

# THE ECONOMIC EVOLUTION OF AMERICAN HEALTH CARE



FROM MEDICARE TO MEDICAID TO HEALTH CARE

DAVID DRANDONE

# Economic Evolution Of American Health Care

**Jill Quadagno**



## **Economic Evolution Of American Health Care:**

*The Economic Evolution of American Health Care* David Dranove, 2009-01-10 The American health care industry has undergone such dizzying transformations since the 1960s that many patients have lost confidence in a system they find too impersonal and ineffectual. Is their distrust justified and can confidence be restored? David Dranove, a leading health care economist, tackles these and other key questions in the first major economic and historical investigation of the field. Focusing on the doctor-patient relationship, he begins with the era of the independently practicing physician epitomized by Marcus Welby, the beloved father figure doctor in the 1960s television show of the same name, who disappeared with the growth of managed care. Dranove guides consumers in understanding the rapid developments of the health care industry and offers timely policy recommendations for reforming managed care as well as advice for patients making health care decisions. The book covers everything from start-up troubles with the first managed care organizations to attempts at government regulation to the mergers and quality control issues facing MCOs today. It also reflects on how difficult it is for patients to shop for medical care. Up until the 1970s, patients looked to autonomous physicians for recommendations on procedures and hospitals, a process that relied more on the patient's trust of the physician than on facts and resulted in skyrocketing medical costs. Newly emerging MCOs have tried to solve the shopping problem by tracking the performance of care providers while obtaining discounts for their clients. Many observers accuse MCOs of caring more about cost than quality and argue for government regulation. Dranove, however, believes that market forces can eventually achieve quality care and cost control. But first, MCOs must improve their ways of measuring provider performance; medical records must be made more complete and accessible, a task that need not compromise patient confidentiality; and patients must be willing to seek and act on information about the best care available. Dranove argues that patients can regain confidence in the medical system and even come to trust MCOs, but they will need to rely on both their individual doctors and their own consumer awareness. **Code Red** David Dranove, 2009-04-11 The U.S. healthcare system is in critical condition, but this should come as a surprise to no one. Yet until now, the solutions proposed have been unworkable pie-in-the-sky plans that have had little chance of becoming law and even less of succeeding. In *Code Red*, David Dranove, one of the nation's leading experts on the economics of healthcare, proposes a set of feasible solutions that address access, efficiency, and quality. Dranove offers pragmatic remedies, some of them controversial, all of them crucially needed to restore the system to vitality. He pays special attention to the plight of the uninsured and proposes a new direction that promises to make premier healthcare for all Americans a national reality. Setting his story against the backdrop of healthcare in the United States from the early twentieth century to the present day, he reveals why a century of private and public sector efforts to reform the ailing system have largely failed. He draws on insights from economics to diagnose the root causes of rising costs and diminishing access to quality care, such as inadequate information, perverse incentives, and malfunctioning insurance markets. Dranove describes the ongoing efforts to

revive the system including the rise of consumerism the quality movement and initiatives to expand access and argues that these efforts are doomed to fail without more fundamental systemic market based reforms Code Red lays the foundation for a thriving healthcare system and is indispensable for anyone trying to make sense of the thorny issues of healthcare reform

The Economics of U.S. Health Care Policy: The Role of Market Forces Frank W. Musgrave, 2015-02-24 Designed as a primary text for courses in health care economics and policy analysis this comprehensive work places the issues and economic analysis of the health care industry in the context of market forces driving the industry including negotiated markets managed care and the growing influence of oligopolies Written in accessible prose without the aid of technical jargon and mathematical formulations the content is rich with applicable understandable economic concepts and analysis and examples of market failure and government involvement Some of the major policy issues covered are drug pricing Medicare and Medicaid reform the medically uninsured for profit hospital monopoly price power managed care competitive pricing and new negotiated markets The relevant economic concepts employed in the text include price elasticity of demand supply market structure from competitive to oligopolistic markets monopoly pricing power measures of health care inflation and the biases of the CPI demand and supply factors inverse relationship of present health care expenditures as a percentage of GDP measures concepts of efficiency and the role of government in a market era

