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Exploring the Development and Optimization Strategies for the Medical Security System

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Abstract: The world today is becoming increasingly degraded, corrupt and inefficient. This degradation has spread to all areas of society, and the health system is no exception. It is under this background that this article is created. The significance of this paper is to review the development history of human medical security system and find the direction for the future. The topic of this paper is the development and reform of the medical security system and what experience can be gained from it. The research method is literature analysis. The aim of this study is to show the disadvantages in the medical security system. The system should improve the quantity, quality, and pay of medical staff to ensure better healthcare services for the public. To maintain integrity in the medical field, it is crucial to strengthen inspection departments and punish corruption severely. By improving the treatment of staff and implementing stricter codes of conduct, the medical security system can foster a more professional and ethical work environment in healthcare. To streamline operations and enhance efficiency, redundant institutions should be eliminated, and the functions of each remaining entity should be clearly defined.

Keywords: medical system, development, anti-corruption.

1. Introduction

Health care has always been a major expenditure in the finances of countries, and it is related to the survival of people.so it has always been the most critical part of the government. It is necessary to discuss the differences between the past and the present medical security from the perspective of specific countries and policies, explore the specific differences of medical systems in different countries and analyze them to gain experience to provide effective methods and measures for reforming medical security systems. Moreover, the importance of the establishment and improvement of medical insurance should be attached. This paper will show the history of the medical system. The core is experience getting from the development history of medical system. This paper uses so much literature to analyze, so that direction of medical system in the future can be achieved.

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2. Development and Current Situation of the Medical Security System

2.1. Beginning of the Medical Security System

The origins of modern health care systems can be traced back to the late 19th and early 20th centuries. In 1883, the German Law on Social Insurance for Sickness was the first modern medical insurance system in the world. Later, France, Britain, Japan, Italy and other countries have also begun to explore their own medical insurance systems. At the beginning of the 20th century, medical insurance systems were gradually developing in various countries. For example, in 1929, the Blue Cross of the United States established the first non-profit private medical insurance organization in the United States, mainly to provide medical assistance to workers and reduce medical expenses of workers. There is debate about where and when the modern health care system originated. But it is not important.

2.2. Development History of the Medical Security System

Establishment of Brazil medical security system can be used as an example. What is unique about contemporary health sector of Brazil is that it is driven by popular activism from the bottom up by civil society, rather than by external forces such as the superstructure of the government or political parties, or international organizations. After the establishment of a unified health system, medical coverage in Brazil has greatly increased. Unfortunately, this vital system is being eroded by private capital. Achieving universal health care will not be easy. Over the past 20 years, Brazil has made other advances, including investments in human resources, science and technology, and primary health care, as well as substantial decentralization processes, broad social participation, and growing public awareness of the right to health care. Brazil now needs increased political support, restructured financing, and clear public and private scope to deal with the future crises that Brazil medical security system face [1]. The Brazilian health insurance system was established in the 1920s and gradually developed into universal health insurance for urban and rural residents throughout the country. The Brazilian medical security system is characterized by a system based on free medical care for all and supplemented by individual medical insurance. In 1988, Brazil promulgated a new constitution that decided to establish unify the health care system to address inequalities in the health care sector. According to the new Constitution, health is the right of all citizens and the duty of the State, and every Brazilian citizen, regardless of race, religion or socioeconomic status, has the right to receive free treatment at all levels of government health care [2].

China can also be used as an example. Since the founding of the People's Republic of China, the medical security system has experienced from scratch, and pilot programs have been carried out to explore suitable medical models, build universal coverage of medical security, and make a new round of improvement in the new century. The evolution of the medical security system in the past 70 years is manifested in the following aspects: pluralistic and segmented to gradually integrated institutional framework, from single aspect to multi-level security system, from individual absence to multi-party sharing of security responsibility, from only partial to universal medical service, from collectivization to socialized medical management. Looking at the historical evolution of China's medical insurance system in the past 70 years, on the one hand, prevention is the priority, primary health care is emphasized, the participation of all people is emphasized, and the final realization of low input and high output in the health field is the outstanding achievement in the planned economy period [3]. On the other hand, the coordinated development between the economic system, the health service system and the medical security system constitutes the internal law of the whole medical security change.

