



HEALTHCARE REFORM OPTIONS

	BEST OPTION					
<i>TYPE OF REFORM</i>	GOVERNMENT-RUN	SINGLE-PAYER INSURANCE	INSURANCE VOUCHERS	INSURANCE MANDATE	INSURANCE INCENTIVES	INCREMENTAL REFORM
<i>PRACTICAL EXAMPLE</i>	GREAT BRITAIN	CANADA		MASSACHUSETTS		(STATUS QUO)
<i>NOTABLE ADVOCATE</i>	MICHAEL MOORE	MICHAEL MOORE		CLINTON CAMPAIGN	OBAMA CAMPAIGN	UNITED STATES
<i>NOTABLY RELATED BOOK</i>			DR. EZEKIEL EMANUEL <i>HEALTHCARE, GUARANTEED</i>			REPUBLICAN CANDIDATES
<i>EXTENT OF COVERAGE</i>	UNIVERSAL	UNIVERSAL	UNIVERSAL	PERHAPS 96% (UNDER 65)	PERHAPS 92% (UNDER 65)	82% (UNDER 65)
<i>KATHY ERICKSON FACTOR *</i>	YES	YES	YES	POSSIBLY BUT NOT PROBABLY	PROBABLY NOT	DID NOT
<i>NATURE OF COVERAGE</i>	(NO INSURANCE)	PUBLIC INSURANCE ONLY	PRIVATE INSURANCE ONLY	PUBLIC & PRIVATE INSURANCE	PUBLIC & PRIVATE INSURANCE	PUBLIC & PRIVATE INSURANCE
PUBLIC MIXED PRIVATE	PUBLIC HEALTH SERVICE ONLY	PUBLIC & PRIVATE SERVICE	PRIVATE SERVICE (MOSTLY) **	PUBLIC & PRIVATE SERVICE	PUBLIC & PRIVATE SERVICE	PUBLIC & PRIVATE SERVICE
	PUBLIC DEFINED BENEFIT	PUBLIC DEFINED BENEFIT	PUBLIC DEFINED BENEFIT ***	PUBLIC & PRIVATE DEFINITION	PUBLIC & PRIVATE DEFINITION	PUBLIC & PRIVATE DEFINITION
<i>INDEPENDENCE OF SYSTEM</i>	NOT TIED TO EMPLOYMENT	NOT TIED TO EMPLOYMENT	NOT TIED TO EMPLOYMENT	TIED TO EMPLOYMENT	TIED TO EMPLOYMENT	TIED TO EMPLOYMENT
<i>BIGGEST INCENTIVE OF SYSTEM</i>	PATIENT SERVICE	PATIENT SERVICE	PATIENTS & SHAREHOLDERS	PATIENTS & SHAREHOLDERS	PATIENTS & SHAREHOLDERS	SHAREHOLDER SERVICE
<i>VIBRANCE OF MED. RESEARCH</i>	STAGNANT	STAGNANT	MORE VIBRANT ****	VIBRANT	VIBRANT	VIBRANT
<i>SHARE OF ECONOMY</i>	8.3% OF ECONOMY (BRITAIN)	10% OF ECONOMY (CANADA)	MORE EFFICIENT	MORE EFFICIENT	MORE EFFICIENT	15.3% OF ECONOMY (U.S.)
<i>SOURCE OF FUNDING</i>	PAYROLL TAXES	PAYROLL TAXES, PREMIUMS	VALUE-ADDED TAX *****	WORKERS, EMPLOYERS, GOVT	WORKERS, EMPLOYERS, GOVT	WORKERS, EMPLOYERS, GOVT
<i>LIKELY SUPPORTERS</i>	PUBLIC (LONG TERM) MOST DEMOCRATS	PUBLIC (LONG TERM) MOST DEMOCRATS	PUBLIC MOST DEMOCRATS ***** MOST REPUBLICANS ***** INSURANCE COMPANIES	PUBLIC (SHORT TERM) MOST DEMOCRATS SOME REPUBLICANS	PUBLIC (SHORT TERM) MOST DEMOCRATS SOME REPUBLICANS	SOME REPUBLICANS
<i>LIKELY OPPONENTS</i>	PUBLIC (SHORT TERM) REPUBLICANS SOME DEMOCRATS INSURANCE COMPANIES	PUBLIC (SHORT TERM) REPUBLICANS SOME DEMOCRATS INSURANCE COMPANIES	NONE	PUBLIC (LONG TERM) *****	PUBLIC (LONG TERM) *****	PUBLIC

