

WHY DOES THE U.S. MAKE HEALTH CARE SO DIFFICULT AND SO EXPENSIVE?

by Nick Gier

In 1978-1979 I took my first sabbatical in Denmark. My former wife was a Dane, but my daughter and I were able to join her as full participants in the Danish welfare state. For a small initial fee we had immediate access to free health care. There were no questions about our income or pre-existing conditions. Although we first demurred, the local authorities insisted that we accept \$50 per month in child support. I was drawing half pay, so that extra money came in handy.

During that enjoyable and productive year, I learned that a colleague from Williams College was also on sabbatical in Denmark. His son came down with a bacterial infection that resisted treatment by standard antibiotics. In a local hospital he hung at the edge of death for months, but he eventually got better. His parents did not receive a bill for these extraordinary medical efforts.

The Danes pay some of the highest taxes in the world, but even conservative governments there dare not change the social safety net in any major way. It is clear that most Danes believe that they are getting a good return for their tax dollars. Neither my friend from Williams College nor I paid any Danish taxes, and none of my Danish friends or family thought that we are free-loaders. (I was allowed to pay American taxes on the money I earned there during four one-year stays.) The same generosity of spirit is found in the fact that the Scandinavian countries open their doors to more refugees per capita than any other nations.

I know an American couple who work at the University of Alberta. They received unconditional health benefits as soon as they arrived as landed immigrants. While on vacation in the U.S., the wife forgot to bring enough medicine for a very serious medical condition. The local Rite Aide wanted \$2,000 for the drugs, so a friend in Edmonton sent the drugs by overnight express. The Canadian pharmacy price of \$50, which she of course did not have to pay, was marked on the package.

Americans pay far more for their drugs than patients in any other country, even though many of them are manufactured right here in the U. S. An article in *Health Affairs* (April, 2013) reported that “prices for brand-

name drugs were 5 percent to 117 percent higher in the U.S. than in the other countries studied.” Patients in the United Kingdom, who fare better on sever major health conditions than Americans do, pay half of what Americans are billed for their prescriptions.

In 2011 Denmark paid out \$4,448 for each citizen for health care, and \$4,522 was spent for each Canadian. In both countries better health care has been obtained. In stark contrast, the U.S. spent \$8,508 on each American with much poorer results.

Health care expenses in the United Kingdom are \$3,405 per capita, but people there fare better than Americans in seven major illness categories. The U.S. ranks last among 16 industrialized countries for preventable deaths, which, according to the Centers for Disease Control, are estimated at 200,000 per year.

I quote in full this passage from an article in Forbes (9/4/14): “The rate of preventable deaths fell by 29 percent between 2001 and 2010, largely as a result of improved drugs and treatments. These declines were driven by people over 65, who almost universally have health insurance through Medicare. The decline among younger adults was much smaller, perhaps because many of them lacked health insurance and didn’t get medical attention and drugs to manage their cholesterol and blood pressure.”

I joined many others in opposing the Affordable Care Act, and our opposition was included in the polls that Republicans used to criticize a “government take-over” of health care. The public option was of course not part of the final bill, even though decades of experience with the world’s government health care systems prove that it the most efficient and least expensive. For years I have supported the late Senator Ted Kennedy’s proposal to extend tried and true Medicare for all Americans.

As many other countries did after World War II, the U. S. should have instituted universal health care fifty years ago. The inefficient private health insurance industry, which has much higher administrative costs

than Medicare, is now so strong that the Democrats had no choice but to piece together the complex plan that is Obamacare. It was destined to fail in implementation and as well as the goals of efficiency and cost cutting.

Republican obstruction in extending Medicaid in 20 states and refusing to set up state health exchanges has made matters much worse. Obama naively expected that states would set up their own exchanges, but only 15 have done so on their own. This was a tremendous extra burden on the roll-out of the Affordable Care Act. Republicans will be responsible for the negative effects on the uninsured in the Red States they control, where an inordinate number of preventable deaths occur.

Former Massachusetts Governor Mitt Romney, over Democrats' objections, insisted on the individual mandate in a plan very similar to Obamacare, except the latter has more emphasis on controlling costs. Over 98 percent of Bay State residents now have coverage.

Critics claimed that Romneycare would bankrupt the state, but health care costs have risen more slowly than the rest of the nation. Critics said that people would have to wait longer to see their doctors, but they didn't. A recent poll found that two-thirds believed that Romneycare has been a success.

I'm convinced that as the enrollments increase, more and more Americans will agree with the people of Massachusetts that achieving universal health was worth the effort. Even with the delays, six million previously uninsured Americans (one million short of the March 31 enrollment goal) now have health plans for their families. Only a pure cynic would belittle the emotional and financial security that this coverage brings.

Nick Gier taught philosophy at the University of Idaho for 31 years. Read his previous columns on this topic at www.NickGier.com/HealthCareWorld.pdf and [/healthironies.pdf](http://healthironies.pdf)