

Mission:

To build a network of international workforce, mobilizing communities to be self-sufficient, executing effective and efficient assessments, feasibility studies, and implementing projects for the complete physical, mental and social wellbeing of all.
—Optimal Wellbeing.

What do we do?

A-Kins Analysts and Project Managers, a minority woman owned community based small business, is a specialty provider of Health Consulting Services including:

- Health Care Advisory & Support Services
 - Health Care Strategic Plans/Project Management
 - Business Plan Development/Financial Resource Planning/Analysis
-Health Care Systems

Development; Research; Analytics; and community based social determinants of health -

Economics
"Successfully implementing challenging projects in challenging places"

INSIDE THIS ISSUE:

The Mirage	2-3
Depression: The Illusion	3-4
The Observed Plan: Structure, Systems and Strategy	5-8
The Expected Plan: Structure, Systems and Strategy	8-13

A-Kins Newsletter 2024

VOLUME 10, ISSUE 1

DECEMBER 12, 2024

US: Healthcare in Reform

The Mirage, an Optical Illusion





US Healthcare in Reform

Basic Scientific Concepts: **Observed/Expected**

A **Mirage** is a deceptive sighting of an object in an optical illusion through rays of light bordering between two air densities, usually hot and cold, caused by a refraction of light passing through two mediums of different densities.

Most people know a mirage as a deceptive sighting of an oasis of water in the middle of a desert place. A refraction of the reflection of the blue sky on the desert floor, making one see a body of water.

The object is US Healthcare Reform, the status of the health of the people as it reflects through structure, systems and strategy, has moved through two different atmospheric densities and is causing a mirage, making everything look just fine, but nothing is fine. The people are not well and the foundations on which the health of the American People was built is broken, hence the pandemic, with over a million people dead in US alone, in less than two years.

Never Again!

The same thing happened to the economy crisis in 2008/2009. Everyone insisted everything was fine until nothing was fine, and a great economic crisis began.

The Mirage

An Object =
US
Healthcare Reform

Two layers of air with
different densities

=
Hot and cold

Rays of Light =
Refraction

An Illusion

It has been ten years since A-Kins Analysts began writing about the need for US Healthcare Reform. Seven years into this report, the pandemic began. A sign the foundation of US healthcare system is giving, falling apart. One would think reform would come to mind during the stages of grief after a pandemic, and this would lead to action, but that has not been the case. US has been slow to grief, and most have tried to move on without grieving. Moving on has not been possible because the health status of the people is connected to the economic status of the people. The pandemic has caused a ray of light to shine on healthcare and the reflection and refraction has caused people to see a mirage, an oasis in desert places, instead of a US healthcare foundation problem.

The initial reaction to the pandemic trauma was **denial**, believing that somehow by doing nothing the pandemic would go away. That did not happen.

The next thing was **anger**, seeing a lot of people dying and becoming angry at the fact that this could happen to US. Everything fell apart.



US Healthcare in Reform

US Healthcare System: **Observed/Expected**

The third reaction was **bargaining**, people picking their pieces up, negotiating their livelihood, and trying to get on with their lives. Even this did not go well because of depression.

Depression has now set-in, both mental and economic. Once again, people are trying to cope with the after-shock effect of the pandemic. The pandemic has caused an economic depression, and an economic depression leads to mental depression in people and their health, the reality of the aftershock effect of a pandemic, and a stage in the grieving process of the pandemic. Hopefully, US will pass through this mirage, a deception in vision that makes one believe everything is fine when nothing is fine, and the depression phase of grieving, accepting the need for US Healthcare Reform.

Before we move to the acceptance stage of grief as a nation, it is time to accept US Healthcare Reform!

It is time to accept US Healthcare Reform and allow the stages of grief lead US to **Healthcare Reform Action**.

