

Access to Health Care: *A Basic Human Right or Privilege?*



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Health Care Financing Models

- ❑ **Public (national health service):**
Financed through government budget (single-payer national system).
- ❑ **Private:**
Financed through private insurance programs.
- ❑ **Mixture Public / Private:**
Financed partially through government budget + private insurance programs (two-tier medicine).

Health Care characteristics

The most important characteristics
of a health care system are:

Quality - Cost - Access

Health Care in North America 2010

Health care systems
in the United States and Canada
are in serious trouble,
albeit for different reasons.

Health Care in the U.S. and Canada

The most important characteristics of a health care system are:

Quality -

Quality of health care is high in both countries.

Health Care in the U.S. and Canada

The most important characteristics of a health care system are:

Quality - Cost -

Cost of health care is high in both countries:

16 % of GNP in the U.S.

(\$7300 per capita)

10 % of GNP in Canada

(\$3900 per capita)

Health Care in the U.S. and Canada

The most important characteristics of a health care system are:

Quality - Cost - Access

Access to health care is problematic in both countries:

- ❑ In the U.S. 50 million people are without health insurance.
- ❑ In Canada access to high technology equipment and to elective surgery is problematic.

Health Care in North America 2010

United States and Canada

- **Quality:** High in both countries
- **Cost:** Perceived high in both countries
- **Access:** Problematic in both countries
- **Financing:** Different in the two countries

Health Care in the U.S. and Canada 2010

Main issue in the United States:

How to use government intervention
to make the existing health care system
universally accessible and more cost-effective.

