#### REGULATORY AND ALLOCATIVE HEALTHCARE POLICYMAKING

#### INTRODUCTION

**Regulatory policies** direct others' activities, behaviors, and decisions. Governments set regulations at all levels. Similar to allocative policies, these are put in place by the government to make sure that goals are reached for the public good.

**Allocation rules** benefit a specific group or class of people or organizations at the expense of others and help to achieve public goals. These laws are subsidies politicians use to change the supply or demand for particular goods and services or to ensure that certain groups of people can obtain them.

## Importance of healthcare policy in society

Healthcare policy encompasses the choices, objectives, and measures that dictate how healthcare is provided and obtained. Policies may comprise, for instance, state laws governing safety and legal matters or procedures governing medical treatment and medication provision to patients at a particular hospital. "Healthcare policy" also includes national policies about healthcare costs, coverage, and accessibility.

Establishing standards that benefit patients, healthcare organizations, and our healthcare system makes healthcare policy crucial. Establishing guidelines can aid in avoiding mistakes made by people and inadequate communication when making medical decisions.

In addition to using your knowledge to assist in shaping future policies, nurses and health administrators can ensure that patients receive the best treatment possible by comprehending and adhering to guidelines. Patients learn more about their rights when they try to comprehend healthcare policy.



## Regulatory healthcare policymaking

Market-entry limits, rate- or price-setting controls on health service providers, quality controls on the provision of health services, market-preserving controls, and social regulation are the five fundamental types of regulatory health policy.

The fifth category aims to accomplish socially desirable goals like safe workplaces, non-discriminatory healthcare delivery and decreased negative externalities (side effects) connected to producing or consuming goods and services. The first four categories are variations in economic regulation.

Regulations that limit market access include those about healthcare organizations' and practitioners' licenses. Planning programs are policies that restrict market entrance and require health service providers to acquire preapproval for new capital projects.

Certain areas of the pursuit of health are governed by price controls, notwithstanding the overall disapproval of price-setting rules. Examples include the federal government's creation of a fee schedule for paying doctors who treat Medicare patients and its control over the rates at which hospitals reimburse for services rendered to Medicare patients.

## Allocative healthcare policymaking

Achieving **public goals** allows allocation rules to give net benefits to a specific group or class of people or organizations at the expense of others. These laws are subsidies politicians use to change the supply or demand for particular goods and services or to ensure that certain groups of people can obtain them. For instance, the government has substantially funded the medical education system because it believes that the market would not have enough doctors if medical schools did not get funding. Similarly, the government-funded hospital buildings for many years were based on the theory that markets in low-income or sparsely inhabited areas would undersupply hospitals.

Several subsidies have been implemented to guarantee that some people can access health care. The ACA's provision of health insurance coverage subsidies to millions of individuals is one of its main features. Nonetheless, the Medicare and Medicaid programs have been massively allocative policies before the ACA and in the future. Medicaid spending may exceed \$918 billion by 2023, and Medicare spending may exceed \$1 trillion by then (Sisko et al. 2014)

# Challenges and controversies in healthcare policymaking

A set of ideas is called an **ideology**. Every ideology usually has some beliefs about the ideal economic system, such as capitalism or socialism, and a kind of government, such as autocracy or democracy. There are instances where the same term denotes an ideology and one of its central concepts. Socialism, for example, can refer to either an economic system or an ideology that backs that system. Political scientists attempt to come up with meanings for widely

accepted phrases because they can also use them to refer to different ideologies. For instance, communism has come to be used colloquially and in academic circles to refer to <a href="Marxist-Leninist philosophies and Soviet-style regimes">Marxist-Leninist philosophies and Soviet-style regimes</a>, although the terms have occasionally been confused.



The phrase political ideology has been criticized for being "the most elusive concept in the whole of social science" and is therefore riddled with issues. Ideologies can be distinguished from political strategies like populism as it is commonly defined and from single issues around which a party may be built, like civil libertarianism and support or opposition to European integration, though either may or may not be central to a particular ideology. Ideologies tend to identify themselves by their position on the political spectrum, such as on the left, the center, or the right. Numerous studies demonstrate the heritability of political ideology within families.

Clearly defining **patient rights** allows patients to have consistent expectations during treatment and aids in standardizing care across healthcare areas. "To empower people to take an active role in improving their health, to strengthen the relationships people have with their health care providers, and to establish patients' rights in dealing with insurance companies and other specific situations related to health coverage," states the American Cancer Society, organizations should create patient bills of rights. Modern patient rights bills, like previous bills of rights, specify that people are entitled to particular care regardless of their financial situation, gender, race, or affiliation with a specific religion.

Commonly recognized rights typically stem from a core set of **ethical precepts**, such as patient autonomy, beneficence, nonmaleficence, distributive justice, fiduciary (trusting) relationships between patients and providers, and the inviolability of human life. Determining which principle has more intrinsic value than another is a philosophical question that differs amongst authorities. It is common for beliefs to be in direct opposition to one another. In the absence of a legislative requirement, the healthcare professional must put these principles first to give the patient a satisfactory outcome.

#### **Future trends and directions**

The Internet of Things, wearable technology, virtual reality, and information technology have all transformed healthcare operations and business practices. These technological innovations

have become a necessary part of our everyday lives. Patients can now choose from a wider variety of healthcare options with more significant consideration, ushering in a new era of patient-centric healthcare—the digital revolution's impact on individual and institutional healthcare.

Because it makes it easier for patients to participate in the process of receiving medical care, digital health can contribute to innovation in the health field. When the patient is no longer in a condition of well-being, they can overcome their poor health. In this instance, the patient can participate in the choices affecting their medical care. To make the best decisions regarding their health, patients must conduct online research or use digital health applications such as those on their phones.

To enhance **disease pandemic readiness**, a novel strategy is the readiness and Resilience for Emerging Threats (PRET) effort. It acknowledges that different pathogens, like foodborne, vector-borne, and respiratory, can be treated with the same systems, capacities, knowledge, and instruments. The most contemporary methods and resources for group learning and collaborative action, developed during the COVID-19 pandemic and other recent public health crises, are integrated within PRET. The values of coherence, equity, and inclusivity are prioritized. PRET offers a forum for cooperation between national, regional, and international partners to improve readiness

#### CONCLUSION

Regulatory policies direct others' activities, behaviors, and decisions. In contrast, allocation rules are set to achieve public goals and give net benefits to a specific group or class of people or organization at the expense of others. Understanding and adhering to healthcare policies helps nurses and health administrators shape future policies, ensure patients receive optimal treatment, and educate them about their rights.

The digital revolution, facilitated by technologies like the Internet of Things, wearables, and virtual reality, is revolutionizing healthcare operations, enabling patients to select from a broader range of healthcare options.

Healthcare professionals and policymakers should be educated on the contributions of community health workers and other groups to health, disease management, and prevention.

### **REFERENCES**

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