**The Economics of Health and Health Care** Sherman Folland, Allen Charles Goodman, Miron Stano, 2016-05-23 For courses in Health Economics U S Health Policy Systems or Public Health taken by health services students or practitioners the text makes economic concepts the backbone of its health care coverage Folland Goodman and Stano's book is the bestselling Health Care Economics text that teaches through core economic themes rather than concepts unique to the health care economy This edition contains revised and updated data tables where applicable The advent of the Patient Protection and Affordable Care Act PPACA in 2010 has also led to changes in many chapters most notably in the organization and focus of Chapter 16

**Health Care in America** John C. Burnham, 2015-05-15 A comprehensive history of sickness health and medicine in America from Colonial times to the present In Health Care in America historian John C Burnham describes changes over four centuries of medicine and public health in America Beginning with seventeenth century concerns over personal and neighborhood illnesses Burnham concludes with the arrival of a new epoch in American medicine and health care at the turn of the twenty first century From the 1600s through the 1990s Americans turned to a variety of healers practices and institutions in their efforts to prevent and survive epidemics of smallpox yellow fever cholera influenza polio and AIDS Health care workers in all periods attended births and deaths and cared for people who had injuries disabilities and chronic diseases Drawing on primary sources classic scholarship and a vast body of recent literature in the history of medicine and public health Burnham finds that traditional healing care and medicine dominated the United States until the late nineteenth century when antiseptic aseptic surgery and germ theory initiated an intellectual social and technical transformation He divides the age of modern medicine into several

eras physiological medicine 1910s 1930s antibiotics 1930s 1950s technology 1950s 1960s environmental medicine 1970s 1980s and beginning around 1990 genetic medicine The cumulating developments in each era led to today's radically altered doctor-patient relationship and the insistent questions that swirl around the financial cost of health care Burnham's sweeping narrative makes sense of medical practice medical research and human frailties and foibles opening the door to a new understanding of our current concerns Social Issues in America James Ciment, 2015-03-04 More than 150 key social issues confronting the United States today are covered in this eight volume set from abortion and adoption to capital punishment and corporate crime from obesity and organized crime to sweatshops and xenophobia *Jonas and Kovner's Health Care Delivery in the United States*, 2014-05-14 How do we understand and also assess the health care of America Where is health care provided What are the characteristics of those institutions which provide it Over the short term how are changes in health care provisions affecting the health of the population the cost of care and access to care *Health Care Delivery in the United States* now in a thoroughly updated and revised 9th edition discusses these and other core issues in the field Under the editorship of Dr Kovner and with the addition of Dr James Knickman Senior VP of Evaluation Robert Wood Johnson Foundation leading thinkers and practitioners in the field examine how medical knowledge creates new healthcare services Emerging and recurrent issues from wide perspectives of health policy and public health are also discussed With an easy to understand format and a focus on the major core challenges of the delivery of health care this is the textbook of choice for course work in health care the reference for administrators and policy makers and the standard for in-service training programs chapter **Managed Care and Monopoly Power** Deborah HAAS-WILSON, Deborah Haas-Wilson, 2009-06-30 As millions of Americans are aware health care costs continue to increase rapidly Much of this increase in health care costs is due to the development of new life sustaining drugs and procedures but part of it is due to the increased monopoly power of physicians insurance companies and hospitals as the health care sector undergoes reorganization and consolidation There are two tools to limit the growth of monopoly power government regulation and antitrust policy In this timely book Deborah Haas Wilson argues that enforcement of the antitrust laws is the tool of choice in most cases Focusing on the economic concepts necessary to the enforcement of the antitrust laws in health care markets Haas Wilson provides a useful roadmap for guiding the future of these markets Encyclopedia of Healthcare Information Systems Wickramasinghe, Nilmini, Geisler, Eliezer, 2008-06-30 Healthcare a vital industry that touches most of us in our lives faces major challenges in demographics technology and finance Longer life expectancy and an aging population technological advancements that keep people younger and healthier and financial issues area constant strain on healthcare organizations resources and management Focusing on the organization's ability to improve access quality and value of care to the patient may present possible solutions to these challenges The Encyclopedia of Healthcare Information Systems provides an extensive and rich compilation of international research discussing the use adoption design and diffusion of

