

Discussion: Healthcare System Comparative Analysis

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Comparison of current U.S. healthcare outcomes to the years prior to the enactment of the Affordable Care Act

The Affordable Care Act of 2010 in the United States was enacted to provide quality healthcare to all Americans, including the poorest. The Act focused on ensuring that the people who could not afford health insurance cover would acquire one through a subsidized system. Since 2010, affordable care has generally improved the healthcare system in the United States. Access to healthcare services has increased since the adoption of the ACA law. Before 2010, the number of uninsured Americans was high due to unaffordability. Zhao et al. (2020) report that 15.4 percent of the American population was uninsured in 2009, but in 2018, the uninsured Americans covered 8.5 percent. This shows that more people were able to access healthcare services. Zhao also points out the quality of care improved with the death rate on chronic diseases such as Cancer decreasing by 7.6 percent from 2010 to 2019. The availability of drugs has also helped in dealing with numerous diseases that contributed to a higher mortality rate in the previous years. The cost of healthcare services has remained constant even after the enactment of the Affordable Care Act. According to Papanicolas et al. (2019), even though the Act has reduced the primary care costs, other costs such as out-of-pocket costs require the patient to cover for the services that ACA does not cover.

Comparison on Measures of Population Health in the U.S. to Comparable Developed Nations

The quality of healthy life in the United States is lower than that of the other high economies. According to Papanicolas et al. (2019), the life expectancy in the United States is 78.8 years, below the average of the top 11 economies, 81.7 years. Japan has the highest life

expectancy of 84.2 years (Kamal, 2019). The United States also the highest percentage of the population affected by chronic diseases. Papanicolas et al. (2019) report that in 2016, the percentage of overweight Americans was 70.1 percent, which is above the range of the other developed countries (23.8-63.4 percent). The infant mortality rate is one of the key indicators of health quality, with the United States having the highest infant mortality of 5.8 deaths in every 1000 births (Papanicolas et al., 2019). This is above the 3.6 average of the top 11 countries.

Comparison on Economics of Health in the U.S. to Comparable Developed Nations

The United States is one of the world's top economies and spends a bigger percentage of the gross domestic product on the health sector. According to Kamal & Cox (2020), the United States spent 17.7 percent of its national GDP on healthcare, almost double of the other high economic countries. In the same year, Australia used 9.6 percent while Switzerland used 12.4 percent of the GDP, with the other European countries spending less than 10 percent of the national GDP (Papanicolas et al. 2020). The per capita expenditure on health services in the United States also exceeds that of developed economies. According to Kamal et al. (2020), the United States spent \$10,996 per citizen in 2019 on health services. This is high compared to Switzerland (\$7,732), Germany (\$6,636), and the United Kingdom being the lowest with a per capita expenditure of \$4,653. This shows that the United States highly invests in the health sector compared to any other country in the world.

Implications of Providing Basic Healthcare Services to the Legal Immigrants

One of the key challenges to the United States is the influx of undocumented immigrants.

According to Lopez-Gandara (2017), the United States receives about 1 million immigrants from

all over the world. Among the immigrants, 41.3 percent are undocumented immigrants, an indication that most of the resources, including healthcare resources, are stretched (Popovich et al., 2002). Lopez-Gandara (2017) argues that providing basic healthcare services to the immigrants improves Americans' general health, raising the quality of health across the population. Additionally, providing basic healthcare to illegal immigrants prevents the health care from becoming an extra cost in responding to emergency and chronic conditions, a service that every person in the United States is entitled. Regarding the support for healthcare services to the illegal immigrants, Frank et al. (2018) argue that the American quality of health will decline due to high expenditures and resource constraints. Frank et al. (2018) predict that the country's quality of health will have decreased by more than 3 percent by 2021, with the healthcare resources and facilities getting stretched every year.

Health Disparities and Inequalities in the United States Healthcare system

The American health sector is riddled with disparities and inequalities depending on race and ethnicities of residents. Cornsick & Maxwell (2019) point out some of these disparities in the United States population's healthcare system. According to Cornsick & Maxwell (2019), African Americans have the lowest health coverage, with 19.6 percent not covered, compared to only 1.9

percent of the non-Hispanic whites. Compared to the non-Hispanic whites with an 8.3 percent, 23.5% of the African Americans have poor health conditions, smoking habits or poor health services. This indicates that people of color, especially African Americans, are highly affected by chronic health conditions, largely due to a lack of health education, access, and services. This is different from other countries such as the UK, Germany, and Japan who have an average negligible disparity of 2% due to homogeneity of the population. The main causes of disparity and inequality in the United States' healthcare system are racism, education, and income inequality. Most African Americans are middle or low income, compared to the others who have privileges in employment and other economic determinants. Lack of income leads to inaccessibility to quality health services. About 25 percent of the uneducated Americans are African Americans, which indicates low skills and low knowledge on health issues (Chantala & Maxwell, 2009). This has led to poor health practices.

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