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2.3. Medical Security System in the Contemporary Display

To put it simply, the modern medical security system mainly includes basic medical insurance, urban and rural medical assistance, and supplementary medical insurance. Basic medical insurance is the core part of the medical security system, covering a wide range of people and providing basic medical security. Urban and rural medical assistance is an important safeguard measure for low-income families and disadvantaged groups, aiming to provide financial assistance to individuals or families who cannot afford medical expenses and ensure that they can access necessary medical services. Supplementary medical insurance is relative to basic medical insurance, including enterprise supplementary medical insurance, commercial medical insurance, social mutual assistance and community medical insurance and other forms, is a powerful supplement to basic medical insurance, but also an important part of a multi-level medical security system. This is a supplement to basic medical insurance, aiming to provide a more comprehensive and higher level of medical protection. As for the specific problems of the medical security system, researchers should carry out a specific and comprehensive analysis in a specific country.

Medical security system refers to a set of medical security systems and policies established by the state to protect people's health. Its main purpose is to protect people's health rights and interests, improve the level of medical security for the whole people, reduce the economic burden of illness and medical treatment, and promote social equity and stability. The medical security system mainly consists of basic medical insurance, medical assistance, Medicaid, medical assistance, etc. It is characterized by universal coverage, ensuring basic medical needs, equity and justice, and sustainable development. The functions and roles of the medical security system include improving people's health level, reducing the economic burden of illness and medical treatment, promoting social equity and stability, and promoting the rational allocation and utilization of medical resources. The reform and development of the medical security system include constantly improving the medical security policy, expanding the coverage of medical security, improving the level of medical security, strengthening the supervision of medical service quality, and promoting the rational allocation and utilization of medical resources. At the same time, it is also necessary to strengthen the sustainable development of the medical security system to ensure that the medical security system can play a long-term and stable role.

3. Existing Problems Analysis

3.1. Lack of Human Resources

The medical security system of most countries in the world has the problem of insufficient human resources. XiaoWei Ma, Vice minister of China's Ministry of Health, said in the "May 12" national teleconference in 2008 that the outstanding problems to be solved in the current nursing work are: first, the treatment of contract nurses; The second problem is the shortage of clinical nurses, and the third problem is that nurses do not fully perform their duties and nursing work is not in place. It should be said that these three questions are the ultimate goal of nursing human resource management to study and solve. However, in the issue of nurses' human resource management, some nursing managers still only see the appearance of insufficient nurses, and fail to dig deep into the deep-rooted problems of nursing professional development through it, such as unstable nursing team, low work efficiency, low satisfaction with work, lack of professional value and sense of accomplishment, etc. These problems show that there are still misunderstandings in China's understanding of human resource management, and active thinking, planning and intervention are not enough. On the other hand, it also shows that China can still have great achievements in nursing human resource management [4].

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3.2. Systematic Medical Corruption

Medical corruption can be said to be a chronic disease of the medical security system. Corrupt system is a chronic disease of human society. Due to the greed in human nature, corruption is deeply rooted in every corner of human society. Governments around the world have launched large-scale anti-corruption campaigns, with success ranging from small to large. But in practice it can only serve to curb corruption, not eliminate it completely. Governments have done a great deal. In this regard, people can only hope that human beings can better deal with the problem of corruption in the future, and people can only take into account the current social problems at present.

In any case, fighting corruption is better than simply increasing budgets and spending. Unfortunately, few countries have made significant progress in fighting corruption. But fighting corruption in healthcare remains a top priority. There are several obvious examples of medical corruption: the sale and use of fake drugs, the prohibitively high cost of surgery, the bribery of academic conferences, and the fact that most of the money for hospital equipment goes to the director's pocket. These are happening all the time in hospitals around the world. Medical anti-corruption is a difficult and huge project. The task should be no matter what the cost. Medical corruption reflects the loopholes of the medical system, and it is necessary to constantly improve the reform and perfection of the medical system.

3.3. Staff Dissatisfaction with Their Work Affects Medical Treatment

According to a questionnaire, it was completed by 202 doctors in 2002. Low income and long working hours mostly lead to dissatisfaction. Provincial doctors were most dissatisfied; the second are primary care doctors. At high-level hospitals, only 3% of doctors and 27% who work in primary care were satisfied with the salary. Only 7% of high-level hospitals were satisfied with the work hours. Less than 10% of doctors were satisfied with the amount of paid vacation time and paid sick leave.

In conclusion, job dissatisfaction is very common among doctors overall. Recruitment and retention of doctors are major challenges for the Chinese health system. If China Government want to take actions to deal with these problems, they will not face bigger trouble in the future. Reducing the working time should be first considered. Moreover, China government should increase the salary of doctors. At the same time, more security measures should be taken to protect doctors violence by their patients [5].