Right after the World War I, 1914-1918, the pandemic (Spanish Flu) began, 1918-1920, and then the

Healthy People =
Healthy National Economy

Stages of grief:

“denial”

“anger”

“bargaining”

“depression”

“acceptance”

=

Take Action

Health Care Dysfunction =
Economic Dysfunction

Health of the People =
Healthy Economic Status

great depression started from 1929 -1939. This called for a Health and Care Reform by Eleanor and Franklin D. Roosevelt (FDR), known for implementing the “New Deal” from 1933-1938. The New Deal was a bunch of public work projects, financial reform and domestic programs, including social, health and care reform.

(NationalArchives.gov)

Over 87 years later, on September 11, 2001, US was at war. By December 2007, the great depression began and lasted till 2009. The COVID-19 Pandemic began December 2019, and in US, February/March 2020.

For Health and Care Reform to take place, US must accept US Healthcare Foundation problems and embrace “**The Change Effect**” which begins with ‘**Knowledge of the need for change**’.

Getting to the mirage, one may be able to look back at the object, guided by the rays of light and see more clearly what the object we started with really looks like.

Looking through structures, systems and strategy –The Mirage, the rays of light can guide one back to the object in focus, Healthcare status and the need for reform using



US Healthcare in Reform

US Healthcare System: **Observed/Expected**

Structure, Systems and Strategy. This can help us gain “Knowledge of the need for change”. The foundation of US Healthcare is built on structure, systems and strategy.

OBSERVED

Structure: Physical model of US Healthcare

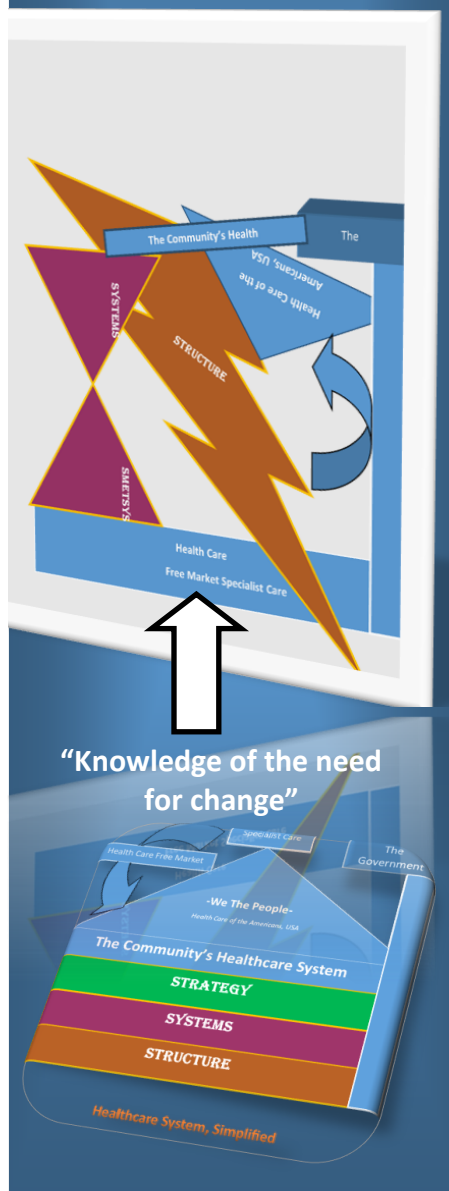
It is observed that the power belongs to the healthcare market and the healthcare structure has had a “green stick” fracture in favor of the healthcare market and its structure. The US Healthcare structure is built like a wall street business model to create wealth and has nothing to do with the Health of the American People.

Healthcare policy is now set by the healthcare market through the Federal Government, in favor of creating wealth within the market.

The price of US Healthcare is set by the market, and the only cost saving is to create more wealth for the market.

Funds, although controlled by the government, eventually end up working for the market to make more money, and not sponsor whatever does not yield to the market’s favor. The programs “not

The Illusion



in favor of the healthcare market needs” are then sponsored by the government. Hence, the Federal funds also work in favor of the healthcare market.