information communication technologies ICTs in healthcare including the role of ICTs in the future of healthcare delivery access quality and value of healthcare nature and evaluation of medical technologies ethics and social implications and medical information management     *Health And Society: Key Debates In Health Care* Taylor, Gary,Hawley, Helen,2010-03-01 Takes a unique and accessible debate approach with each chapter introducing a different issue e g private health care Every chapter is organised around the same format and looks in turn at the historical background to the issue policy initiatives theoretical arguments implications for professionals etc     EBOOK: Health And Society: Key Debates In Health Care Gary Taylor,Helen Hawley,2010-03-16 This is an accessible text that will be a useful source for lecturers and students in the field of health studies The material is coherently organised into three main themes the politics of provision setting priorities and patients and professionals I was particularly impressed with way in which the authors draw on theoretical insights and on the experiences of different health care systems in their analysis Professor Rob Baggott Director of the Health Policy Research Unit De Montfort University UK Who is responsible for the health of the nation To what extent should the state tackle health inequalities Is prevention better than cure Key Debates in Healthcare explores the answers to these and many more topical questions in healthcare The book considers eight main debates in healthcare ranging from the role of the state in the provision of health care to the rights of patients and the responsibilities each of us have for our own health The book also examines the different models of health and healthcare delivery and explores alternative methods of providing healthcare using the state the private sector or the voluntary sector Through these debates the book will help readers explore issues such as health inequalities health promotion and service delivery and establish their own perspective on issues of health and society Written as a core course book the book includes Theoretical perspectives to help you understand the logic and implications of broad social and political arguments related to health Policy developments to show the practical application of ideas in Britain the United States and in other parts of the world Perspectives of health professionals to illustrate the impact of healthcare debates on professional practice Healthcare scenarios to assist you to make connections between theory policy and practice Key Debates in Healthcare is key reading for all those training and studying to become health professionals and looking for a text to help them get to grips with the heart of healthcare provision     Differential Diagnoses Paul V. Dutton,2012-11-07 Although the United States spends 16 percent of its gross domestic product on health care more than 46 million people have no insurance coverage while one in four Americans report difficulty paying for medical care Indeed the U S health care system despite being the most expensive health care system in the world ranked thirty seventh in a comprehensive World Health Organization report With health care spending only expected to increase Americans are again debating new ideas for expanding coverage and cutting costs According to the historian Paul V Dutton Americans should look to France whose health care system captured the World Health Organization s number one spot In *Differential Diagnoses* Dutton debunks a common misconception among Americans that European health

care systems are essentially similar to each other and vastly different from U S health care In fact the Americans and the French both distrust socialized medicine Both peoples cherish patient choice independent physicians medical practice freedoms and private insurers in a qualitatively different way than the Canadians the British and many others The United States and France have struggled with the same ideals of liberty and equality but one country followed a path that led to universal health insurance the other embraced private insurers and has only guaranteed coverage for the elderly and the very poor How has France reconciled the competing ideals of individual liberty and social equality to assure universal coverage while protecting patient and practitioner freedoms What can Americans learn from the French experience and what can the French learn from the U S example Differential Diagnoses answers these questions by comparing how employers labor unions insurers political groups the state and medical professionals have shaped their nations health care systems from the early years of the twentieth century to the present day **The Fragmentation of U.S. Health Care** Einer

