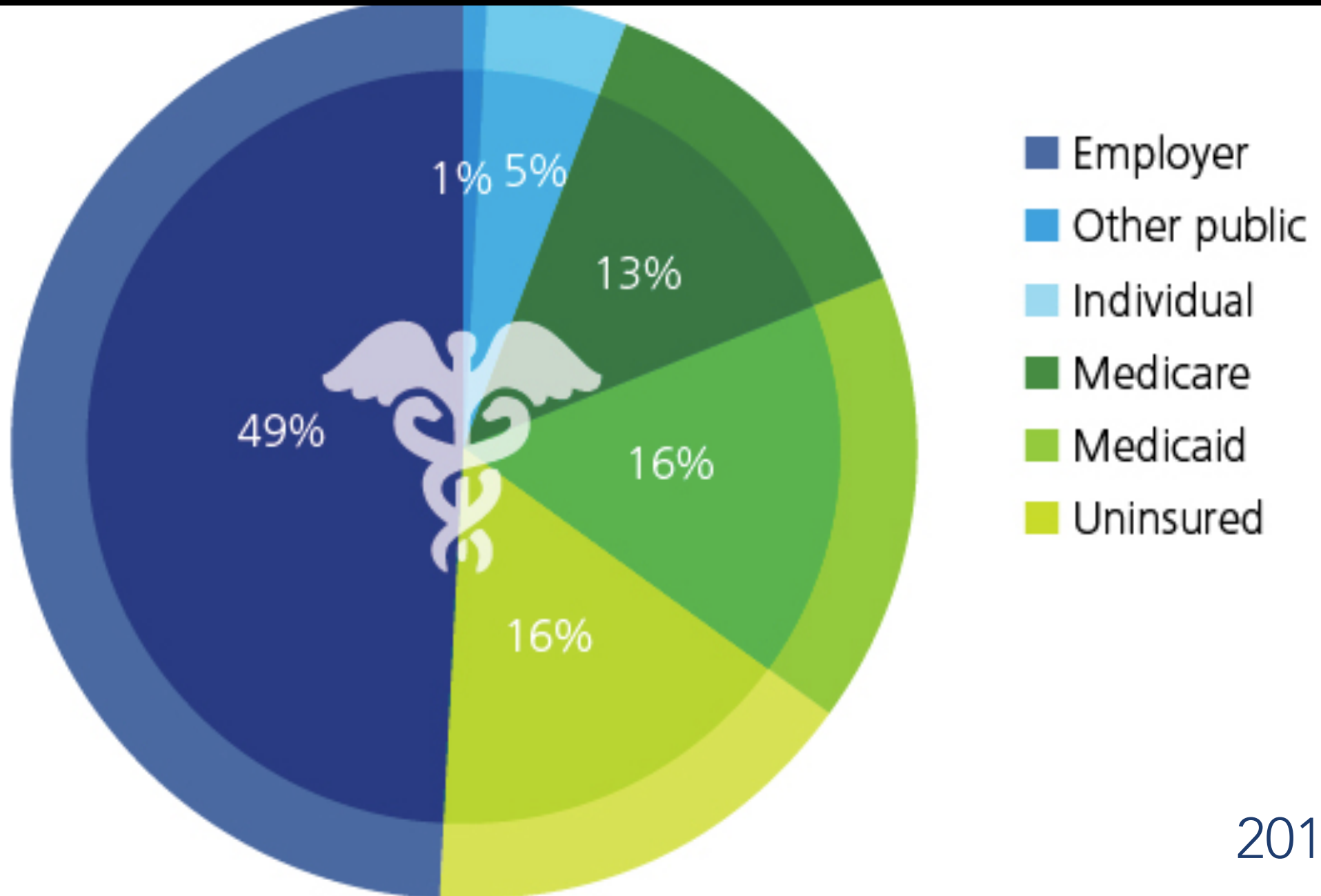


SOC 3510; WEEK 14, 11/29/16

COMPARATIVE HEALTH SYSTEMS

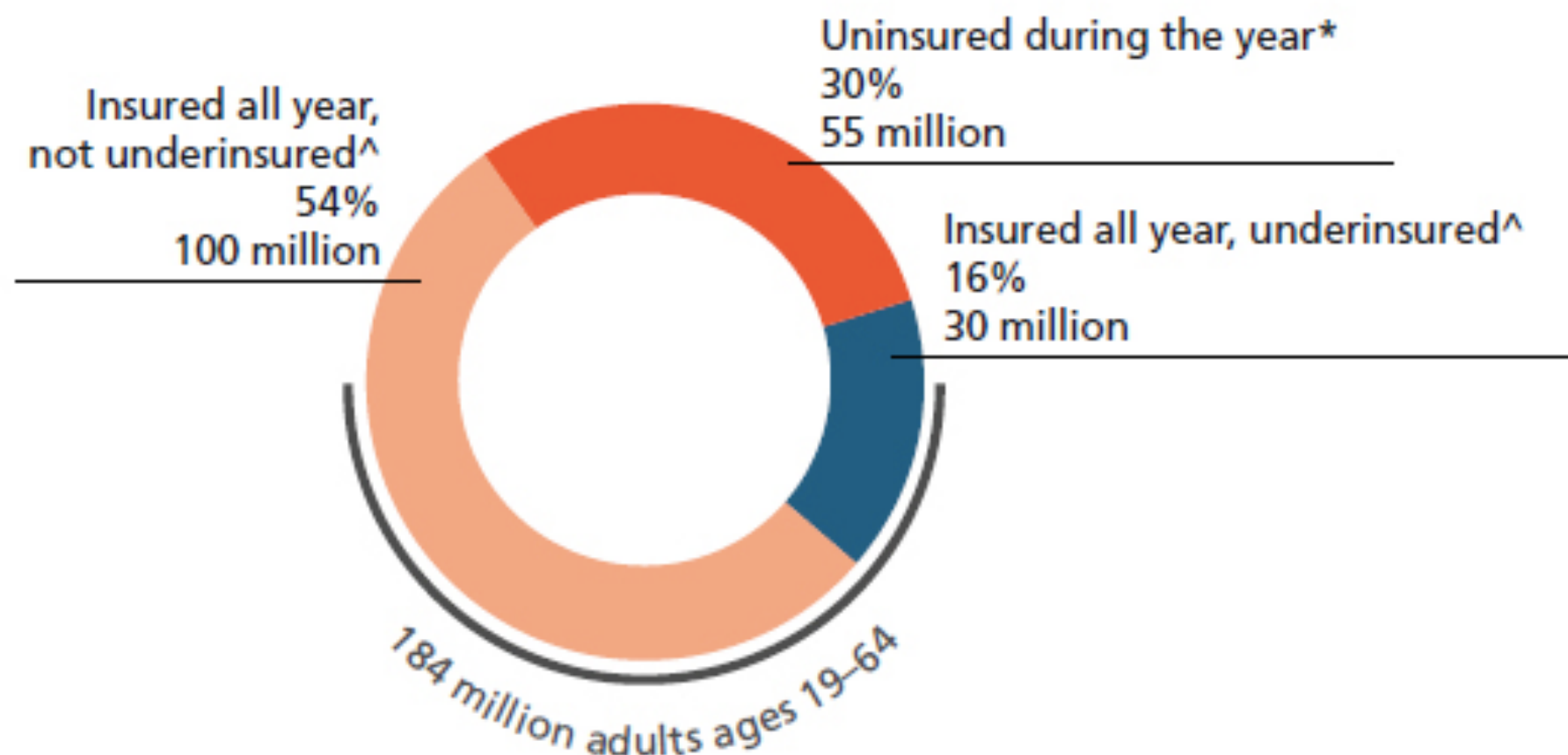


HEALTH INSURANCE AFFECTS ON HEALTH



2011

Exhibit ES-2. In 2012, Nearly Half of Adults Were Uninsured During the Year or Were Underinsured

