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The health care sector is one of the most dynamic sectors of any economy. Technology used to provide medical services has significantly changed over the past few years. This implies that some technologies used are now obsolete and there is need to improve on IT (Information Technology) which is capital intensive (Acton, 2011). Currently, hospital managements are at cross-roads since they have to ensure quality health service delivery as well as improved services with meager resources at hand.

Health care services have become more expensive in the recent years since equipment used are costly to acquire and much money is required to maintain and operate them. Acquiring healthcare services has become a nightmare to citizens in underdeveloped countries who lack health insurance cover from an established insurance company. Actually, some end up poor after selling their assets or even spend life time savings as they seek medical attention. Cash payments for health care services have thus become a catastrophe that leaves patients doing badly financially. However, the development of health insurance companies has come as a relief to civil servants in third-word and underdeveloped countries as well as citizens from developed countries (Green, 2014). This is because the insurance cover is able to clear medical bills and facilitate routine health check-ups.

The health care costs are projected to increase moving into the future due to a number of factors. Some of these factors include; increased cost of training doctors and nurses, medical equipment and tools have become more sophisticated making them very costly and specialized training to operate, the demand for health care services has significantly increased due to development of lifestyle diseases, last but not least, there are a few people willing to do health studies and specialize in the medical line to bridge the gap that is existing in the health sector (Acton, 2011).

The answer to the reason why health care has become so expensive has not been addressed by concerned bodies. In trying to understand this parody, we ought to analyze government health policies and structures (Berger, 2016). Today, for accountability reasons, health care officers are paid on “Activity –based costing”. This implies that the health practitioner will record the exact time they have taken to work on a patient and the patient will have to pay a third of the hourly rate that the practitioner is rewarded for delivering the service. Many states have done legislation that positions practitioners to very serious penalties in case they do wrong diagnosis and treat a patient from a condition that they do not suffer from. To avoid and reduce the risk of doing wrong diagnosis; patients have to be taken through rigorous scans and tests to a certain the condition and the right medication that the patient should use. All this comes with a cost that is transferred to patients hence making health care services very expensive (Green, 2014). The impact of this issue is ever increased costs for healthcare services as the rates practitioners are paid are revised annually and thus the need to have a long-term sustainable payment policy.

The cost of health care as it stands may not be really reduced but can be managed to avoid future escalation. Economist argues that a sick nation is a poor nation; this in essence demonstrates how important it is to have a healthy nation. How can we then achieve a healthy nation? In a bid to ensure the wellness of a nation, governments have huge budgetary allocations for health care research and innovation (Berger, 2016). In my view, governments can collaborate and pull resources together and come up with a research team in their region to cut off research related costs. The saved capital may be used to subsidize the cost incurred by patients. Since most medical equipment are very expensive and are at times under-used, hospitals can share such equipment. This will make sure equipment are optimally used and that the cost of operation and serving are saved.

I would recommend health insurance institutions to have a special package that low income earner can afford such that they may be encouraged to take health cover policies. This will give that access to specialized care when they need it and ensure that their financial life is not turn around by sickness (Berger, 2016). On the same note, people should be encouraged to do regular medical check-up to help control some diseases. Alternatively concerned parties should run campaigns on the importance of healthy living.

Having a scenario where all the above mentioned recommendations are implemented, then I believe that our hospitals will have significantly reduced patient traffic. This is because, many patients in hospitals today are suffering from lifestyle diseases and if they are managed, then our hospitals will only handle chronic diseases. Similarly, if low income earners can obtain an affordable health cover policy, then they will have the opportunity to do regular check-ups and maybe receive treatments in good time. Generally, we would have a healthy nation.

**References**

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