

Author of NYT Op-Ed Says Free Market Can't Provide Health Care

In one of the worst opinion pieces published in *The New York Times* in recent memory, Farzon A. Nahvi, an emergency medicine physician, argues the free market cannot provide health care because some patients arrive at the hospital unconscious:

As an emergency medicine physician in a busy urban hospital, I have patients brought to me unconscious several times a day. Often, they are found down in the street by a good Samaritan who called 911 on their behalf. We are required to care for them, and most of these patients are grateful at my attempts to help them. More than once, however, such patients have regained consciousness furious. It wasn't that they didn't want to live—they were all simply upset at the costs their hospitalization incurred ...

A believer in free-market medicine, Mr. Ryan has said about health care: "You get it if you want it. That's freedom." Yet being given services without your consent, and then getting saddled with the cost, is nothing like freedom.

Economist John Cochrane explains what's wrong with this type of argument:

Yes, a guy in the ambulance on his way to the hospital with a heart attack is not in a good position to negotiate. But what fraction of health care and its expense is caused by people with sudden, unexpected, debilitating conditions requiring immediate treatment? How many patients are literally passed out? Answer: next to none.

What does this story mean about treatment for, say, an obese person with diabetes and multiple complications,

needing decades of treatment? For a cancer patient, facing years of choices over multiple experimental treatments? For a family, choosing long-term care options for a grandmother with dementia?

Most of the expense and problem in our health care system involves treatment of chronic conditions or what turns out to be end-of-life care and involve many difficult decisions involving course of treatment, extent of treatment, method of delivery and so on. These people can shop. Our health care system actually does a pretty decent job with heart attacks.

And even then ... have they no families? If I'm on the way to the hospital, I call my wife. She is a heck of a negotiator.

Moreover, health care is not a spot market, which people think about once, at 55, when they get a heart attack. It is a long-term relationship. When your car breaks down at the side of the road, you're in a poor position to negotiate with the tow-truck driver. That is why you join AAA. If you, by virtue of being human, might someday need treatment for a heart attack, might you not purchase health insurance or at least shop ahead of time for a long-term relationship to your doctor, who will help to arrange hospital care?

And what choices really need to be made here? Why are we even talking about "negotiation?" Look at any functional, competitive business. As a matter of fact, roadside car repair and gas stations on interstates are remarkably honest, even though most of their customers meet them once. In a competitive, transparent market, a hospital that routinely overcharged cash customers with heart attacks would be creamed by reviews, to say nothing of lawsuits from angry patients. Life is not a one-shot game. Competition leads to clear posted prices, and businesses

anxious to give a reputation for honest and efficient service.

Click here to read the rest of his article. {eoa}

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