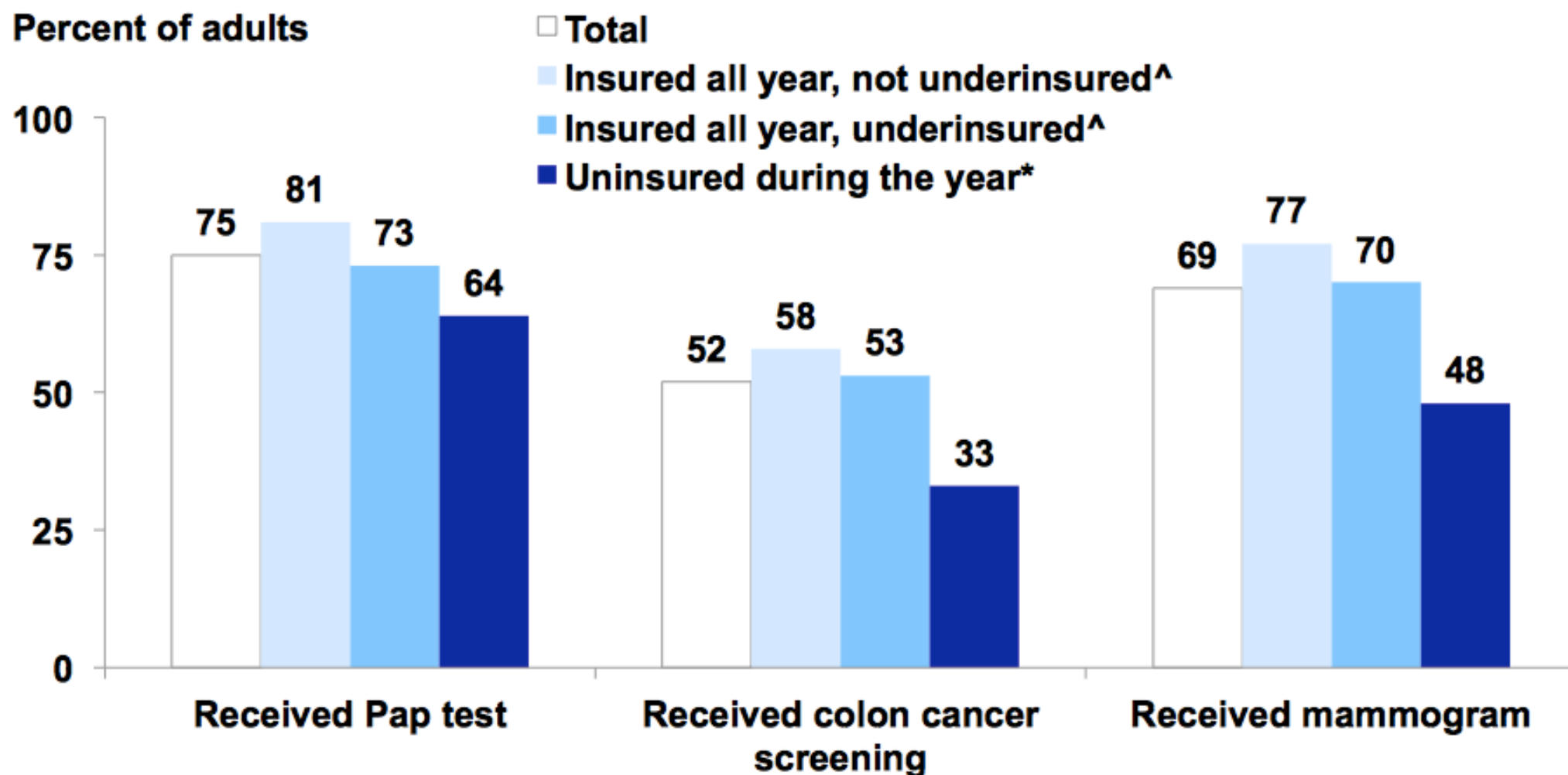


Note: Numbers may not sum to indicated total because of rounding.

^{*} Combines "Uninsured now" and "Insured now, time uninsured in past year." [^] Underinsured defined as insured all year but experienced one of the following: out-of-pocket expenses equaled 10% or more of income; out-of-pocket expenses equaled 5% or more of income if low income (<200% of poverty); or deductibles equaled 5% or more of income.

Source: The Commonwealth Fund Biennial Health Insurance Survey (2012).

Exhibit 14. Uninsured Adults and Adults with Gaps in Coverage Have Lower Rates of Cancer Screening Tests, 2012

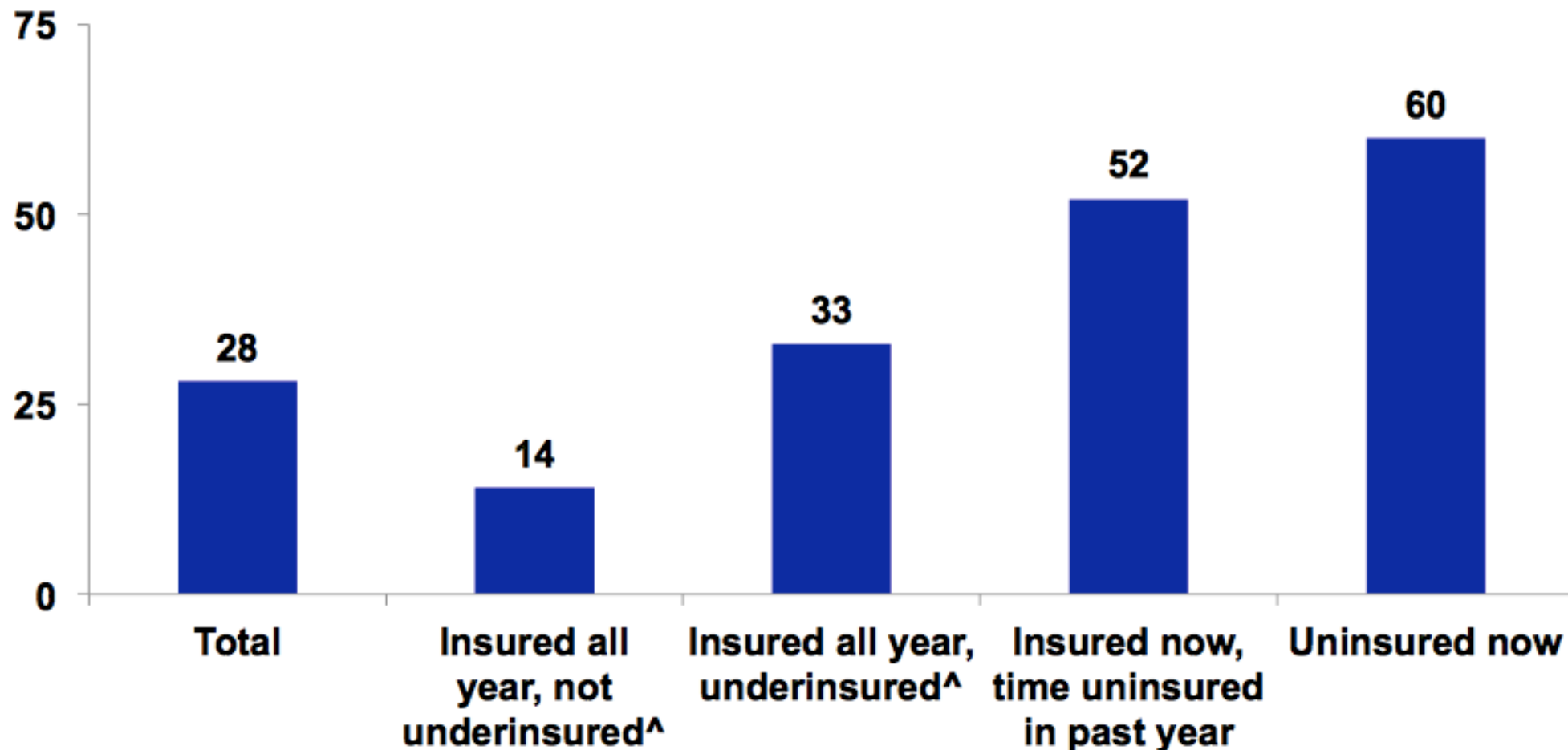


[^] Underinsured defined as insured all year but experienced one of the following: out-of-pocket expenses equaled 10% or more of income; out-of-pocket expenses equaled 5% or more of income if low income (<200% of poverty); or deductibles equaled 5% or more of income. ^{*} Combines "Uninsured now" and "Insured now, time uninsured in past year." Notes: Pap test in past three years for females ages 21–64; colon cancer screening in past five years for adults ages 50–64; and mammogram in past two years for females ages 40–64.