Finally, the healthcare market is selective of who it serves. The market only serves the needs of its customer selection and no one else.

The healthcare status of the people is not controlled by the healthcare market, but the healthcare outcome of the people is directly correlated with the market and who the market chooses to serve. The healthcare status of those not served by the market is very poor.

Systems: Operational model of Healthcare

The US healthcare system, although generated by the federal agencies has been skewed in favor of the healthcare market and customer selection. The government has been operating in this skewed system for a while now and it has been fully embraced and empowered by policy.

Healthcare operational pricing, funding and cost savings follow the green stick fracture of the healthcare structure, in favor of



US Healthcare in Reform

.....Where we are: Power, Funds & Market

The Community's Health

The Government

Health Care of the
Americans, USA

SYSTEMS

STRUCTURE

SMETSYS

STRATEGY

Health Care

Free Market Specialist Care

Current Healthcare System

US Healthcare in Reform

The Plan: **Observed**

.....Where we are: Power, Funds & Market

Observed	Observed Knowledge of the need for change
<p>STRUCTURE</p> <ol style="list-style-type: none"> 1) Power 2) Policy 3) Cost Savings, Price 4) Funds, Market 5) Health Care Status, Customer Selection <p>Need for Change</p>	<ul style="list-style-type: none"> • The Government: Government Regulatory Agencies and Government Administrative Agencies: Lost control of Policy, Price and Market • The Health Care Market: Taken over Power, Policy, and Market. • The People and Their Communities: Lost control of Power, Health Care Status and Customer Selection.
<p>SYSTEMS</p> <ol style="list-style-type: none"> 1) Power 2) Policy 3) Cost Savings, Price 4) Funds, Market 5) Health Care Status, Customer Selection <p>Need for Change</p>	<ul style="list-style-type: none"> • The Government: Government Regulatory Agencies and Government Administrative Agencies: Lost control of Policy, Cost Savings, Price, Funds, Market and Customer Selection. • The Health Care Market: Taken over the Power, Policy, Price, Market and Funds. • The People and Their Communities: Lost control of Power, Funds, Market, Health Care Status and Customer Selection.
<p>STRATEGY</p> <ol style="list-style-type: none"> 1) Power 2) Policy 3) Cost Savings, Price 4) Funds, Market 5) Health Care Status, Customer Selection <p>Need for Change</p>	<ul style="list-style-type: none"> • The Government: Government Regulatory Agencies and Government Administrative Agencies: Strategic Cost Savings, Price, Health Care Status and Customer Selection. • The Health Care Market: Taken over the Power, Policy, Price, Market and Funds • The People and Their Communities: Lost control of Power, Funds, Cost Savings, Health Care Status and Customer Selection



US Healthcare Reform

The Plan: **Observed**

.....Where we are: Power, Funds & Market

Major Functions of the Health Care System	The People within their Communities	The Government	Health Care Regulatory Agencies	Health Care Market	Government Administrative Agencies
Power	X	✓	✓	✓	X
Policy	X	✓	✓	✓	X
Funds	X	✓	✓	✓	X
Market	X	X	X	✓	X
Price	X	X	X	✓	X
Cost Savings	X	✓	X	X	X
Health Care Status	X	✓	✓	X	X
Customer Selection	X	X	X	✓	X



US Healthcare in Reform

Basic Scientific Concepts: **Observed/Expected**

the market.

Customer selection and health outcomes seen in the operations of the healthcare system is in favor of creating wealth for the healthcare market and has nothing to do with the aspired health outcome of the American people.

Strategy: Ongoing heartbeat of Healthcare. Reflects the ongoing operations towards set long and short-term goals of US Healthcare

The Federal government holds the power of US Healthcare strategy and policy, after consultation with the people, i.e. Healthy People 2030. Although the eventual healthcare strategy is cost savings based on prevention and price reduction, these cost savings are yet to come to fusion.