The world cannot imagine that employee dissatisfaction would be disastrous for the health care system. Nurses do not come to work, doctors go on strike, and patients are left without care. This is a harbinger of medical collapse. Nurses and doctors in South Korea have gone on strike to demand higher pay amid the corona virus pandemic. They left their posts at a time when the country and society needed them most. They should not be condemned. Doctors and nurses are also human beings, and they need to live, and yet the South Korean government is unable to satisfy health care workers in terms of pay. It is clear that South Korea government should reflect themselves that what lead to that South Korean medical workers refuse to stay on the job despite possible criticism and abuse from the whole society. Enough reasons should be given to health care workers so that they can feel at ease serving the community and their patients. It is necessary to increase the recruitment and training of health care workers. The talent pool of health care workers should not run out, or the crisis will come at any time.

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4. Optimization Suggestions

4.1. Improve the Quantity, Quality and Pay of Medical Staff

It is necessary to set an adequate talent pool, and relevant medical schools can increase enrollment. With adequate treatment to ensure that medical professionals do not lose talent. In some areas, there is a severe shortage of medical staff, leading to a very high death rate. It is not that the disease cannot be cured, it is just a lack of people. So the government has to make sure there is no shortage of medical staff. At the same time, the government has to deal with the problem of unequal distribution. The shortage of medical staff mentioned just now, or it may be that the surplus of medical staff has not been sent to the shortage of medical staff areas, but has been left somewhere completely ineffective, which requires coordination departments to take action. It is also necessary to ensure their treatment to ensure that they remain in areas where there is a shortage of medical staff.

4.2. Strengthen Inspection Departments and Punish Corruption severely

Corruption is a chronic disease of human society, and corruption does not only exist in medical care, but also in all fields of human society. In the military realm it could be four or five soldiers for half a billion dollars, goats for six million dollars, screws for ninety thousand dollars. In the medical field, it might be a $16 million instrument, and the final bid is $32 million, and that $16 million goes to the dean. Health care is about the survival of people's lives, and the strictest anti-corruption investigations and regulations must come true. Once found out, no tolerance [6].

4.3. Improve the Treatment of Staff and Implement Stricter Codes of Conduct

Treatment is also critical. It is not that there are not enough health care workers in some places, it is that health care workers do not want to stay in low-wage areas, they would rather do nothing in high-income areas than go to low-income areas. This situation can be alleviated by setting aside the salaries of medical staff and letting the government set the scale. Until then, salaries for medical staff may have been the responsibility of local governments. However, local governments may have different salaries for health care workers because of local financial conditions, so the unequal distribution occurs. Unified regulation by the government would be better [7].

4.4. Eliminate Redundant Institutions and Clarify Functions

The civil service is a hotbed of corruption. It is common for civil servants to be laid off because of the complexity and redundancy of the civil service. It is therefore necessary to abolish the miscellaneous facilities in hospitals. Like an administration that does not know what it is, it could be eliminated. Such departments serve no purpose other than to increase the cost of feeding a bunch of waste. After Musk bought Twitter, he laid off almost two-thirds of its staff, but Twitter is still doing well. It can be seen that government do not need that many people to do things. Reducing costs and increasing efficiency is the way forward for any kind of organization. At the same time, government should clear functions because of the side effect of the agency's dismantling [8].

5. Conclusion

In general, the health system is still facing many major problems, which is the same for all countries. The urgent task now is to solve or improve these major problems, such as medical corruption, inefficiency, human resource shortage and so on. This article reviews the history of the medical system, which is very meaningful. History is a mirror that shows human folly and mistakes and points on the right path. In terms of future research, it is hoped that scientists can reduce the cost of medical

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supplies, including surgical supplies, surgical equipment, drugs, etc., so that the financial pressure on consumers can be reduced, and perhaps the medical system can save more people. And hope that scientists can overcome some problems in the future, make great breakthroughs, so that some diseases that are currently no treatment can be cured, such as pancreatic cancer. There are ways to improve treatments for other diseases that are already treatable. It must be admitted that this is a huge project, and there is a high probability that it will be lost. But the safety of human life must be defended, and this is the responsibility of scientists, governments, the world, and all humanity. Due to objective limitations and practical conditions, such as the chaotic or anarchic government of a certain region or country, it is impossible to construct and reform the medical system. Or the government is short of money. There are many other limiting reasons. Therefore, the major problems mentioned in this article may not be properly solved, but this is not a reason to refuse to research and give solutions. The human health care system still has a long way to go. As the motto of the Royal Canadian Armoured Forces says, "Through mud and blood to the green side." The medical security system will eventually cross the night and usher in a new era.

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