



Rights, Responsibilities and Health Reform:

权利，责任和医疗保健改革：

Understanding the Relationship Between Hospital and Patient in the U.S. Health Care System

理解在美国医疗保健系统内医院和患者间的关系

Prepared for Southern Medical University Delegation

为南方医科大学代表团准备的讲演

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美国富理达律师事务所

- 900+ attorneys in 20 offices, including Shanghai
在全球拥有20个办事处 (包括在中国的上海办事处), 超过900名的专业律师
- #1 Health Care Law Firm in U.S. (U.S. News and World Report – 2012, 2013, & 2014)
在2012, 2013及2014年, 连续三年被“美国新闻与世界报道”评为全美在医疗保健方面排名第一位的律师事务所

Agenda

演讲提纲



- **Understanding the Relationship Between Hospital and Patient in the U.S.A.**
理解医院和患者间的关系
- **Patient Rights**
患者权利
- **Evolving Financial Relationship Between Patient and Provider**
在患者和医疗提供方间不断深化地财政关系

Patient Rights

患者权利



- **Moral/ethical vs. Legal rights**
道德/伦理与法律权利
- **Sources of Rights**
权利的来源
- **Trend – the “Patient Rights” Movement**
趋势 - “患者权利” 运动

Patient Rights

患者权利



- “informed consent to treatment”
对治疗需表示同意
- Freedom from abuse and neglect
不被虐待和忽视的自由
- Prohibition from discrimination (race, religion, gender, sexual orientation, source of payment)
禁止各类歧视（种族，宗教，性别，性取向，及付款来源）
- Be examined and stabilized in emergencies at hospitals
在医院急症时被检查病情且稳定状况
- Privacy and confidentiality (“HIPAA”)
隐私和保密（“健康保险流通与责任法案”）
- Freedom from restraint and seclusion
不被束缚和隔离的自由

Is there a Right to Health Care in the U.S.?

在美国是否有获得医疗保健的权利呢？



■ “Payers” (Third-party reimbursement)

“付款方”（第三方报销）

- Governmental Payers (Medicare, Medicaid, Veterans Administration, Tricare, Indian Health Services, local/other)

政府付款方 (医疗保险, 医疗补助, 退伍军人管理局, 军队医疗部门, 美洲印第安人卫生服务, 本地及其他的)

- Commercial Payers (1,000+ private health insurance & 500 health maintenance organizations, 1,000 Preferred provider organizations) e.g., Blue Cross/Blue Shield, Aetna, Humana, Cigna, United, etc.)

商业付款方 (1000多个私人医疗保险和500个健康维护组织, 1000个首选医疗供应方组织, 例如: 蓝十字/蓝盾, 安泰, 哈门那公司, 信诺, 美联, 等等。)

- Employers, self-insured, contracted with commercial payors as “third-party administrators”

雇主, 自我保险, 与作为“第三方管理员”的商业付款方签合同

- Workers Compensation

劳动者报酬

- Self-pay & Charity

自付薪酬与慈善救济

Changing How Health Care is Paid

如何改变对医疗保健的支付方式



- Historically paid on a “fee-for-service” basis
以“有偿服务”为基础作历史性地付款
- Changed to payment on a diagnosis or “case” basis
转变成 - 以诊断为基础付款或以“个案”为基础付款
- Changes payment/delivery paradigm:
Reward value instead of volume
更改付款/交付模式：
以价值作酬报，而不是以量作酬报
 - Value based purchasing, shared savings, gainsharing, bundled payments, episodes of care, capitation
- 基于价值而作购买，共享储蓄，分享收益，捆绑支付，对医疗护理分疗程，按人数承包医疗

National Health Reform: Changing How Health Care is Paid

全国医疗改革：如何改变医疗保健的支付方式



- Coordinate care among and across providers
对整体医疗护理方们且在他们之间作协调
 - New structures promoting actual and virtual integration
新架构推动实际和虚拟的整合
 - Accountable Care Organizations (ACOs)
负责的护理组织
 - Medical homes
医疗院
 - Home based chronic care management
以家庭为基础的长期护理管理
 - Community health teams
社区卫生服务团队

What does “Health Reform” mean?

“医疗改革”意味着什么？

- Federal Law: "Patient Protection and Affordable Care Act of 2010" ("ACA" or "ObamaCare") March 23, 2010

联邦法案：“2010年患者保护与平价医疗法案”
(简称“ACA”或“奥巴马医改”) - 2010年3月23日

- The provisions become effective over the next 8 years
该规定将在立法后的未来8年内生效

- Goals: 目标:

- Provide "access" to insurance for all Americans
为所有的美国人提供享有医疗保险的途径
- Contain costs
控制成本
- Protect quality
保障质量



Opportunities for Chinese Health Care Providers in the U.S.

在美国为中国医疗保健商所提供的机会



■ There are real challenges

存在真正的挑战

- Drive for cost reduction
对降低成本作的推动
- Movement of uninsured to Medicaid (lowest reimbursement)
原未参保者现已参加了医疗补助 (最低报销) 的新动向
- Overcapacity of hospital beds
医院病床过剩
- Perception that drugs, devices diagnostics are overpriced
对药品及设备诊断超价的观念
- Challenging labor market
正挑战劳动力市场
- State-by-state regulation
按洲颁布的条例

■ But some challenges are also opportunities

但是, 这些挑战同样也是机会





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Questions and Discussion

问题与讨论



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