Source: The Commonwealth Fund Biennial Health Insurance Survey (2012).

Exhibit 12. Adults Uninsured During the Year or Underinsured Are More Likely to Skip Doses or Not Fill Prescriptions for Chronic Conditions, 2012

Percent of adults ages 19–64 with at least one chronic condition* who skipped doses or did not fill prescription for chronic condition because of cost



* Adults with hypertension or high blood pressure; diabetes; asthma, emphysema, or lung disease; or heart disease, who take prescription medications on a regular basis. ^ Underinsured defined as insured all year but experienced one of the following: out-of-pocket expenses equaled 10% or more of income; out-of-pocket expenses equaled 5% or more of income if low income (<200% of poverty); or deductibles equaled 5% or more of income.

Source: The Commonwealth Fund Biennial Health Insurance Survey (2012).

Exhibit 13. Uninsured Adults Are Less Likely to Have a Regular Source of Care, 2012

Percent of adults ages 19–64

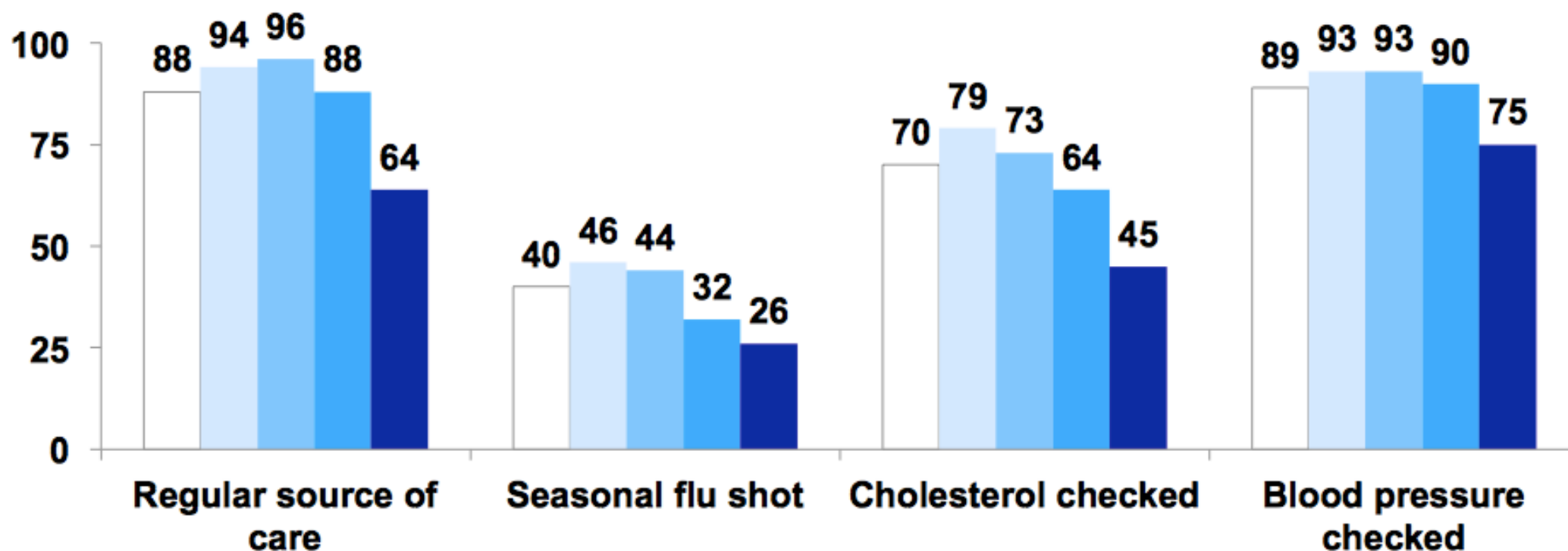
□ Total

■ Insured all year, not underinsured[^]

■ Insured all year, underinsured[^]

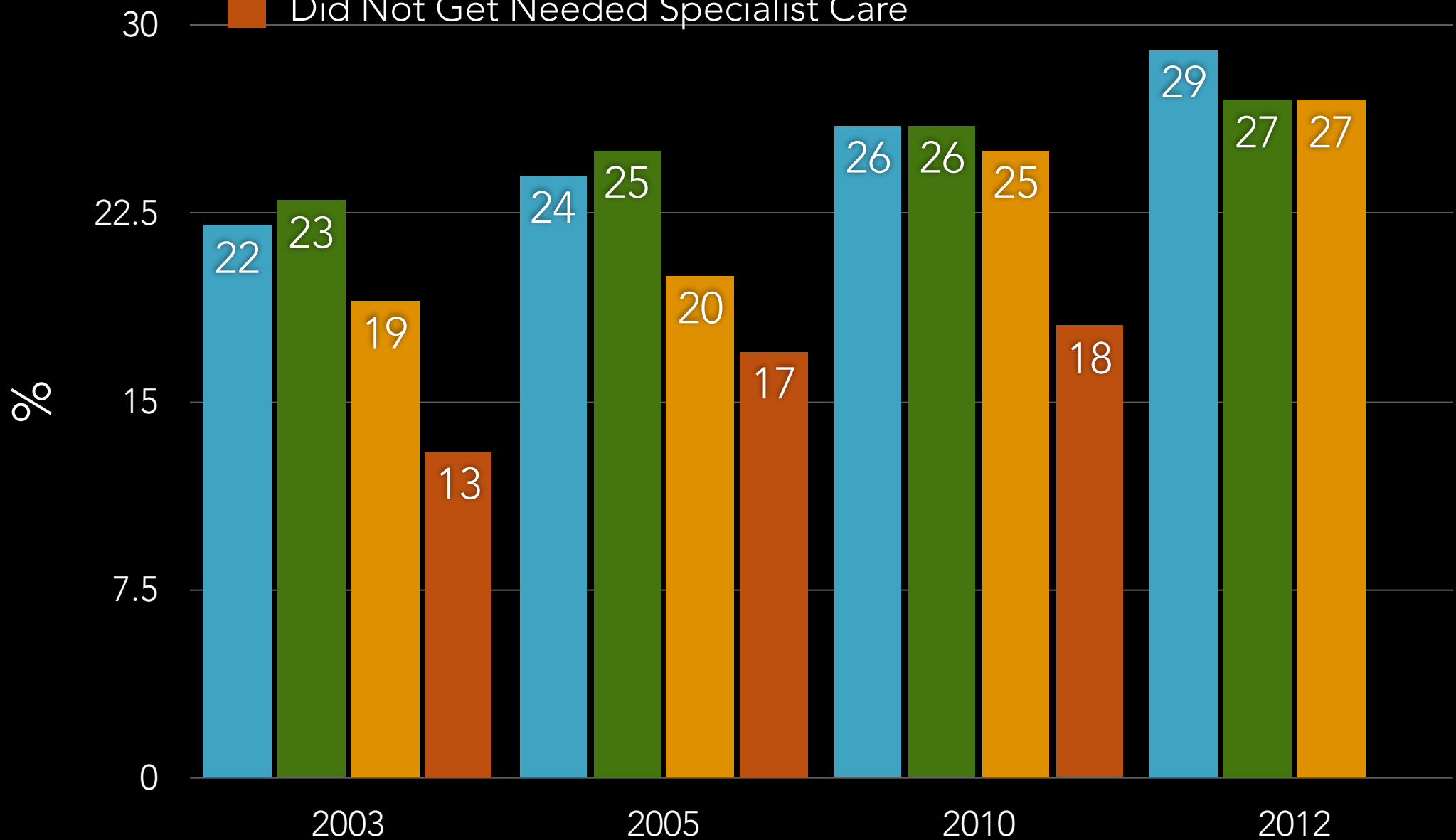
■ Insured now, time uninsured in past year

■ Uninsured now



[^] Underinsured defined as insured all year but experienced one of the following: out-of-pocket expenses equaled 10% or more of income; out-of-pocket expenses equaled 5% or more of income if low income (<200% of poverty); or deductibles equaled 5% or more of income. Notes: Seasonal flu shot in past 12 months; cholesterol checked in past five years (in past year if has hypertension, heart disease, or high cholesterol); blood pressure checked in past two years (in past year if has hypertension or high blood pressure). Source: The Commonwealth Fund Biennial Health Insurance Survey (2012).