NOTES

- * THE *KATHY ERICKSON FACTOR* POSES THE QUESTION "WOULD KATHY ERICKSON (THE AUTHOR'S MOTHER) HAVE BEEN TREATED FOR HER CANCER UNDER SUCH A SYSTEM?". SHE DIED PREMATURELY IN 2003 AT THE AGE OF 56, BECAUSE THE AMERICAN HEALTHCARE SYSTEM IS BRUTAL TO THE UNINSURED. SHE RECEIVED NO TREATMENT, EVEN THOUGH THE SYSTEM WAS WELL ACQUAINTED WITH HER PLIGHT, AND HAD MANY OPPORTUNITIES TO HELP. IT IS TOO LONG AN EXPLANATION FOR THIS CHART, BUT INSURANCE INCENTIVES (AND PROBABLY AN INSURANCE MANDATE) WOULD NOT HAVE HELPED IN HER CASE. THE AUTHOR IS AVAILABLE FOR EXPLANATION.
- ** STATES AND LOCALITIES MAY CHOOSE TO PROVIDE PUBLIC HEALTH SERVICE (e.g. CLINICS); BUT ONCE FULLY IMPLEMENTED, THE FEDERAL GOVERNMENT WOULD NO LONGER BE A DIRECT PROVIDER OF CIVILIAN HEALTHCARE.
- *** PRIVATE INSURANCE OFFERINGS MAY EXCEED THE PUBLIC DEFINED BENEFIT, BUT THE DEFINED MINIMUM WOULD BE UNIVERSAL FOR ALL NON-SUPPLEMENTARY OFFERINGS.
- **** MEDICAL RESEARCH WOULD BE MORE VIBRANT UNDER THIS PLAN BECAUSE OF THE DATA GATHERING AND QUALITY CONTROL OF DR. EMANUEL'S PROPOSED *INSTITUTE FOR TECHNOLOGY AND OUTCOMES ASSESSMENT*.
- ***** MOST DEMOCRATS WOULD SUPPORT HEALTHCARE VOUCHERS BECAUSE THE COVERAGE IS TRULY UNIVERSAL, THE BENEFIT IS PUBLICALLY DEFINED, AND INSURANCE WOULD NO LONGER BE TIED TO EMPLOYMENT. MOST REPUBLICANS WOULD SUPPORT HEALTHCARE VOUCHERS BECAUSE THE FEDERAL GOVERNMENT WOULD NO LONGER BE IN THE INSURANCE BUSINESS, INCLUDING THE ELIMINATION OF MEDICARE AND MEDICAID.
- ***** THE LONG TERM PUBLIC APPEAL OF INSURANCE INCENTIVES AND MANDATES WAIVES BECAUSE OF THE LACK OF TRUE UNIVERSALITY OF COVERAGE, AND BECAUSE MANY SYSTEMIC PROBLEMS ARE LEFT UNSOLVED.
- ***** DEDICATED VALUE-ADDED TAX (VAT) ON ALL NON-FOOD PURCHASES. SUCH A TAX IS MORE PROGRESSIVE THAN PAYROLL TAXES (e.g. MEDICARE TAX); CREATES SENSE OF UNIVERSAL BUY-IN; AND IS LESS LIKELY TO BE RAIDED.