

We propose a healthcare system built around **individual choice, competition, and decentralised decision-making**, rather than large government-run systems. The aim is to create a structure where patients control spending, providers compete to deliver better care, and innovation is encouraged through market incentives.

1. Move Away from State-Run Provision

The current model, dominated by institutions such as the National Health Service, concentrates funding, pricing, and service provision in the hands of government. We propose gradually transitioning toward a **pluralistic healthcare market** where:

- Individuals choose among competing insurers and providers
- Hospitals and clinics operate independently rather than as part of a national system
- Funding follows patients rather than institutions

Competition among providers would encourage better service quality and cost discipline.

2. Empower Patients Through Personal Health Accounts

Healthcare spending should be placed under **individual control**.

One approach is to expand **tax-advantaged medical savings accounts**, allowing people to:

- Save money specifically for healthcare expenses
- Pay directly for routine care
- Combine these accounts with **catastrophic insurance** for serious illness or injury

This structure encourages cost awareness and reduces unnecessary spending while still protecting people against major health risks.

3. Remove Barriers That Restrict Supply

Many healthcare costs stem from regulatory barriers that limit the number of providers and services available. Reform should include:

- Expanding training capacity for doctors and nurses
- Allowing professionals such as pharmacists and nurse practitioners to provide more treatments
- Permitting cross-border and digital care

- Streamlining approval processes at regulators

Increasing the supply of healthcare services would place downward pressure on prices.

4. Introduce Transparent Pricing

Patients should be able to see the price of medical services **before receiving care**.

Providers should publish clear prices for common procedures, consultations, and diagnostics. Transparent pricing allows patients to:

- Compare providers
- Make informed decisions
- Reward efficient providers with more demand

Price visibility is a key requirement for a functioning healthcare market.

5. Encourage Voluntary Safety Nets

Support for those who cannot afford care should be provided through **targeted assistance and community mechanisms**, including:

- Charitable foundations
- Mutual-aid health associations
- Direct subsidies or vouchers for low-income individuals

The goal is to protect vulnerable patients without building a large centralised bureaucracy.

6. Reform Medical Liability

The current malpractice environment encourages defensive medicine, which increases costs. Reform should aim to:

- Simplify dispute resolution
- Reduce excessive litigation costs
- Focus compensation on genuine harm

This would lower insurance costs for providers and reduce unnecessary procedures.

7. Focus Government on Core Roles

Government should retain a **limited but important role**, including:

- Public health surveillance and epidemic response
- Basic safety standards
- Targeted financial support for those unable to afford coverage

The objective is to ensure safety and fairness while allowing innovation and competition to flourish.

In summary:

We propose a healthcare system centred on **patient choice, competitive provision, transparent pricing, and personal financial responsibility**, supported by targeted assistance for those in need rather than a single centrally managed system.