- Had Med. Prob., Did NOT Visit Dr. or Clinic
- Did Not Fill Rx
- Skipped Recommended Test, Treatment, or Follow-Up
- Did Not Get Needed Specialist Care



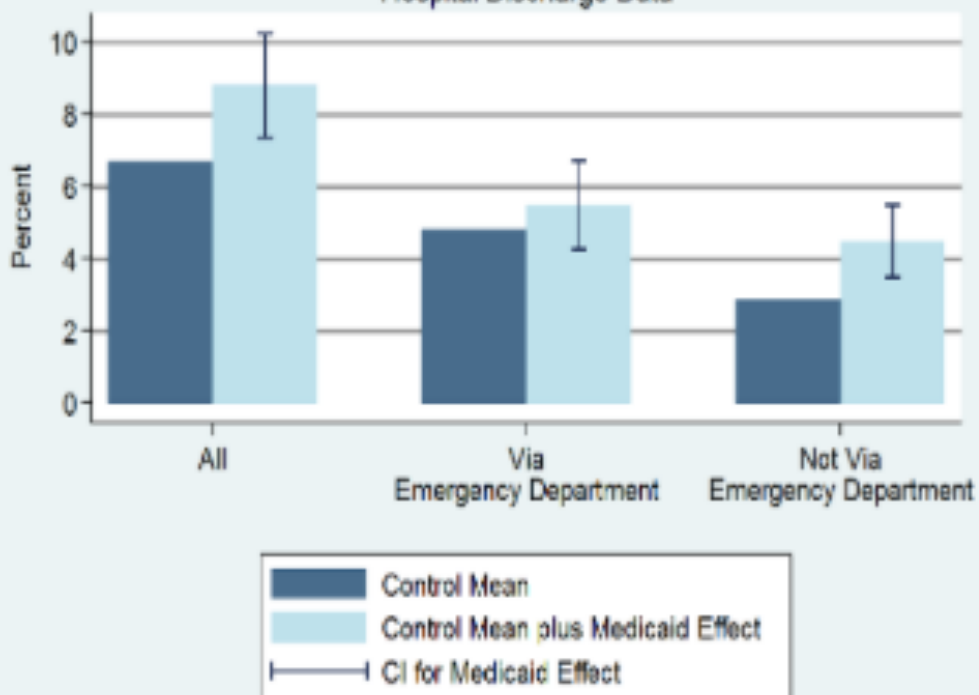
RANDOMIZED CONTROL TRIAL
FOR EFFECT OF INSURANCE

THE OREGON HEALTH STUDY



Probability of Hospital Admission

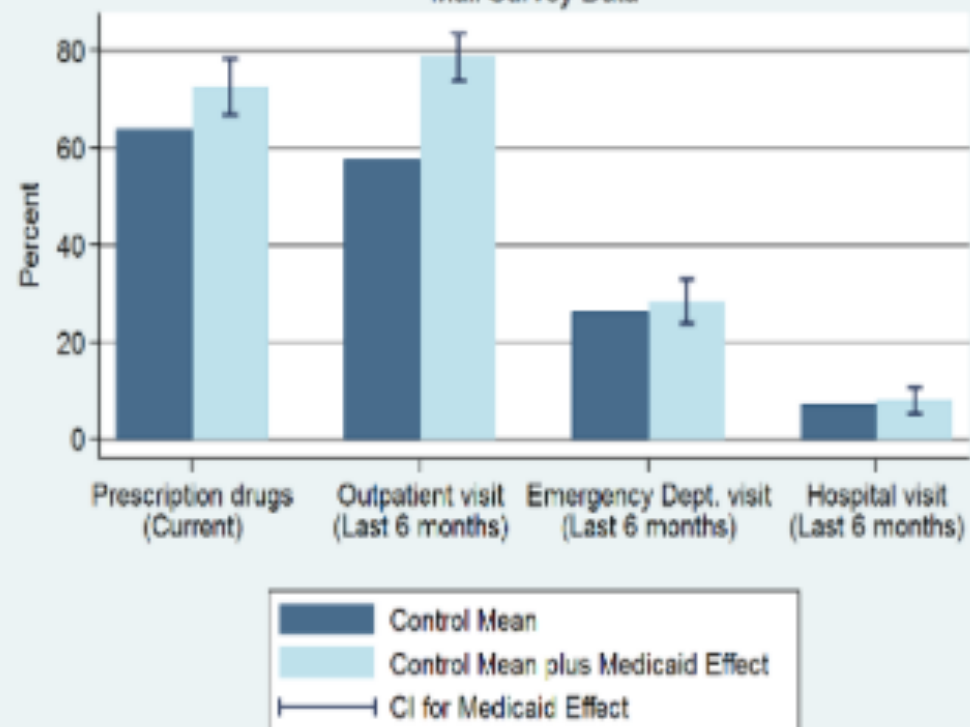
Hospital Discharge Data



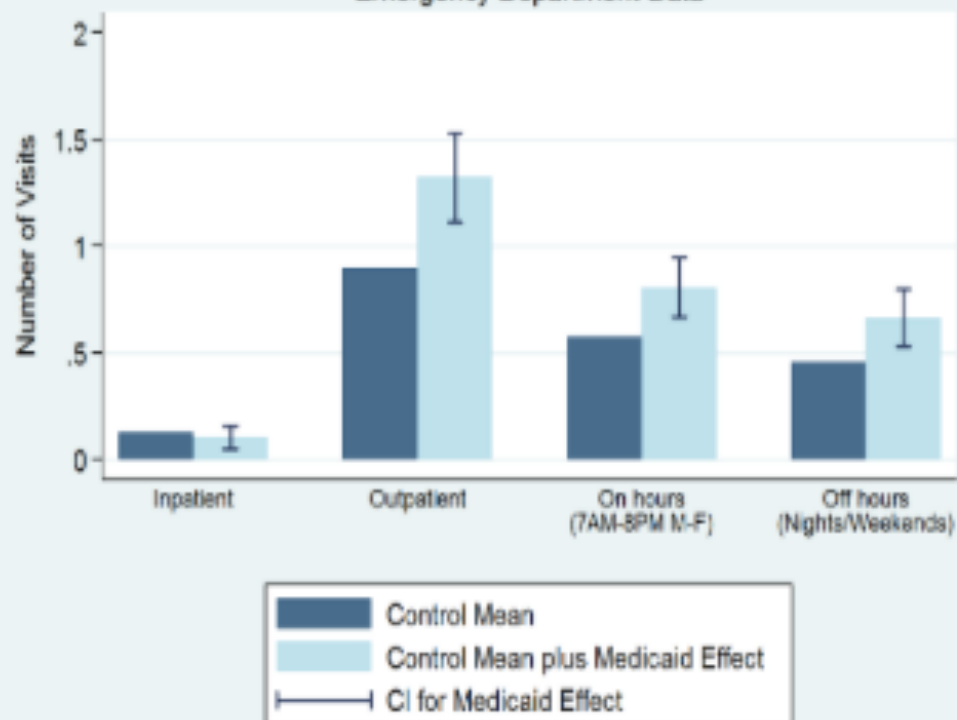
Outcomes measured over an approximately one year period.