The strategy is developed, and the healthcare status is observed, but there are no program interventions to monitor investment in change. So, the Federal Government has a bunch of expectations and observations, with no intervention to implement or monitor, measuring advanced evaluation of the change effect. i.e. Changing the school diet and monitoring school children growth, obesity rates, and lapse/lag time to diabetes in the youth or early adulthood. Instead, the local

Getting Past the Illusion

Knowledge of the need for change

jurisdictions are left to battle for pilot project funding for implementation of promising and best practices. Interventions, never embraced by the government and implemented across the country with full funding.

The Federal Government also controls the funds to monitor and track the healthcare status of the American People, observed as the preferred healthcare market customer selection. The healthcare market's long-and-short-term strategy is to create wealth, and not healthy people.

EXPECTED

Looking past the illusion, one sees where we are at and where we should be –*Observed versus Expected*. This gives us the “knowledge of the need for change.”

Structure: Physical model of US Healthcare

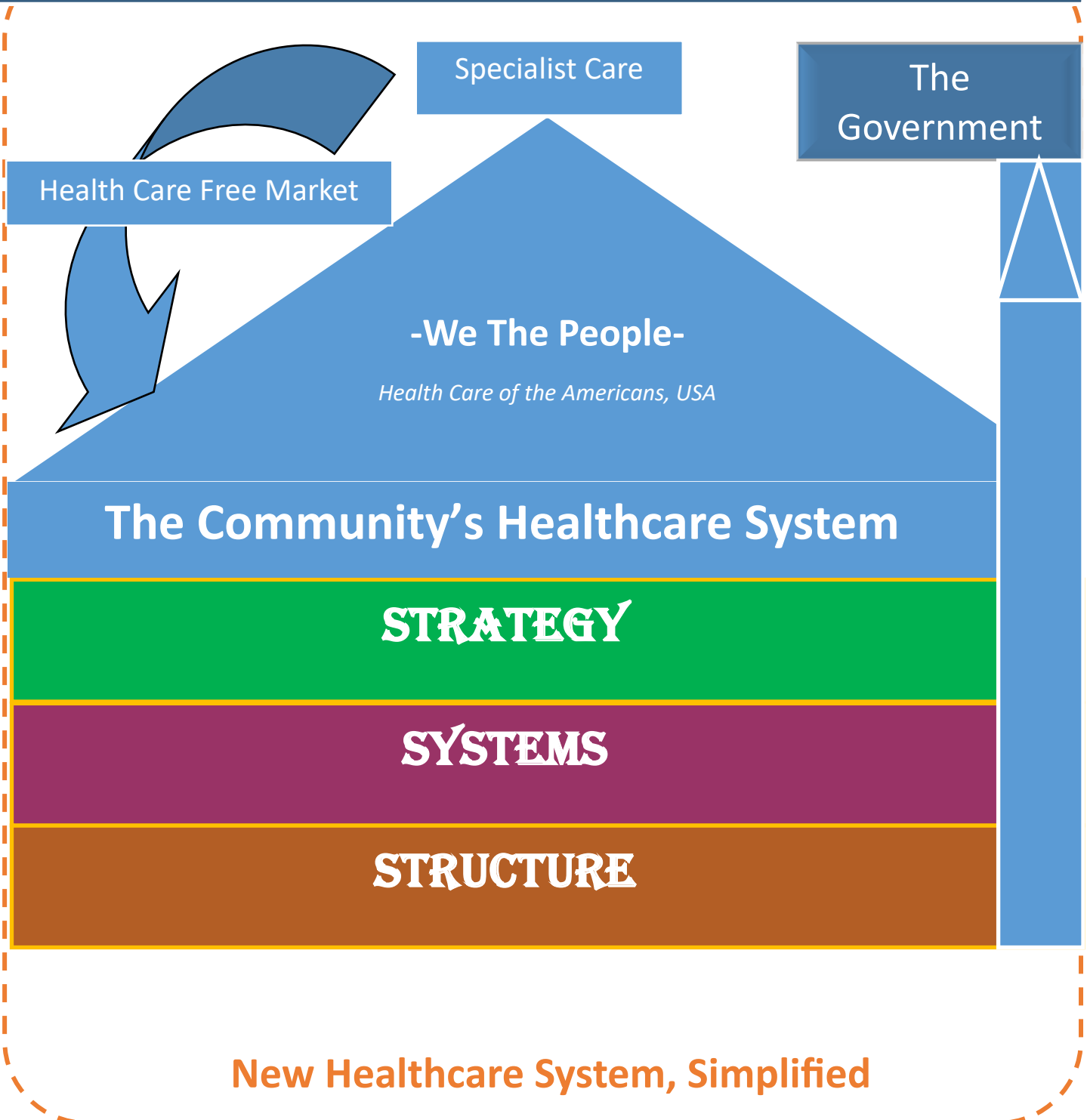
The power of US Healthcare Structure is with the government. The Federal Government is tasked to listen to the people, bring experts together and using policies, develop a US Healthcare structure for now and the future generations of the American people's health and care, and not for



