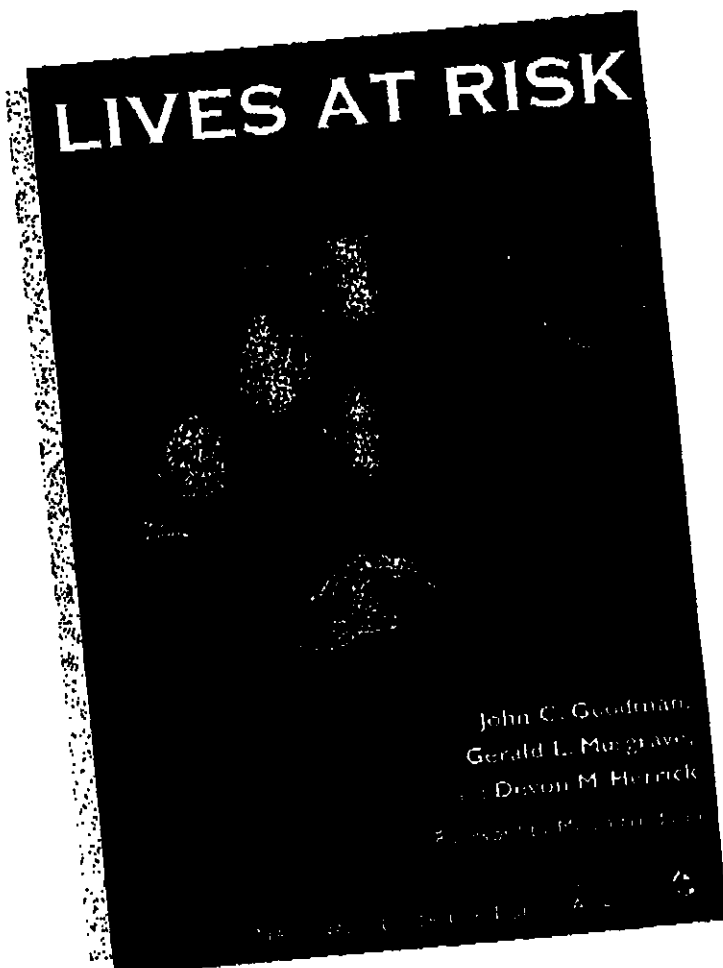


National Health Insurance Puts

LIVES AT RISK

Single-Payer Systems Don't Deliver on "Right" to Health Insurance

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Lives at Risk: Single-Payer National Health Insurance Around the World

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Just published and now available on
Amazon.com for \$22.95 in paperback.

Some people believe that the solution to every problem with America's health care system is single-payer health insurance. In general, single payer means one entity pays all the bills, and that entity is the government.

Yet national health insurance in other countries has been a failure, not a success. Over the past decade, almost every developed country with a national health care system has introduced market-oriented reforms, often looking to the United States for guidance.

Virtually every country with national health insurance has proclaimed health care to be a basic human right. But far from guaranteeing that right, their systems routinely impose health care rationing that delays or denies needed care.

- ✓ In Britain, about 1 million are waiting to be admitted to hospitals at any one time.
- ✓ In Canada, more than 876,000 are waiting for treatment of all types.
- ✓ In New Zealand, the number of people on waiting lists for surgery and other treatments is more than 90,000.

Not only do residents of other countries not have a right to health care, they may have fewer rights than foreigners have. While more than 1 million British patients waited for care, 10,000 private-pay patients—about half of whom were foreigners—received preferential treatment in Britain's top government hospitals in 2001.

On the surface, the number of people waiting may seem small—ranging from 0.5% in Canada to 2.5% in New Zealand. However, considering that only about 16% of the population enters a hospital each year in developed countries, these numbers are quite high. In New Zealand, for example, there is almost one person waiting for every five who receive treatment.

Patients who wait often wait in pain. Many put their lives at risk. One investigation found that delays in colon cancer treatment are so long in Britain that 20% of cases considered curable at time of diagnosis became incurable by the time of treatment.

Another study found that 121 patients were permanently removed from the waiting list for coronary bypass surgery in Ontario because they became so sick that they could no longer survive surgery. Patients in countries with national health insurance also have less access to expensive medical procedures than American patients.

- ✓ The use of coronary bypass surgery in the United States is slightly more than three times as high per capita as in Canada and almost five times as high as in Britain.
- ✓ The use of coronary angioplasty in the United States is almost five times as high per capita as in Canada and almost eight times as high as in Britain.
- ✓ The use of renal dialysis for kidney failure in the United States is almost double that of Canada and more than three times that of Britain.

"A single-payer system has great political appeal. It promises to provide quality health care for all regardless of race, religion, income or initial state of health. But does it live up to that promise? In this important book, John Goodman and his coauthors set out to find the answer."