Health Care Utilization

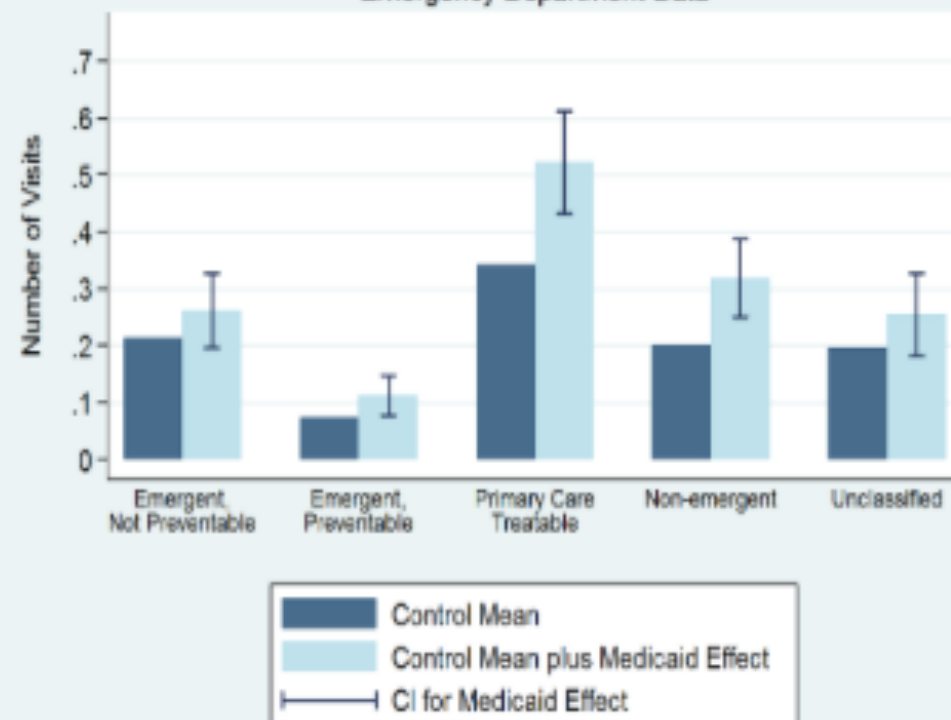
Mail Survey Data



Total ED Use, by Hospitalization and Time of Day
Emergency Department Data

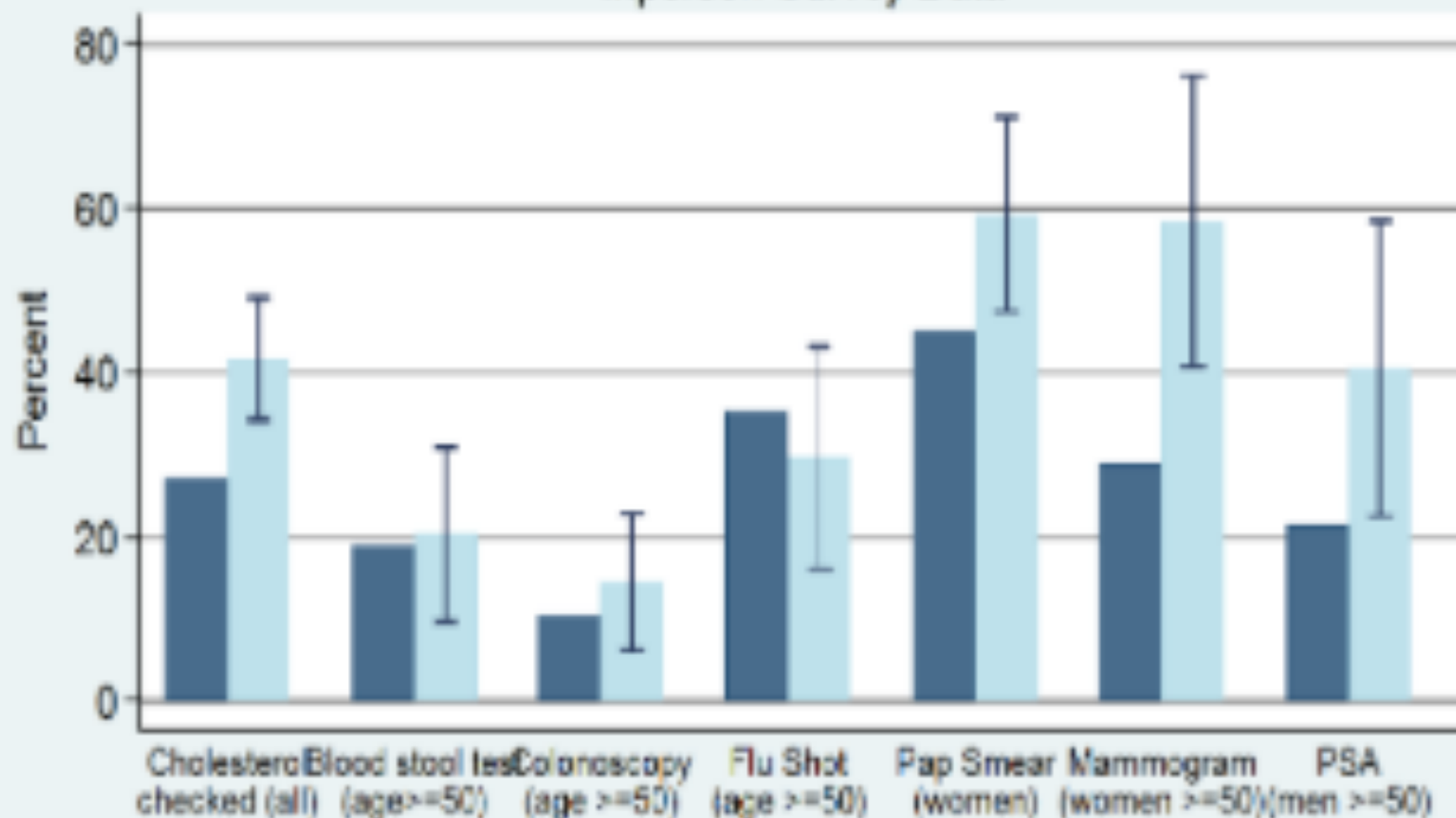


Total ED Use, by Type of Visit
Emergency Department Data



Preventive Care (Last 12 Months)

