A view of health care around the world

From the North American Primary Care Research Group

A View Of Health Care Around The World

NAPCRG's 2012 Annual Meeting took place in New Orleans, Louisiana the first week of December and was a celebration of NAPCRG's 40th anniversary. The first day's plenary session by T. R. Reid, American author, well-known reporter, documentary filmmaker, and commentator on National Public Radio's *Morning Edition* was both lighthearted and thought-provoking. Reid recounted his experiences obtaining health care in various industrialized nations in which he lived with his family while completing his book, *The Healing of America* and PBS documentary, *Sick Around the World*.

Reid compared 4 different health care models used in industrialized nations, including: the Beveridge model, the Bismarck model, the National Health Insurance or Tommy Douglas model, and the out-of-pocket model. Designed by National Health Service creator Lord William Beveridge, the Beveridge model provides health care for all citizens and is financed by the government through tax payments. This "socialized medicine" model is currently found in Great Britain, Spain, and New Zealand.

The Bismarck model uses an insurance system and is usually financed jointly by employers and employees through payroll deduction. Unlike with the US insurance industry, Bismarck-type health insurance plans do not make a profit and must include all citizens. Doctors and hospitals tend to be private in Bismarck countries. This model is found in Germany, France, Belgium, the Netherlands, Japan, and Switzerland.

The National Health Insurance model has elements of both the Beveridge and Bismarck models. It uses private-sector providers, but payment comes from a government-run insurance program that all citizens fund through a premium or tax. These universal insurance programs tend to be less expensive and have lower administrative costs than American-style for-profit insurance plans. National Health Insurance plans also control costs by limiting the medical services they pay for and/or requiring patients wait to be treated. The classic National Health Insurance system can be found in Canada.

The final model, the out-of-pocket model, is what is found in the majority of the world. It is used in countries that are too poor or disorganized to provide any kind of national health care system. In these countries, those that have money and can pay for health care get it, and those that do not stay sick or die. In rural regions of Africa, India, China, and South America, hundreds of millions of people go their whole lives without ever seeing a doctor.

One common theme Reid noticed among the health care systems he utilized was that these systems provide health care coverage for everyone, yet spend substantially less on health care than the United States does. Also, he was able to get good care for himself and his family and the bill was nearly one-quarter of what he would be charged at home in the United States. The US health care system has elements of each of the 4 models and provides different types of care and coverage for different sectors of the population, making it disjointed and costly.

Reid pointed out the myriad downfalls of the current US system, most notably that Americans have some of the worst health-related outcomes of industrialized nations. From his vast lived experiences, he concluded that the best system is one that covers health care for all individuals from cradle to grave. This in turn makes preventative care something that heath care providers are invested in, therefore driving down costs and improving health in the long term. At the conclusion of the speech, Reid summed up his book for the audience in one sentence: "If we could find the will to provide health care for everyone, the other countries could show us the way."

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« Previous | Next Article »
Table of Contents

This Article

» Full Text
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Departments
Family Medicine Updates

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TOP

This map shows Universal health care around the world. Universal health care is a national health insurance program in many countries that is mostly financed by taxes and administered by the government to provide comprehensive health care that is accessib. The health system offers universal access to health care, regardless of ability to pay, through the government administers the compulsory national health insurance program, Medicare, which is financed through general taxation and a health tax levy. This provides the entire population with subsidized access to the doctor of their choice for out-of-hospital care, free public hospital care and subsidized pharmaceuticals.