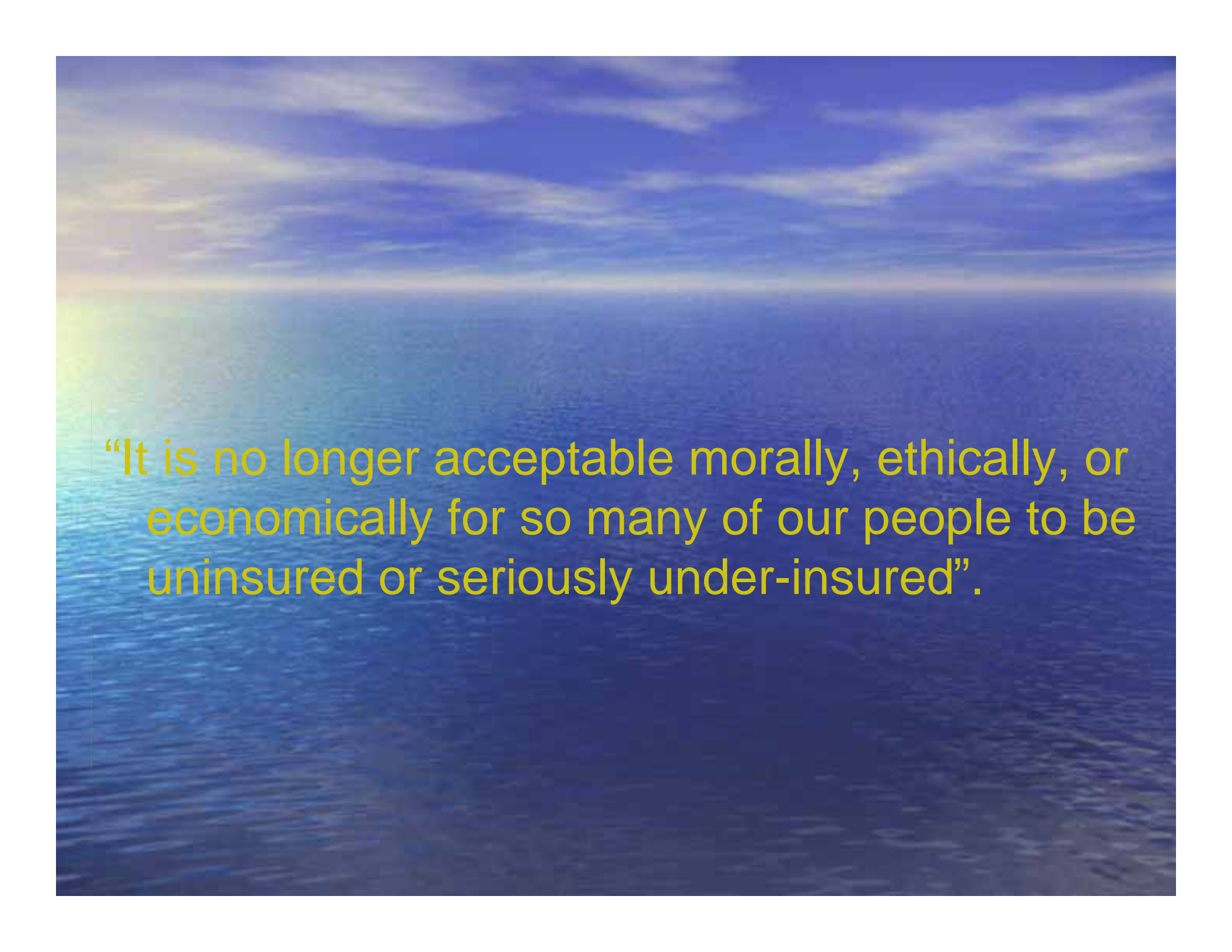
Health Care in the U.S. and Canada 2010

Main issue in Canada:

How to ensure

universal and timely access

to the existing, ever more costly, public health care system.



“It is no longer acceptable morally, ethically, or economically for so many of our people to be uninsured or seriously under-insured”.

“It is no longer acceptable morally, ethically, or economically for so many of our people to be uninsured or seriously under-insured”.

Editor-in-Chief: JAMA **1991**

20 years later the situation in the U.S. is even worse.

United States and Canada

- ❑ Similar economic and social systems.
- ❑ Similar political institutions.
- ❑ Each other's best trading partner.
- ❑ Canada largest supplier of oil to the U.S.
- ❑ Share the world's longest undefended border.

United States and Canada

Differences between the two countries:

World view

- Americans see themselves as part of the United States.
- Canadians see themselves as part of the world.

Foreign policy

- Americans see themselves as peace makers.
- Canadians see themselves as peace keepers.

Gun control

Organization and financing of health care.

Health Care Cost (2010)

	% GNP	% Public	Cost per capita
Canada	10	70	3900
U.S.	16	45	7300

North America



☐ Canada



- Pop.: **34 million**
- Area: **9.99** (9.10) million km²
- **Federal parliamentary monarchy**
- Federation of 10 provinces and 3 territories

☐ USA



- Pop.: **318 million**
- Area: **9.63** (9.16) million km²
- **Federal presidential republic**
- Federation of 50 states

North America



Tenets of the constitution

☐ Canada



- Peace
- Order
- Good government

☐ USA



- Life
- Liberty
- Pursuit of happiness



Wolfe Lake, Ontario (Photo by Michael Kooiman)

Comparison Groups

- ❑ **United Nations (UN):** 192 member states
- ❑ **Human Development Index (HDI):** ranking of 177 countries
- ❑ **Organization for Economic Cooperation and Development (OECD):**
(34 countries: Premium statistical agency on a wide range of subjects)
Australia - Austria - Belgium - **Canada** - Chile - Czech Republic - Denmark - Estonia - Finland - France - Germany - Greece - Hungary - Iceland - Ireland - Israel - Italy - Japan - Korea - Luxembourg - Mexico - Netherlands - New Zealand - Norway - Poland - Portugal - Slovakia - Slovenia - Spain - Sweden - Switzerland - Turkey - United Kingdom - **United States**
- ❑ **Group of 20:** Finance ministers and Central Bank governors of 19 countries and the E.U. : 85 % of global GNP; 80 % of world trade; 67 % of world population
- ❑ **Group of 8 countries (G8):** representing 65 % of world economy
Canada - France - Germany - Italy - Japan - Russia - UK - **United States**
- ❑ **“Group of 1”**