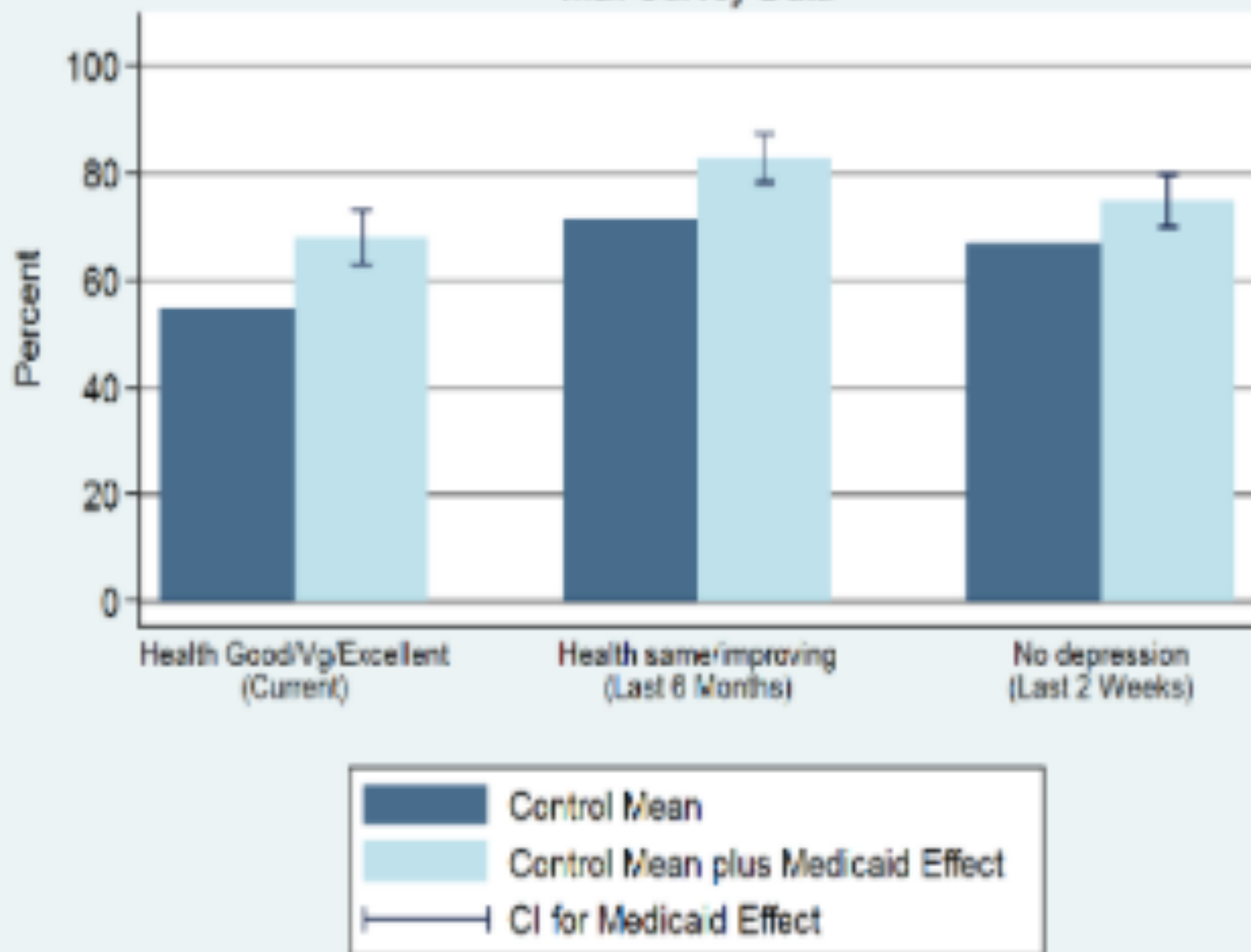
Inperson Survey Data



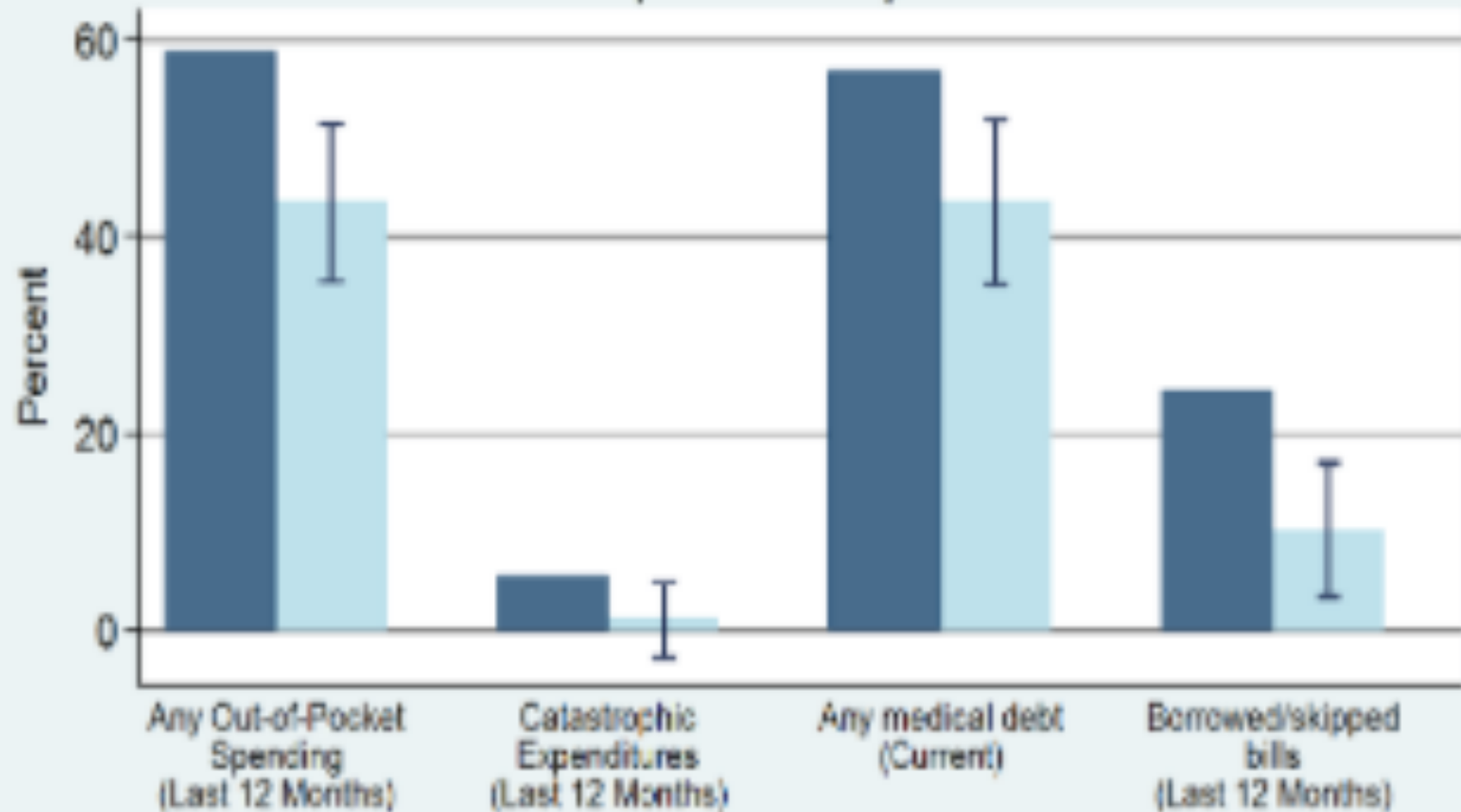
Control Mean
 Control Mean plus Medicaid Effect
 CI for Medicaid Effect

