
The American healthcare system

It is blatantly obvious that the American healthcare system is incredibly flawed. People are waiting to be seen by doctors that may or may not accept their insurance plans, people are dying while trying to raise funds for operations and medical bills, and insurance market place owners are sitting on piles like Warren Buffet while innocent people are dying because they make just above the poverty line to receive government funded insurance but don't make enough to pay a monthly premium for health insurance. The main issues with the American healthcare system are, the cost, the set-up of our multiple systems, the quality and the number of Americans who are not able to be covered by insurances for various and unfair reasoning.

The first of many issues but one that stuck out to me most while reading this book and thinking about how much my husband and myself have to pay for health insurance for him, our children and I is the cost of premiums and how greedy the people in charge of our healthcare and insurance policies in this country are. In the beginning of the book Reid tells us that we in America spend twice as much in medical costs as a whole than other affluent countries do around the world, even more so than countries with more elderly in their population than ours. Reid then compares us to Japan who has one of the most elderly populations globally and go to the doctor more than anyone and only spend about \$3,000 per person per year compared to our \$7,000. Why you ask? We spend two times the amount on medications that people in European countries do, and we pay much higher salaries to our medical personnel, hospitals and drug companies than other countries do with malpractice only contributing to 1% of our healthcare costs in the US. However, even with these, the 2 main reasons per the book that we spend the most money is because of our health insurance system we chose to put into place as a country and the intricacy of it.

We're the only first world country that "relies on profit-making health insurance companies to pay for essential and elective care" and is the only country to allow insurance companies to refuse coverage to people for fear that they might get sick. Insurance companies are trying to avoid adverse selection, a term used in the book to describe people that do not buy insurance until after they have fallen ill instead of keeping insurance when they are healthy. If our insurance providers had to foot the bill to all those people, the costs would quickly be much higher than the amount taken in from premiums. The resolution to the problems with adverse selection would be to require an individual mandate that makes everyone, regardless of health status pay for insurance that way the ones who are healthy make up for the costs of the procedures and medical visits for those who are ill. All other well off countries require both an individual mandate and a guaranteed issue from their citizens.

Globally speaking, the United States has by far the most complicated health care system. Almost all other countries as developed as the US "have settled on one health care system for everybody; that means every patient is treated equally, and there's one set of rules governing treatment and payment." On the contrary, in the US there is over 65 different individual systems for each "type" of person. There is one for Native Americans, military and their families, veterans, one for citizens under and over 18 living in poverty stricken families, and a program even for those at end stage diseases and with failing health, and private insurers of course. Each one has its own standards and requirements with what it will pay for and what it will not. If

an income based insurer says it will no longer pay for a certain surgery, the medical facility will raise the price for other payers to make up the difference.

This is called cost shifting. In the other countries, one payment entity and one standard payment schedule is dealt with. "The US Government Accountability Office "concluded that if the country could get the administrative costs of its medical system down to the Canadian level, the money saved would be enough to pay for health care for all the Americans who are uninsured." In America, if we didn't have to worry about big, money hungry, private corporations being in control of the US' healthcare, that can't even justify spending money on preventative care that would save more money for years to come, and only paying things like mammograms and PSA tests to further their marketing and attract more customers instead of doing it for the right reasons, America might not be in the health crisis it is in.

Adding to this, because of the awareness of preexisting conditions, this can lead to higher premiums and even denial of coverage in the US so people avoid going to the doctor, which mean they avoid preventative care, to avoid losing their coverage to begin with, when they eventually will go to the doctor to get treatment it runs up a much higher cost to our healthcare system too.

The third and fourth issue the book made me aware of is the coverage and quality of the healthcare system in America. We pay incredibly high premiums for little to no benefits that are anywhere near worth the amount of money we shell out for private coverage and the income based medical coverage gets to pick and choose what they want to pay for and what they don't. Also, insurers get to pick who they will decide to insure that day and who they won't. Because of these reasons, we have 45 million uninsured Americans living in the US. "Every year 700,000 Americans go bankrupt because of medical bills." The Commonwealth fund measures quality of medical care one way, by comparing the survival rate to major diseases and the US comes out badly compared to other wealthy countries. "Americans get world-class, state-of-the-art treatment for a chronic disease, while other Americans die from the same disease for lack of treatment." While in other countries children and adults the same are seen, and given the medication they need with no regards to their check stubs.

Given these points, it is obvious that compared to other countries who are as well off as we are, America is lacking in the healthcare system area. It all comes down to a moral issue and the fact that these insurance companies are essentially deciding who deserves to be treated and who doesn't. This book is an incredibly informative take on the world around us and makes us Americans look as immoral as I think we are on more than just healthcare. I think the instead of just listing what other countries are doing and the good and bad, Reid could have gone more into how we as Americans specifically can go about fixing the above problems and making sure everyone in America has access to healthcare. I would recommend the book to our lawmakers, especially. Maybe then we might get something done about these issues in Washington.