US Health Care in Reform

Where we should be.....

Community Based People Power





US Healthcare Reform

The Plan **Expected**

Where we should be..... Giving **Power** back to the People

Major Functions of the Health Care System	The People within their Communities	The Government	Health Care Regulatory Agencies	Health Care Market	Government Administrative Agencies
Power	✓	X	✓	X	X
Policy	✓	X	✓	X	X
Funds	✓	✓	✓	X	✓
Market	✓	X	X	X	X
Price	✓	X	X	X	✓
Cost Savings	X	X	X	X	✓
Health Care Status	✓	✓	✓	X	X
Customer Selection	✓	X	X	X	X



US Healthcare in Reform

The Plan: **Observed/Expected**

the healthcare market to create wealth.

The Federal Government also use power and policy to regulate the funds, cost savings and price in favor of the American People and not the market. The healthcare market should be built into the structure of US healthcare.

The structure of healthcare is for all American People and so there is no customer selection except for healthcare prevention for cost saving purposes, where the worst healthcare status customers are selected for early intervention.

Systems: Operational model of Healthcare

The US Government and the experts in the healthcare system in question empowered by policy should control the operational funds, cost, price and market. Customer selection should be “all” and the healthcare status should be improving with interventions with emphasis on prevention. The market should be built into the system of US healthcare.

Strategy: Ongoing heartbeat of Healthcare. Reflects the ongoing operations towards set long-and-short-term goals of US Healthcare

The short-and-long-term strategy power of healthcare should come

STRUCTURE

- 1) Power
- 2) Policy
- 3) Cost Savings, Price
- 4) Funds, Market
- 5) Health Care Status, Customer Selection

SYSTEMS

- 1) Power
- 2) Policy
- 3) Cost Savings, Price
- 4) Funds, Market
- 5) Health Care Status, Customer Selection

STRATEGY

- 1) Power
- 2) Policy
- 3) Cost Savings, Price
- 4) Funds, Market
- 5) Health Care Status, Customer Selection

from the people, through the local jurisdiction to the government. Although this is monitored by the government, the government should be more hands-on than hands-off on the policy, cost savings, funds and price. The market should be built into the strategy of US healthcare.

Customer selection should be “all” and the healthcare status should be improving with interventions with emphasis on prevention.

Finally, there are still these three questions to answer for the healthcare foundation to be put back together again:

- 1) Where are we?
- 2) Where are we going?
- 3) How are we getting there?