Self-reported Health

Mail Survey Data



Financial Hardship Inperson Survey Data



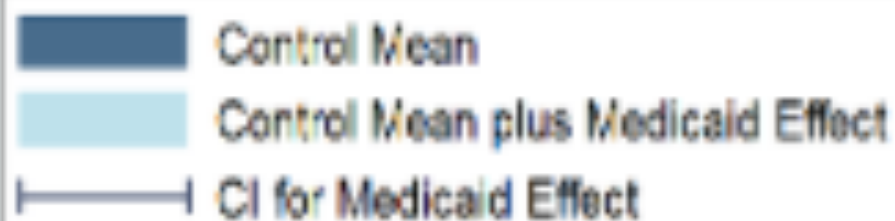
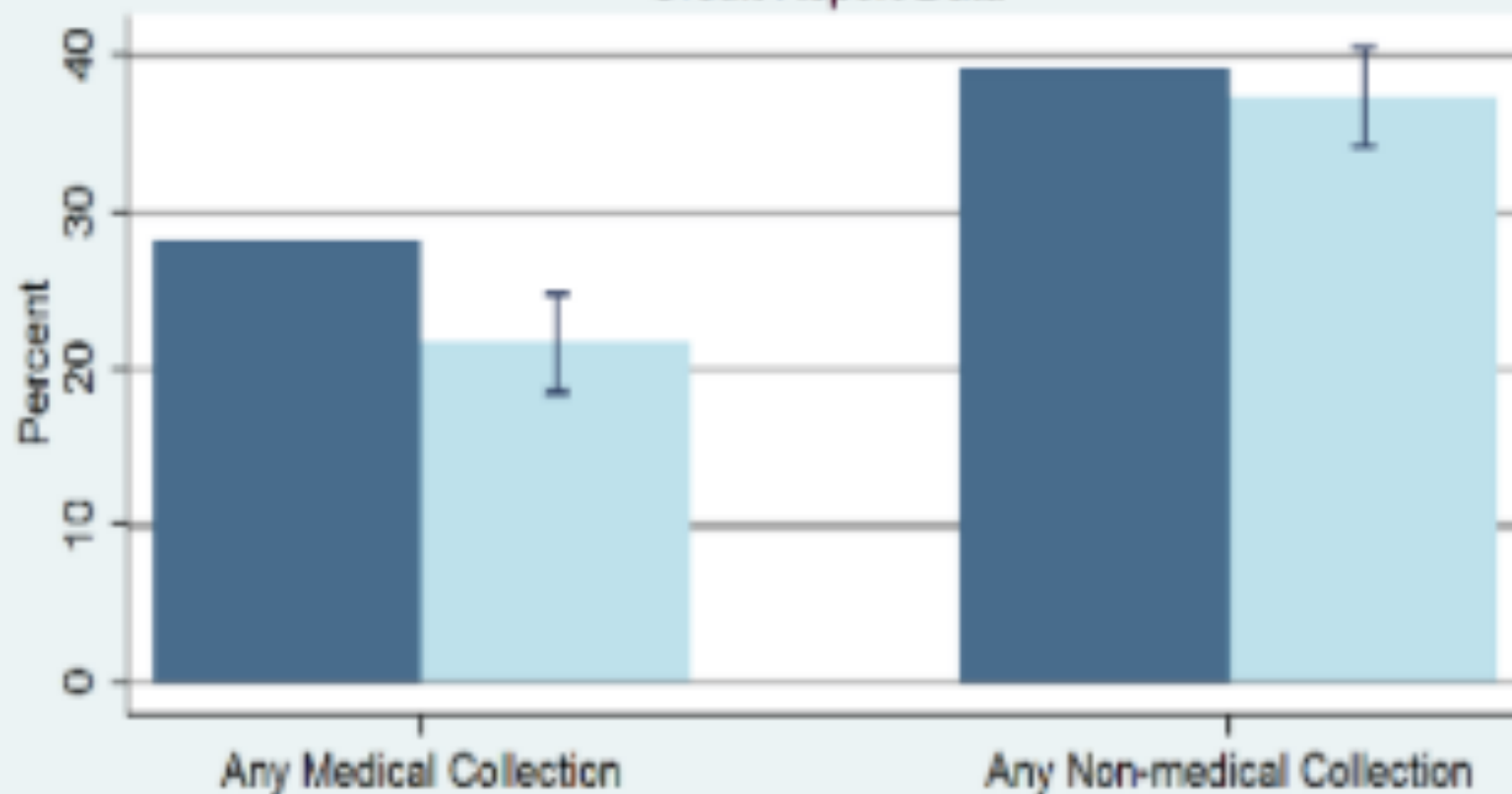
Control Mean

Control Mean plus Medicaid Effect

CI for Medicaid Effect

Medical and Non-medical Collections

Credit Report Data

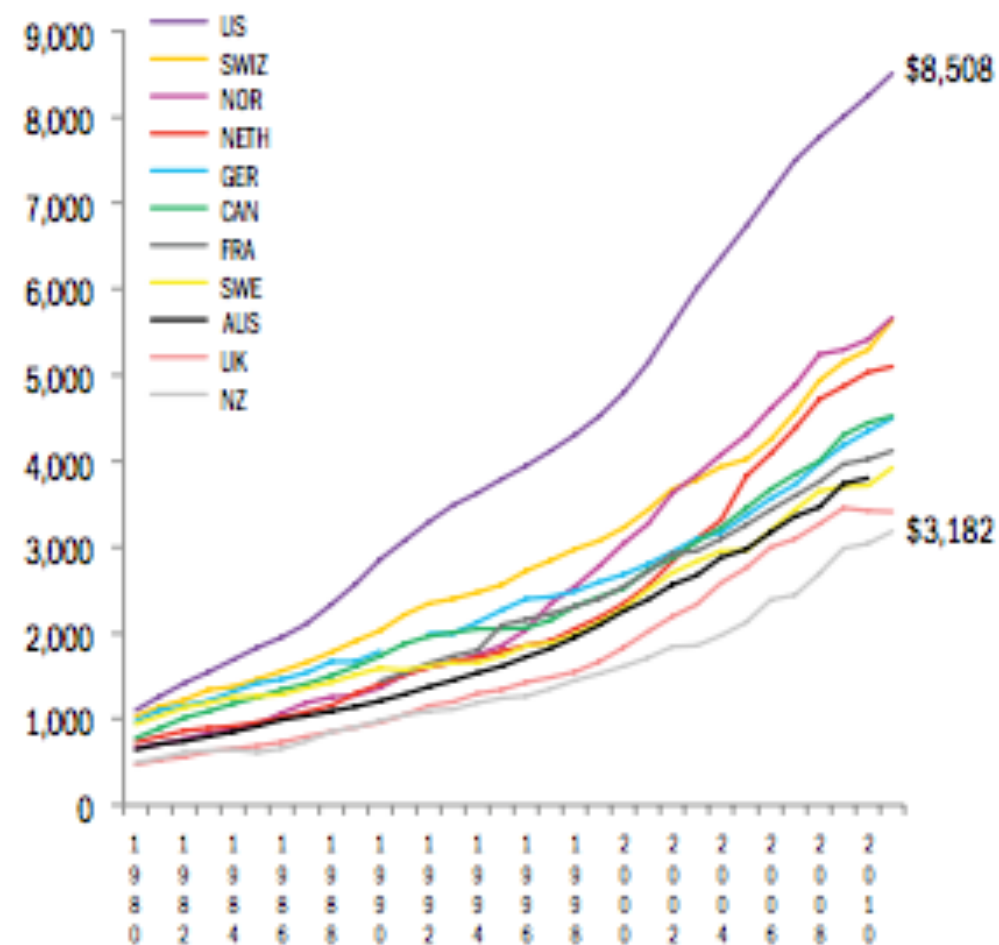


Outcomes measured over an approximately one year period.

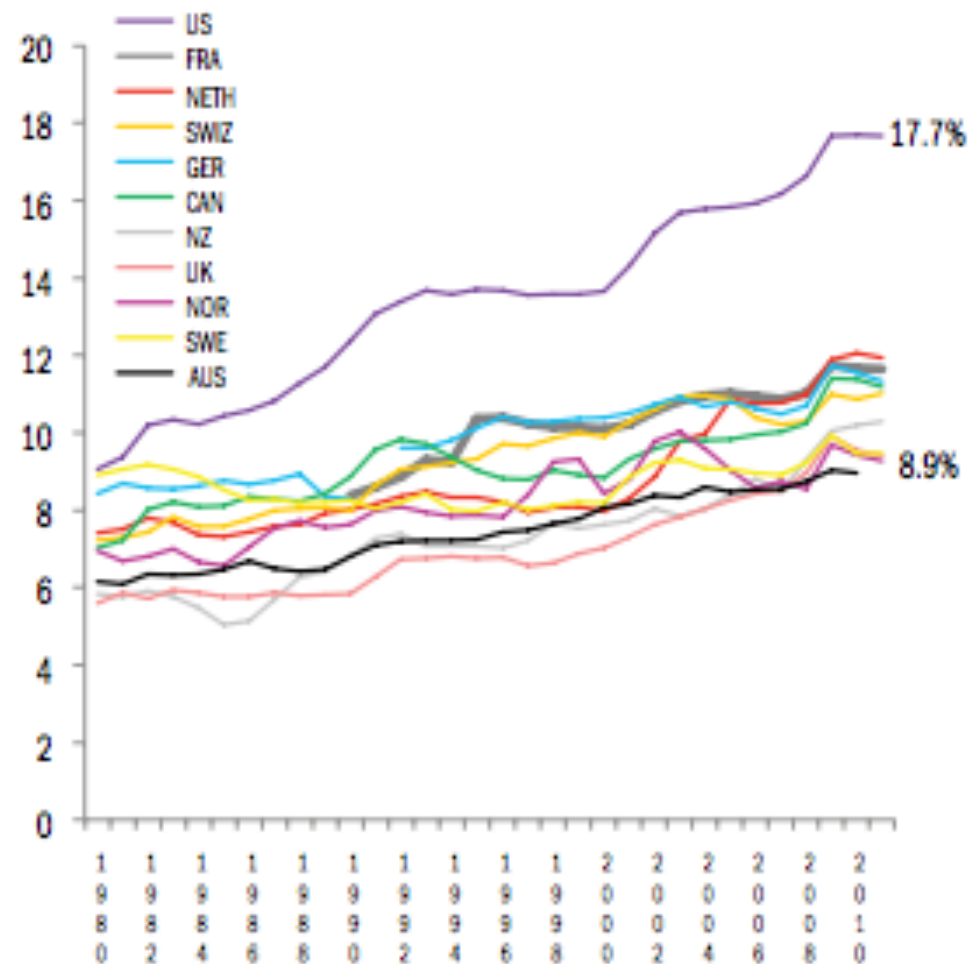
INTERNATIONAL COMPARISONS

EXHIBIT 1. INTERNATIONAL COMPARISON OF SPENDING ON HEALTH, 1980-2011

Average spending on health per capita (\$US PPP)



