may not base their fees upon dollar judgments against physicians (or anyone else)?

Possibly, just possibly, Canadians could teach us a valuable lesson if we but had the wit to observe and learn from their experience.

If the Japanese could accomplish that feat, why cannot we?