*Milton Freeman
Nobel laureate and senior research fellow at the Hoover Institution*

Compared to the United States, patients in other countries also have difficulty obtaining access to advanced diagnostic equipment. For example,

- ✓ Britain has less than one-half as many CT scanners per capita as the United States and only one-half as many MRI scanners.
- ✓ The United States has two-thirds more CT scanners per capita than Canada and more than three times as many MRI units.

"This book will be an eye-opener to anyone who thinks a government-run system is the solution to our health care problems."

*Newt Gingrich
former speaker of the U.S. House of Representatives*

- ✓ Britain also co-developed (with the U.S.) kidney dialysis, but it consistently has had one of the lowest dialysis rates in Europe.
- ✓ Patients in single-payer systems often lack access to lifesaving prescription drugs many Americans take for granted.

Taxol, a drug widely prescribed in the U.S. for treatment of breast cancer, and Gemzar, a drug used to treat pancreatic cancer, are unavailable in some regions of the U.K.

According to the World Health Organization (WHO), as many as 25,000 people in Britain die of cancer each year because they cannot obtain the latest cancer treatments.

Perhaps as a result of not receiving needed care, patients with curable diseases often do not survive:

- ✓ In the United States, only one of four patients diagnosed with breast cancer dies of the disease, compared to one in three in Germany and France, and almost one in two in New Zealand.
- ✓ In the United States, only one in five prostate cancer patients dies of the disease, compared to one in four in Canada and one in two in France.
- ✓ In the United Kingdom, more than half of all prostate cancer patients die from the disease.

Unable to obtain the free health care they have been promised, patients in other countries often turn to the private sector:

- ✓ In Britain, about 7 million people have private insurance for services the government theoretically provides for free; ironically, the NHS is the largest provider of private care in the country.
- ✓ In New Zealand, more than one-third of the population has private

health insurance to cover services theoretically provided free.

- ✓ Canadians spend \$1 billion a year in the United States on health care services not available in their country.
- ✓ In Australia, about one-third of the population has private health insurance, and private-sector spending is almost one-third of all health care spending.

Critics of U.S. health care often maintain that the systems of other countries are more efficient. Yet all evidence points the other way.

- ✓ While about 1 million people wait for medical treatment in Britain, close to 16% of hospital beds are empty on any given day.
- ✓ An additional 15 to 16% of British hospitals beds are filled with patients who should be in nursing homes, geriatric wards or at home.
- ✓ Thus almost one-third of the nation's hospital beds are simply closed off to acute care patients.

While countries with national health insurance routinely skimp on services for the seriously ill, they often over-provide to patients with minor ailments. For example:

Disability Claim Advice

for You or Your Clients

Art Fries, RHU

1-800-567-1911

www.afries.com

Save this ad for future

"The American Medical Association strongly opposes single-payer national health care. Lives at Risk provides a wealth of evidence that confirms the AMA's position."

Donald J. Palmisano, M.D., J.D.

President, American Medical Association, 2003-2004

- ✓ There are more than 18 million ambulance rides in Britain every year, or about one ride for every three people in the country; 80% of the rides are for such non-emergency purposes as outpatient care and pharmacy visits, and amount to little more than free taxi service.
- ✓ The NHS provides free day care services to more than 260,000, home care or home help services to 578,000, home alterations for 375,000 and occupational therapy for 300,000.

The British preference for "caring" over "curing" is a direct result of the political nature of national health insurance. In a typical U.S. private health care plan, 41% of health care dollars are spent on the sickest 2% of the population. In a political system, politicians cannot afford to spend 40% of the budget on 2% of the voters, many of whom are probably too sick to vote anyway. The temptation is always to take from the few who are sick and spend instead on the many.

When health care is rationed, who gets pushed to the back of the queue? More often than not, it is the elderly. An 80-year-old U.S. female can expect to live almost a year longer than her British counterpart, and an 80-year-old U.S. male can expect another half-year. Moreover:

- ✓ Although more than one-third of all diagnosed cancers occur in patients 75 years of age or older, most cancer-screening programs in the British NHS do not include people over age 65.
- ✓ In New Zealand, patients over the age of 75 are excluded from life-extending renal dialysis.

Despite the promise of equal care for all, inequalities pervade every government-run health care system. In Britain, people from poor urban areas live shorter lives and die more frequently from common, treatable illnesses than their wealthier neighbors. For example:

- ✓ A person with colon cancer in Herefordshire has a 52% chance of survival, while a person in the northeastern town of Tees has a 25% chance.
- ✓ A woman with breast cancer living in the London Borough of Hillingdon has an 80% chance of surviving five years, compared to a 65% chance for a woman in North Staffordshire.

National health care systems have failed not because of minor glitches or easily correctable problems. Rather, the critical problems flow inexorably from the fact that they are government-run. Indeed, the problems we identify are the very reason these systems have survived. In all these countries, the rich and powerful find ways to jump the queues and get to the head of the waiting lines. If it were otherwise—if the upper crust had no greater access to MRI scans than street sweepers—these systems would not survive for a minute. ■

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