Principles of Universal Health Care Systems

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The Paradox: Better Care to More People for Less Money

- The US Health Care system is twice as expensive as universal health care systems around the world
- Yet millions lack insurance and millions with insurance forgo medical care or suffer from medical debt
- Our public health outcomes are comparatively worse than countries with universal care systems
- How do countries with universal care systems manage to provide better care to more people for less money
How Do they do it?
The three principles of universal health systems

► Universal health systems are universal!!!

► One single comprehensive system of benefits for everyone

► Financing: not for profit and limited cost sharing at point of care

The First Principle: Universality

- 100% of residents are guaranteed access to health care services

- No one is turned away based on inability to pay or driven into debt from medical bills

- Key point: access to comprehensive health care services is a human right and ensuring this right is the responsibility of the government
The Second Principle: One Single System of Benefits

- Political: Ensures that both rich and poor have a vested interest in the success of the system

- Reduces costs:
  - Price: price negotiation: providers and pharmaceuticals
  - Administration: one system allows efficient billing collection and eliminates administration/time in moving patients from one risk pool to another
  - Prevention: everybody is in the same system, they can’t be moved to a different risk pool.
The Third Principle: Financing is not-for-profit and no/low cost sharing

- No incentive (and wasted time and administration) to accept healthy patients and shift the cost/care of sick patients to other programs.

- The focus is on customer service and efficiency instead of avoiding paying for the sick in pursuit of profit.

- Low cost sharing avoids the delay of care and decreases health disparities.