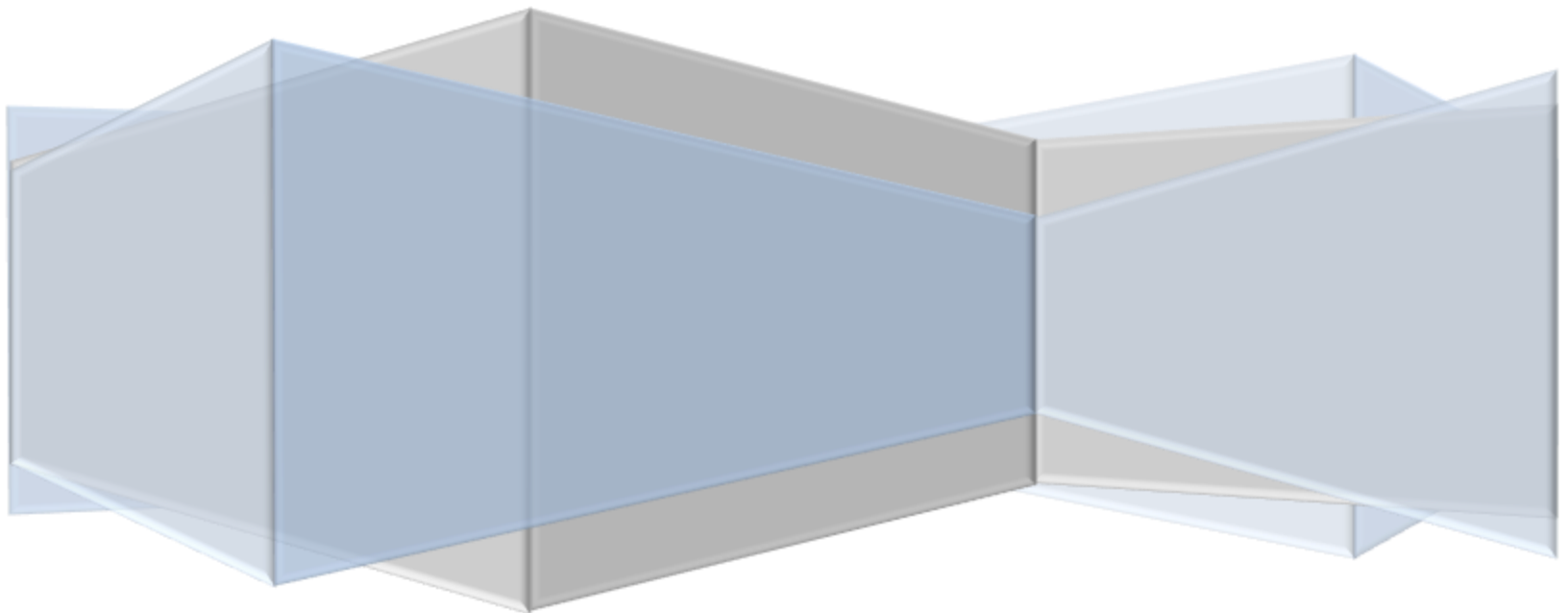


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**Is Healthcare in America a
Right or Commodity?
A European View of the
Healthcare Debate in America**
Frost Perspective

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Introduction

Many Americans have a fundamental, albeit misguided belief about a capitalist economy. The belief is success is solely a measure of hard work and intellect, while failure is the mark of diminished intelligence, criminality, or a desire to live off government perceived entitlements. In this context, healthcare is not viewed as a fundamental human right, but as a commodity that should be sold on an open market. Moreover, similar to anything sold on the free market, services range from the basics all the way to premium based care, all determined by the affordability and willingness of the purchaser to pay accordingly. In effect, the provision of healthcare can be compared to the sale of a luxury car or a high end mobile phone. If you are successful and wealthy, you can afford the best for you and your family, but if you are poor, and cannot afford even the basic car model, then you must take the bus or some other form of public transportation. Using this metaphor, there are some in America who believe and lobby for the abolishment of public transportation arguing that a minority should not have to pay for a majority in need.

The End of the Second World War: The World Reborn

Countries such as the United Kingdom, France, Germany, Italy, and Japan among others adopted capitalist economic systems following World War II, stipulating this model was best suited for individuals and corporations to thrive. However, these countries did not compromise on their adherence to the values of human rights and ensured that their economic models and policies guaranteed the protection of their citizens by guaranteeing access to basic human rights free of cost; healthcare being one of these perceived guaranteed rights. These countries strived to use accumulated wealth and re-distribute it equitably to all classes of citizens irrespective of social or economic status. These countries also instituted a strong belief in their populations, espousing that true equality can only be achieved if the more well off helped in raising the standard of living of the poor, thus impacting the overall welfare of the nation. It is not without irony that the United States of America, a country that played a pivotal part in rescuing the world from tyranny and darkness, is increasingly turning away from such values and beliefs.



