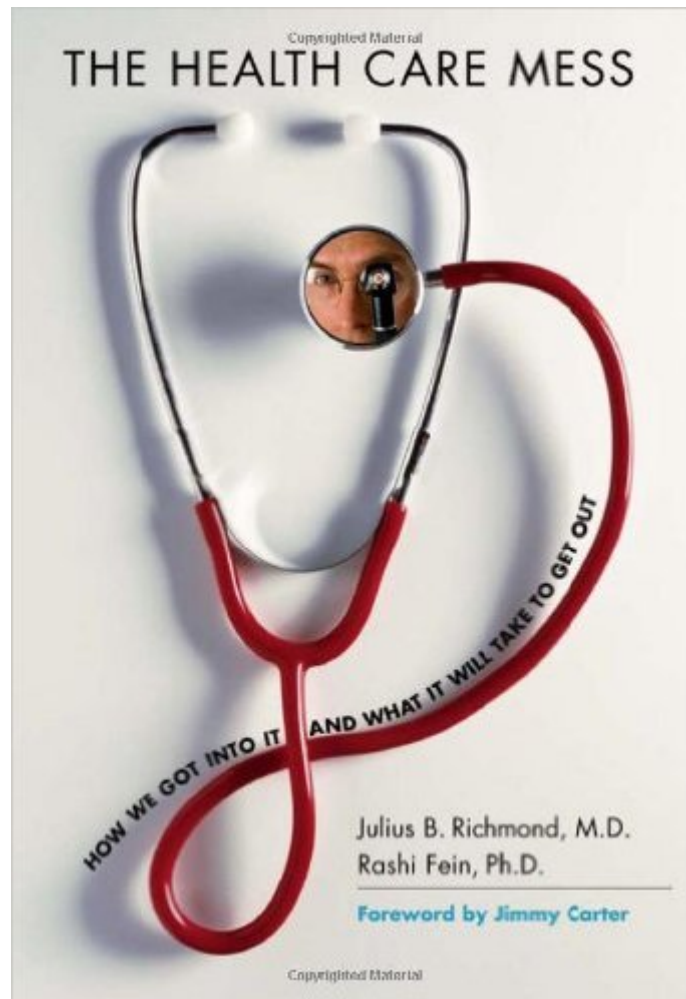


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The Health Care Mess: How We Got Into It And What It Will Take To Get Out



Synopsis

If we can decode the human genome and fashion working machines out of atoms, why can't we navigate the quagmire that is our health care system? In this important new book, Julius Richmond and Rashi Fein recount the fraught history of health care in America since the 1960s. After the advent of Medicare and Medicaid and with the progressive goal to make advances in medical care available to all, medical costs began their upward spiral. Cost control measures failed and led to the HMO revolution, turning patients into consumers and doctors into providers. The swelling ranks of Americans without any insurance at all dragged the United States to the bottom of the list of industrialized nations. Over the last century medical education was also profoundly transformed into today's powerful triumvirate of academic medical centers, schools of medicine and public health, and research programs, all of which have shaped medical practice and medical care. The authors show how the promises of medical advances have not been matched either by financing or by delivery of care. As a new crisis looms, and the existing patchwork of insurance is poised to unravel, American leaders must again take up the question of health care. This book brings the voice of reason and the promise of compromise to that debate.

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Customer Reviews

As a student of health care economics (due to being employed in a managerial position in a health care enterprise,) I embarked on reading this book with great anticipation and was left with great disappointment. My disappointment stemmed from faults in both style and substance. As to style, the

writing is replete with complex sentences with subordinate clause following on subordinate clause until one can no longer remember what the subject or the verb is, much less make any sense of the meaning of the sentence. I read extensively in professional journals as part of my employment and feel that the stylistic mannerisms of this book significantly diminished its impact. There were a number of simpler grammatical errors that should have been caught by the editors at Harvard Press. I was dismayed that two so presumably eminent scholars should write in such a confusing and obfuscating way. As to matters of substance, I was surprised that some of the more significant influences on the current state of the US's health care "system" were either ignored or brushed aside as being unimportant. The three that immediately come to mind are the complete neglect in discussing the impact that the cost of pharmaceuticals has had on the overall cost of health care, the impact that malpractice litigation and the threat of malpractice suits have had, and the incredible cost of the administrative labyrinths that exist for most providers. Also glossed over is the exorbitant amount of money being taken out of the health care system in the form of profits for shareholders of for-profit healthcare entities (not just big pharma) and salaries and bonuses for the high-flying executives of these for-profits.

In reading the previous reviews, I must say that they are quite accurate in many of their findings - the style of writing tends to be verbose and there isn't much in the ways of "how to do fix the US health care system." But that is not what this manuscript is about. Let me quickly rebut a few points from each of the previous reviews. From Mr. Weston: "When I bought the book, I was hoping the authors' would answer the question "What is equitable health care?" Is it equitable for the government to pay for medications that control blood pressure, insulin response, and bone density when all of these could be managed by diet and exercise? Americans have a problem giving welfare to those who can work. Why give "healthfare" to those who can diet and exercise? "First of all, equity is in the eye of the beholder. This is an area where even the most brilliant health economist cannot give a true answer. Our basis for equity depends upon our own moral upbringing. Secondly, it is obvious from the latter half of his comment that he does not have anything to do with the health care delivery system. Lifestyle modifications for hypertension, diabetes, and osteopenia/osteoporosis, while certainly beneficial, are not effective to the degree needed to prevent stroke, heart attack, or hip fractures. However, I will concede that doctors often over-utilize healthcare resources of limited benefit. Moving on to Ms.

This book does a good job at pointing out how broken the American health care system is. I really

enjoyed the retrospective look at how we got where we are today. Some of the reasons for the problems are pointed out well, as in the discussion of community rating of insurance. Unfortunately, the book misses some of the most important reasons for the health care mess. The solutions proposed also strike me as at best unworkable. The book's authors are big fans of national health insurance. As they point out, national health insurance does have some things going for it. However, I just don't see how national health, if implemented in today's health care climate, would bring about any savings at all. The Medicare program is the closest thing we have now to national health insurance; far from saving us money, from what I see its costs are completely out of control and headed through the roof. The book never discusses this. The book makes no mention at all of how to deal with bringing down costs at the high end; the 5% or so of patients who create probably 80% or more of all health care costs. The fact is that at some point you have to be willing to say no, we are going to send this patient to a hospice to die instead of treating him, because his treatment is just too expensive. I see the American health care system as caught in a trap of diminishing returns. In terms of quality of life, we get by far the most benefit from the first few dollars spent on a patient. By the time you get up to spending millions of dollars on a single patient, you are getting next to nothing for your money. Keep in mind that money has to come from somewhere; taxes, or premiums, or cuts in quality of service.

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