US Healthcare in Reform

The Plan: **Expected**

Where we should be.....Giving Power back to the People

Expected	Expected Knowledge of the need for change
<p>STRUCTURE</p> <ol style="list-style-type: none"> 1) Power 2) Policy 3) Cost Savings, Price 4) Funds, Market 5) Health Care Status, Customer Selection <p><i>Knowledge of Need for Change</i></p>	<ul style="list-style-type: none"> • The Government: Government Regulatory Agencies and Government Administrative Agencies: In control of Funds, Policy, Price and Market. • The Health Care Market: In control of Cost Savings and the Market. • The People and Their Communities: In control of Power, Price, Health Care Status and Customer Selection.
<p>SYSTEMS</p> <ol style="list-style-type: none"> 1) Power 2) Policy 3) Cost Savings, Price 4) Funds, Market 5) Health Care Status, Customer Selection <p><i>Knowledge of Need for Change</i></p>	<ul style="list-style-type: none"> • The Government: Government Regulatory Agencies and Government Administrative Agencies: In control of Policy, Cost Savings, Market, and Health Care Status. • The Health Care Market: In control of Cost Savings and the Market. • The People and Their Communities: In control of Power, Price, Funds, Health Care Status and Customer Selection.
<p>STRATEGY</p> <ol style="list-style-type: none"> 1) Power 2) Policy 3) Cost Savings, Price 4) Funds, Market 5) Health Care Status, Customer Selection <p><i>Knowledge of Need for Change</i></p>	<ul style="list-style-type: none"> • The Government: Government Regulatory Agencies and Government Administrative Agencies: Strategic control of Funds, Cost Savings, Price, Health Care Status and Customer Selection. • The Health Care Market: Strategic control of Cost Savings, Price and Market. • The People and Their Communities: Strategic control of Power, Funds, Cost Savings, Health Care Status and Customer Selection.



US Healthcare in Reform

Structure, Systems, Strategy: **The Change Effect**

Components of the Change Effect for Structure, Systems, and Strategy	No Measurable Effort (Score = 1/5)	Some Measurable Effort (Score = 2/5)	Good Measurable Effort (Score = 3/5)	Strategic Measurable Effort (Score = 4/5)	Executed Measurable Effort with Optimal Change Outcome (Score = 5/5)
Knowledge of need for Change	✓	X	X	X	X
Well defined Change goal	✓	X	X	X	X
System and Partnership for the Change needed	X	X	✓	X	X
Sensitized the Leadership on the need for Change	✓	X	X	X	X
Set aside resources for Change	✓	X	X	X	X

28%

✓	Excellent
✓	Good
✓	Poor

7/25



The Best of Two Worlds: Bar Beach, on the Island, Lagos Nigeria

Published Letters to the Editor

Author: A-Kins Analysts and Project Managers

The publisher is encouraging feedback on this issue. Please do write back and let us rub minds. You may send your feedback via:

1. Mail to the Editor (please see address below)
2. Web: "Contact Us" page at www.a-kins-analysts.com
3. Facebook: <https://www.facebook.com/A.Kins.Analysts.Project.Managers>

Please include "LETTER TO THE EDITOR" in the Subject line of your feedback. The editors will review each feedback and publish/respond to one by ballot.

DISCLAIMER

#Please note: Sending your comments and feedback to the editor serves as automatic permission for publication, unless otherwise stated by the candidate. If you do not want your comments or feedback to be published or you do not want your name or picture published, please state that clearly in your feedback letter by mail, web contact auto e-mail. The publishers are indemnified/will not be held responsible for any charges pertaining to publication or response thereof. All feedback and responses received will be categorized as publishable material unless otherwise stated within the documents received. No bills will therefore be incurred due to the publications of feedback or response thereof.

Looking forward to hearing from you!



Contact Author: A-Kins Analysts and Project Managers

1700 McHenry Ave

Suite #65B 184

Modesto, CA 95350

Phone: 209-272-6991

Website: www.a-kins-analysts.com

Facebook: <https://www.facebook.com/A.Kins.Analysts.Project.Managers>

"Successfully implementing impossible projects in impossible places"

A - KINS NEWSLETTER

© MAY 2016 ALL RIGHTS RESERVED