Total expenditures on health as percent of GDP



COMPARATIVE HEALTH SYSTEMS

- Bismark Model
 - Germany, Japan, Belgium, Switzerland
 - Health care providers and payers are private
 - Has private health insurance plans (financed by employers and employees through payroll deduction) = multipayer system
 - Everybody is covered

COMPARATIVE HEALTH SYSTEMS

- Beveridge Model
 - Great Britain, Italy, Spain, most of Scandinavia
 - Medical treatment is a public service - financed by the government through taxes = single payer
 - No medical bills
 - Public and private doctors

COMPARATIVE HEALTH SYSTEMS

- National Health Insurance
 - Canada, Australia, Taiwan, South Korea
 - Health care providers are private, but the government-run health insurer is the payer = single payer
 - Every citizen pays into this insurance program

COMPARATIVE HEALTH SYSTEMS

- Out-of-Pocket Model
 - Medical care is paid for by the patient, out of pocket, with no insurance or government plan to help

COMPARATIVE HEALTH SYSTEMS

- The US System
 - Working people under sixty-five (but not all) = Bismark, but for profit
 - Native Americans, military, veterans = Beveridge
 - Over 65 = National Health Insurance
 - Uninsured = Out-of-Pocket
 - But just really complicated and particular because of an array of private, for-profit insurers

EXHIBIT ES-1. OVERALL RANKING

COUNTRY RANKINGS

Top 2*

Middle

Bottom 2*



AUS CAN FRA GER NETH NZ NOR SWE SWIZ UK US

OVERALL RANKING (2013)

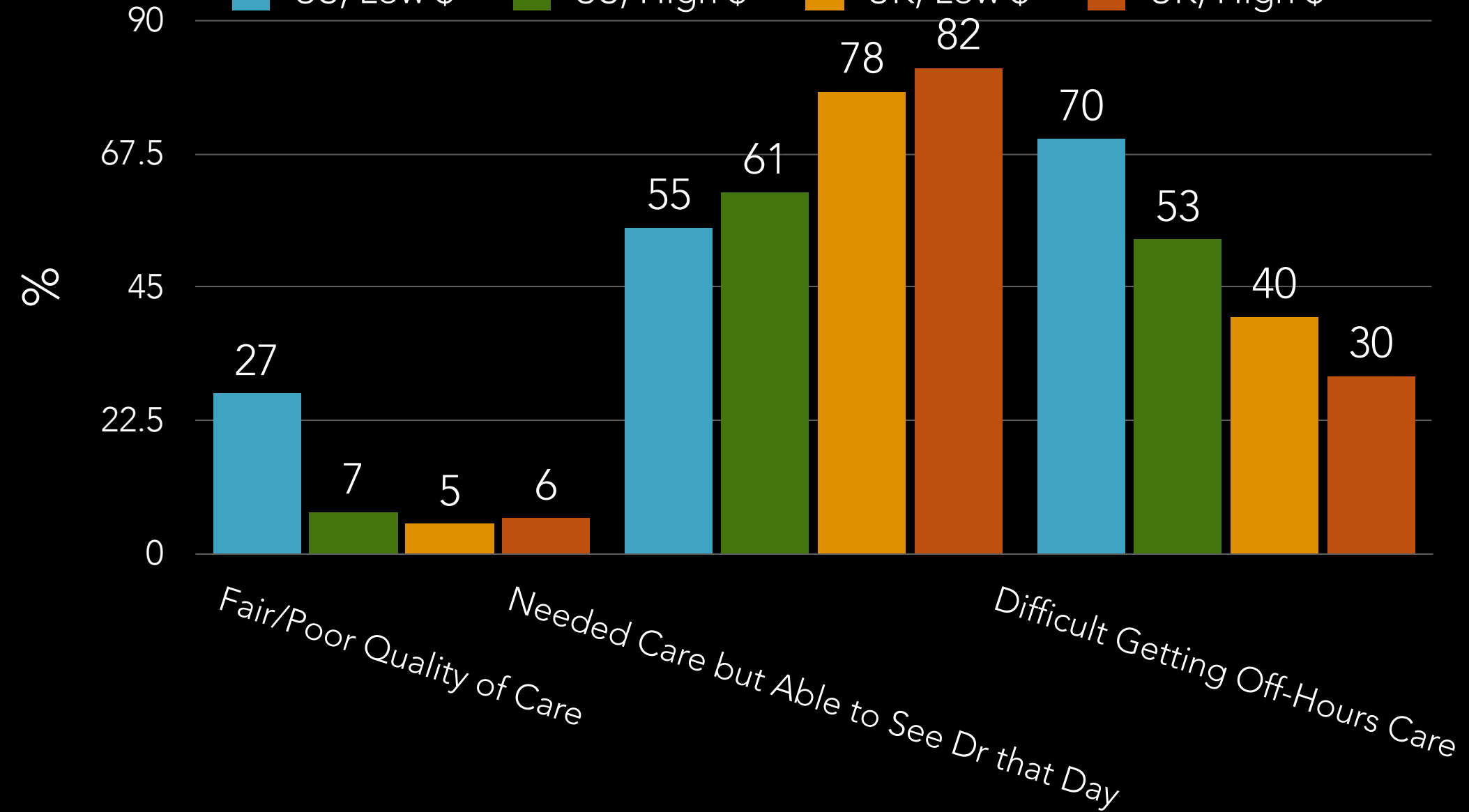
Quality Care	4	10	9	5	5	7	7	3	2	1	11
Effective Care	2	9	8	7	5	4	11	10	3	1	5
Safe Care	4	7	9	6	5	2	11	10	8	1	3
Coordinated Care	3	10	2	6	7	9	11	5	4	1	7
Patient-Centered Care	4	8	9	10	5	2	7	11	3	1	6
Access	5	8	10	7	3	6	11	9	2	1	4
Cost-Related Problem	8	9	11	2	4	7	6	4	2	1	9
Timeliness of Care	9	5	10	4	8	6	3	1	7	1	11
Efficiency	6	11	10	4	2	7	8	9	1	3	5
Equity	4	10	8	9	7	3	4	2	6	1	11
Healthy Lives	5	9	7	4	8	10	6	1	2	2	11
Health Expenditures/Capita, 2011**	4	8	1	7	5	9	6	2	3	10	11
	\$3,800	\$4,522	\$4,118	\$4,495	\$5,099	\$3,182	\$5,669	\$3,925	\$5,643	\$3,405	\$8,508

Notes: * Includes ties. ** Expenditures shown in \$US PPP (purchasing power parity); Australian \$ data are from 2010.

Source: Calculated by The Commonwealth Fund based on 2011 International Health Policy Survey of Sicker Adults; 2012 International Health Policy Survey of Primary Care Physicians; 2013 International Health Policy Survey; Commonwealth Fund National Scorecard 2012; World Health Organization; and Organization for Economic Cooperation and Development, OECD Health Data, 2013 (Paris: OECD, Nov. 2013).

EQUITY MEASURES

US, Low \$ US, High \$ UK, Low \$ UK, High \$



EQUITY MEASURES