Elhauge,2010-03-22 Why is our health care system so fragmented in the care it gives patients Why is there little coordination amongst the many doctors who treat individual patients who often even lack access to a common set of medical records Why is fragmentation a problem even within a single hospital where errors or miscommunications often seem to result from poor coordination amongst the myriad of professionals treating any one individual patient Why is health care fragmented both over time so that too little is spent on preventive care and across patients so that resources are often misallocated to the patients who need it least The Fragmentation of U S Health Care Causes and Solutions approaches these broad questions with a highly interdisciplinary approach The articles included in the work address legal and regulatory issues including laws that mandate separate payments for each provider restrict hospitals or others from controlling or rewarding the set of providers treating a patient to assure coordinated care and provide affirmative disincentives for coordinating care by paying more for uncoordinated care that requires more services Business reasons for the current form of hospital organization are considered and efficiency and design are examined and compared to other industries The economics of current hospital organization are also taken into account The authors examine and propose various reforms that make our health care system less fragmented more efficient and more medically effective Commodifying Everything Susan Strasser,2013-12-16

Commodification refers most explicitly to the activities of turning things into commodities and of commercializing that which is not commercial in essence The mass marketing of pets the rise of the coffin industry the conversion of preacher into salesmen and the globalization of Taleggio cheese are some of the exciting but surprising topics in this volume that show how friendship death spirituality and artisanship all have a price after being commodified This unique collection of essays is a fascinating take on creating consumer products and consumer identities when what s for sale goes well beyond the thing itself It will be a course in a box for instructors who want to teach their students about commodification **American Healthcare** Peter Hilsenrath, PhD,2022-05-24 Selected by the Association of University Programs in Health Administration

for the Bugbee Falk Book Award Is the health sector a curse or a blessing The American health sector now accounts for a fifth of the economy American healthcare spending per capita far exceeds that of other developed countries Yet our health as measured by life expectancy and infant mortality is poor by comparison with the developed world Other measures of quality including hospital acquired infection are too common Healthcare costs financially cripple households despite advances associated with the Affordable Care Act There is widespread dissatisfaction with the American healthcare system and support for more change It is also the case that the health sector has been a leader in the evolution of the American economy Economic development is driven by innovative technology We tend to applaud new technology and the improvement it brings to our lives Important recent technologies often grow rapidly and faster than the wider economy This leads to larger shares of the economy Yet there is considerable apprehension about costs and economic impact of health spending This book details important health sector institutions and uniquely explores linkages between healthcare and broader economic growth The book addresses asymmetric information between providers and consumers as well as between insurers and beneficiaries There is a focus on monopoly power in labor markets which contributes to inefficiencies in the system The author also discusses cost effectiveness and allocative efficiency as well as emphasizing productivity and its relationship to the wider economy

*The Medical Delivery Business* Barbara Bridgman Perkins, 2004 Annotation An insightful look at how business models have shaped clinical case

**The Sociology of Health and Illness** Peter Conrad, 2009 A text that brings a critical and conceptual sociological orientation to bear on the issues underlying the current health care crisis and on proposed changes in the health system

Handbook of Social Work in Health and Aging Barbara Berkman, 2006-02-09 The Handbook of Social Work in Health and Aging is the first reference to combine the fields of health care aging and social work in a single authoritative volume These areas are too often treated as discrete entities while the reality is that all social workers deal with issues in health and aging on a daily basis regardless of practice specialization As the baby boomers age the impact on practice in health and aging will be dramatic and social workers need more specialized knowledge about aging health care and the resources available to best serve older adults and their families The volume s 102 original chapters and 13 overviews written by the most experienced and prominent gerontological health care scholars in the United States and across the world provide social work practitioners and educators with up to date knowledge of evidence based practice guidelines for effectively assessing and treating older adults and their families new models for intervention in both community based practice and institutional care and knowledge of significant policy and research issues in health and aging A truly monumental resource this handbook represents the best research on health and aging available to social workers today