Human Development Index (HDI)



- Serves as an alternative measure of social development, supplementing GNP
- Accounts for three distinct parameters:
 - Longevity and health care
 - Adult literacy rate and education
 - GNP per capita (real and PPP adjusted)

PPP = *Purchasing Power Parity*

UNDP = *United Nations Development Programme*

Human Development Index (HDI)



- **Indicators**

- Life expectancy at birth (health care)
- Education:
 - Literacy of adults (2/3 weight)
 - Attendance at 3 levels of schooling (1/3 weight)
- Standard of living (Income)

- **Goals**

- Life expectancy: **85 years**
- Education **accessible** for all
- **Reasonable** income for all

HDI: Ranking of countries

	1990	1997	1999	2001	2003	2006	2008	2009
Canada	1							
USA	2							







HDI: Ranking of countries

	1990	1997	1999	2001	2003	2006	2008	2009
Canada	1	1	1	3	8	6	3	4
USA	2	4	3	6	7	8	15	13

Top ranking: **Canada 8x (last time in 2000)**
Norway 7x; Japan 3x; Iceland 2x

Human Development Index (HDI)

2009 ranking of 179 countries

1.  Norway 0.971	14.  Austria 0.955	32. United Arab Emirates
2.  Australia 0.970	15.  Spain 0.955
3.  Iceland 0.969	16.  Denmark 0.955	47. Kuwait
4.  Canada 0.966	17.  Belgium 0.953
5.  Ireland 0.965	18.  Italy 0.951	53. Libya
6.  Netherlands 0.964	19.  Liechtenstein 0.951
7.  Sweden 0.963	20.  New Zealand 0.950	70. Iran
8.  France 0.961	21.  United Kingdom 0.947
9.  Switzerland 0.960	22.  Germany 0.947	81. Tunisia
10.  Japan 0.960	23.  Singapore 0.944
11.  Luxembourg 0.960	24.  Hong Kong 0.944	82. Jordan
12.  Finland 0.959	25.  Greece 0.942
13.  United States 0.956	26.  South Korea 0.937	84. Algeria
	
		101. Egypt
	
		114. Morocco

Very high HD: 1 to 42

High HD: 43 to 85

Medium HD: 86 to 127

Low HD: 128 to 179

Health Care in Canada (2010)

Main principles:

- Public administration.
- “Universal access”
to hospital care and physicians’ services
without any cost-sharing requirements.

Health Care in Canada (2010)

- ❑ is financed publicly (70 %) and privately (30 %)
- ❑ has three primary players:
 - Provincial governments
 - Federal government (Canada Health Act)
 - Private physicians
- ❑ has a single payer: **Provincial government**
 - The single payer public component is shared between provinces (75 %) and the federal government (25 %).
 - Services insured publicly (hospital stay, physician services) **cannot** be insured privately.