The example of the origins of the United Kingdom's National Health Service (NHS) merits discussion when comparing a societal understanding of the value of healthcare. The NHS was launched in 1948, with basic human values and thinking behind it. During the World War II, the unemployment rate in the United Kingdom was near zero percent. As such the country felt an obligation toward taking care of its citizens in peace

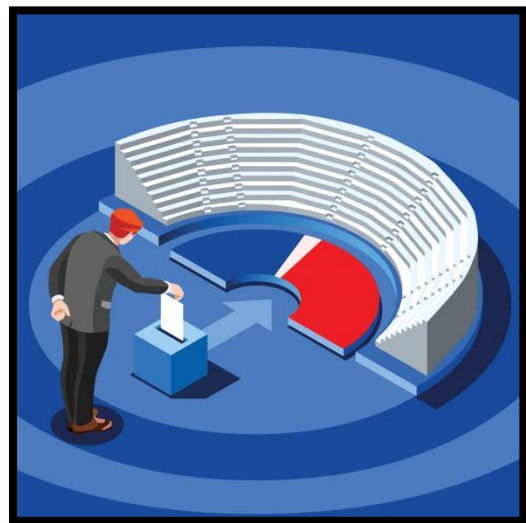
time, especially if it could in war. The NHS represents a system of government funded single payer healthcare. While this system has numerous drawbacks and challenges, it is worth noting that despite spending a fraction on healthcare as compared to the United States, people in the United Kingdom enjoy an average life expectancy of 81 years over the US life expectancy of 78 years.

The United States can also look toward the French and Canadian health systems as suitable examples of government run healthcare systems that provide access to all citizens to emulate. France provides universal health coverage coupled with a compulsory employer sponsored private insurance, irrespective of size of employer. As such, both private and public insurance complement each other, with the latter being used by citizens to pay deductibles and co-pays for commercial health insurance. Likewise, the Canadian system of publicly funded and privately funded healthcare should also be explored.

Opposition to Universal Health Insurance

Americans typically put forth three fundamental common arguments against universal health coverage. The first is the perceived long waiting times to see doctors and specialists, the second is the fact that Europeans pay higher taxes than the US nationals for their healthcare, and the third is the lack of innovation in countries with what is perceived as “cumbersome regulations” or a restrictive government oversight. The first argument, the long waiting times is a serious issue in many European countries, with patients having to wait days to see their primary care physician, weeks to see specialists and sometimes months for certain imaging procedures. The rationale for this is not inefficient care provision, but an acute shortage of primary care doctors, specialists, nurses, and other healthcare staff in these countries. It is important to note that the United States is not immune to these shortages. By 2025, it is expected that the United States will see a shortage of anywhere between 15,000 and 40,000 primary doctors and 38,000 and 60,000 specialists.

Turning to the second argument on taxes, while it is true that Europeans in general pay more taxes, these taxes cover a broad range of public services such as pensions and healthcare. For example, the UK pay slip has two line items in deductions, income tax which funds the NHS and National Insurance which funds social security and pensions. Turning to the United States, a standard pay slip consists of Federal Income Tax deductions, Social Security Tax deductions, and Medicaid Tax deductions, among others. This does not include the amount deducted toward 401K plans and private health insurance. In reality, once these taxes and deductions are taken together, the average American ends up paying much more than his/her European counterpart.



American companies argue that an environment with lower corporate tax, limited regulatory oversight, and limited reimbursement caps is essential for economic and business innovation. European countries, with severe budgetary constraints are at the forefront of innovations in healthcare efficiency in order to cope with the myriad challenges affecting their systems. Companies operating in Europe have found the ability to work within strong regulatory frameworks and cumbersome adoption policies by governments. Several European CEOs welcome strong regulatory oversight and caps on reimbursement as an essential requirement toward a just and equitable society, even if it means reducing profit margins. This thinking originated from the socio-cultural belief that the path to individual success goes hand in hand with the overall betterment of the community and the country.



The Road Ahead

Charles Dickens wrote, “It was the best of times, it was the worst of times”. This sentiment is applicable to the world today, especially when it comes to making healthcare available to all. Countries are increasingly becoming interconnected, with the effects of events in one country felt in real time in another across the world. As a result, people are rapidly becoming more aware of global systems and are requesting their country emulate the best that the world has to offer. American media and other forums continue to criticize universal health systems,

focusing on their myriad challenges and their inefficiencies. This thinking is not only dangerous and without merit, but can also prove to be destructive. Politicians at the end of the day echo the will and sentiments of their electorate. The American people should be allowed an unbiased analysis of global health systems absent of political partisan thinking at home. Only then can there be a healthy debate grounded in merit and facts.

It is also important for Americans to understand that a system of universal healthcare or a single payer solution is not at odds with the principles of a capitalist economy. Indeed, healthier citizens contribute more to the economy than those chronically ill and are unable to afford care. Nations around the world including emerging economies are united in the belief that healthcare is a fundamental human right that should be guaranteed by their respective government. While western and eastern European countries, as well as other first world countries guarantee universal health coverage, numerous developing economies promise basic care services to their respective populations along with subsidized costs of care for people in lower income groups. A single payer system in the United States will not be without its drawbacks, but an impartial study of its feasibility should be undertaken to move in the direction of providing care to all Americans.