**Health Care Policy In East Asia: A World Scientific Reference (In 4 Volumes)** , 2019-11-25 During the past three decades health care systems in the East Asian regions of China Japan South Korea and Taiwan have undergone major changes Each system has its unique achievements and challenges Global health care policymakers are increasingly



interested in understanding the changes that have taken place in these four systems This four volume reference set is designed to help health care professionals academics policymakers and general readers gain a good grasp of the background and latest developments in the health care systems of China Japan South Korea and Taiwan This reference set provides an in depth comparative health policy analysis and discussion of health care reform strategies in each of these systems One unique feature of this set is that each volume has been edited by a leading scholar who has been deeply involved in the development of the health care system in that particular region Each of these editors also has invited both scholars and practitioners to provide a first hand description and analysis of key health care reform issues in that system The many examples provided in each volume demonstrate how findings of evidence based policy research can be implemented into policy practice Volume 1 describes and discusses China s ambitious and complex journey of health care reform since 2009 The Chinese government has achieved universal health insurance coverage and has embarked on reforms of the service delivery system and provider payment methods that are aimed at controlling health expenditure growth and improving efficiency This volume includes pilot and social experiments initiated by the government and researchers and their evaluations that have guided the formulation of health reform policies It provides information on how to make reforms work at the local and provincial levels The findings detailed in this volume will contribute to a global knowledge base in health care reforms Volume 2 provides a comprehensive review and evaluation of the Japanese health care system Japan has a long history of health care system development and provision of universal health coverage with a mature and well developed health care system among East Asian countries However due to increases in health care costs economic stagnation and the country s rapidly aging population Japan has undergone significant health care reform during the last two decades both in the delivery as well as financing of health services in its hospital sector medical technology sector and long term care insurance Despite these challenges and reforms health outcomes among the Japanese population have been progressively among the best in the world This volume shows how policy research can lead to policy analysis implementation and assessment It also provides valuable lessons learnt for mutual learning among other health care systems Volume 3 offers a comprehensive review of the developments in South Korea s national health insurance system since 1989 in terms of financing delivery systems and outcomes The volume analyzes the efficiency of cost and service delivery by public sectors versus private sectors It points out areas of challenge to future Korean health care reform Chapter authors in this volume are leading experts involved in Korean health care policy implementation Volume 4 reviews the development and achievements of Taiwan Health Insurance since 1995 Because of its continuous reform in payment services delivery and pharmaceutical technology Taiwan has been considered a model example of universal health insurance among global health systems This volume shows the processes used to translate policy research findings into policy changes While the health care reform in Taiwan is ongoing the Taiwan example provides a real world and practical understanding of health care system changes In summary this four volume set

makes an outstanding contribution to health care system reform and policy research based on solid scholarly work. It also introduces policy researchers and academic communities to current debates about health systems, health financing, and universal health coverage. This reference volume is a must for anyone keen on East Asia's health care system reform dynamics and changing scene.

**One Nation, Uninsured** Jill Quadagno, 2006-10-09 Every industrial nation in the world guarantees its citizens access to essential health care services every country that is except the United States. In fact, one in eight Americans, a shocking 43 million people, do not have any health care insurance at all. *One Nation Uninsured* offers a vividly written history of America's failed efforts to address the health care needs of its citizens. Covering the entire twentieth century, Jill Quadagno shows how each attempt to enact national health insurance was met with fierce attacks by powerful stakeholders who mobilized their considerable resources to keep the financing of health care out of the government's hands. Quadagno describes how, at first, physicians led the anti-reform coalition, fearful that government entry would mean government control of the lucrative private health care market. Doctors lobbied legislators, influenced elections by giving large campaign contributions to sympathetic candidates, and organized grassroots protests, conspiring with other like-minded groups to defeat reform efforts. As the success of Medicare and Medicaid in the mid-century led physicians and the AMA to start scaling back their attacks, the insurance industry began assuming a leading role against reform that continues to this day. *One Nation Uninsured* offers a sweeping history of the battles over health care. It is an invaluable read for anyone who has a stake in the future of America's health care system.

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