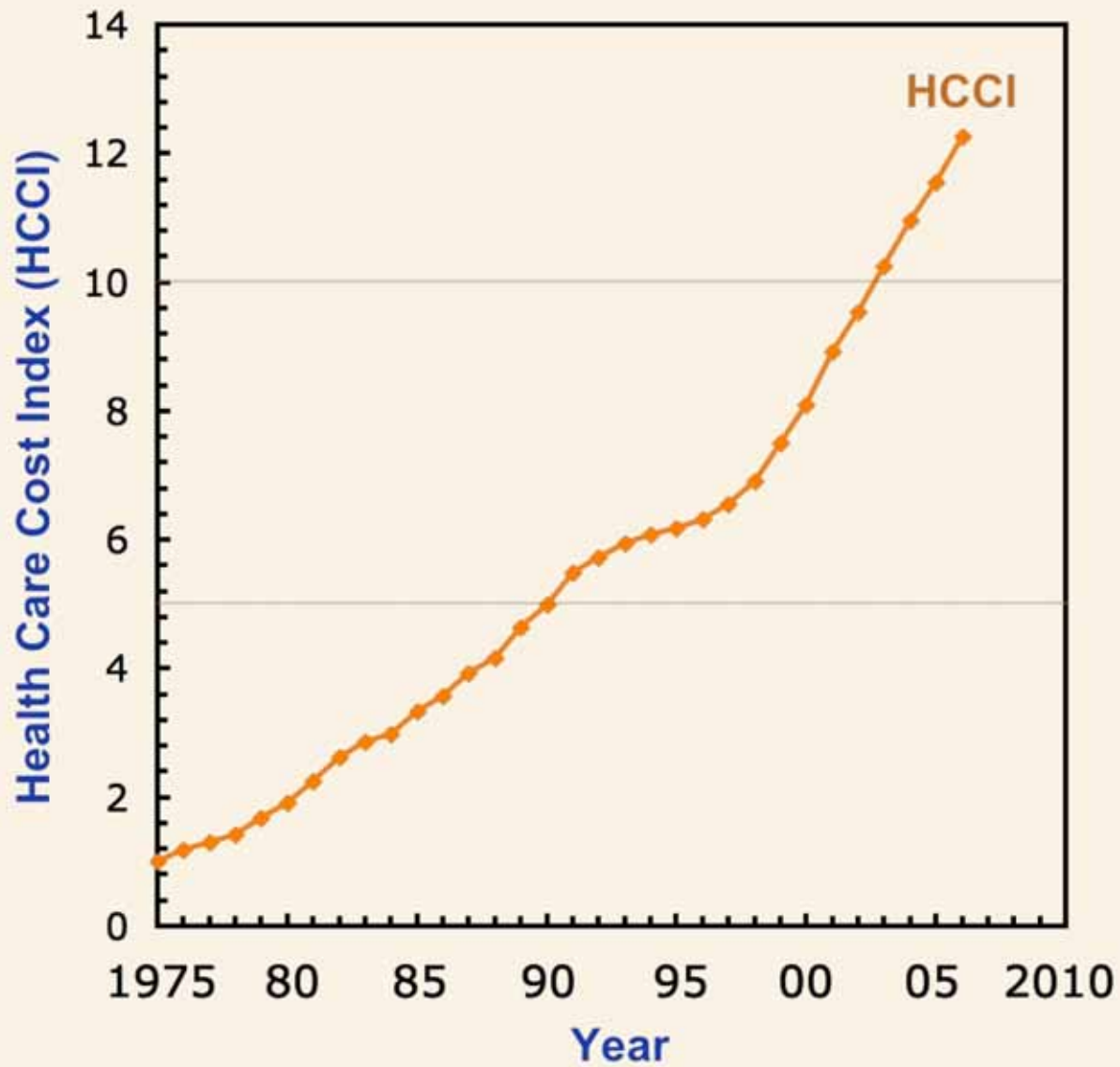
Health Care in Canada 2010

Assertions and myths
about the Canadian
publicly run, single payer
health care system.

Health Care in Canada 2010: **Assertion 1**

Expenditures for health care in Canada are rising at an unsustainable rate.

- Expenditures **tripled** in the decade from 1975 to 1985.
- Expenditures **more than doubled** from 1985 to 2000.
- **Expenditures increased 10-fold** from 1975 to 2005.



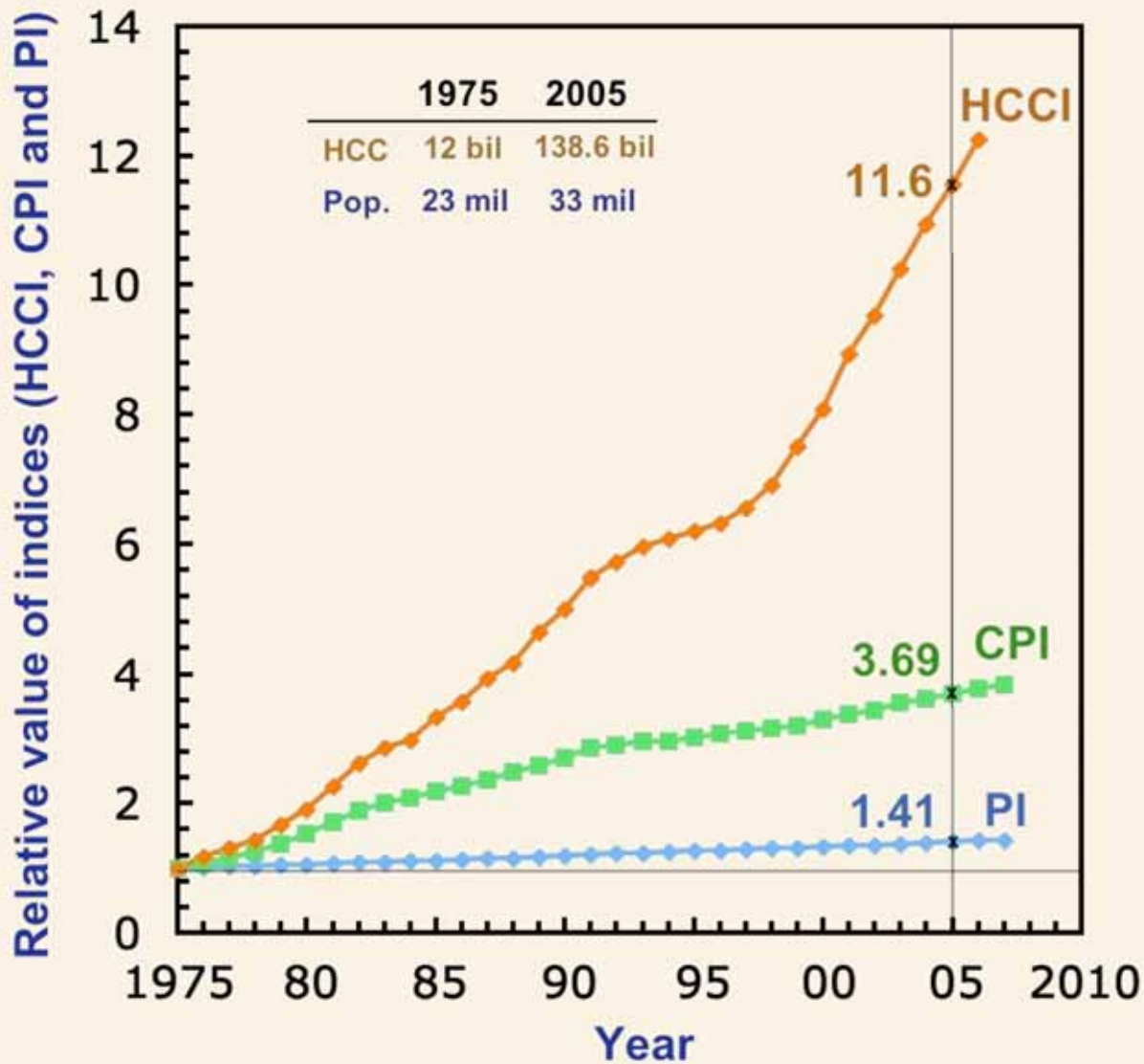
HCCI

Health Care Cost Index

75 - 85 tripled

85 - 00 doubled

75 - 05 increased 10 fold



HCCI

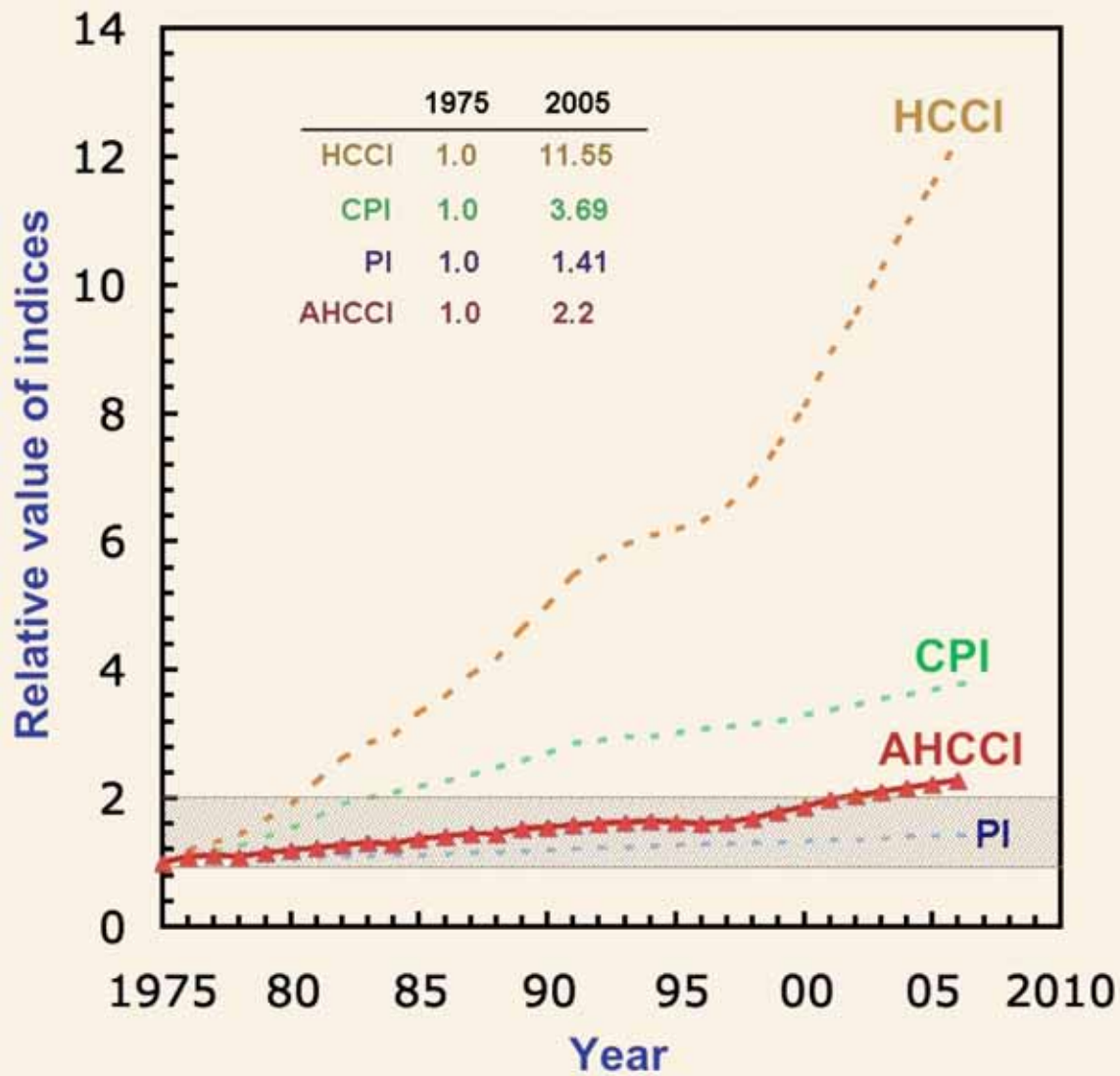
Health Care Cost Index

CPI

Consumer Price Index

PI

Population Index



HCCI

Health Care Cost Index

CPI

Consumer Price Index

AHCCI

Adjusted
Health Care Cost Index

PI

Population Index

Assertion 1: Facts

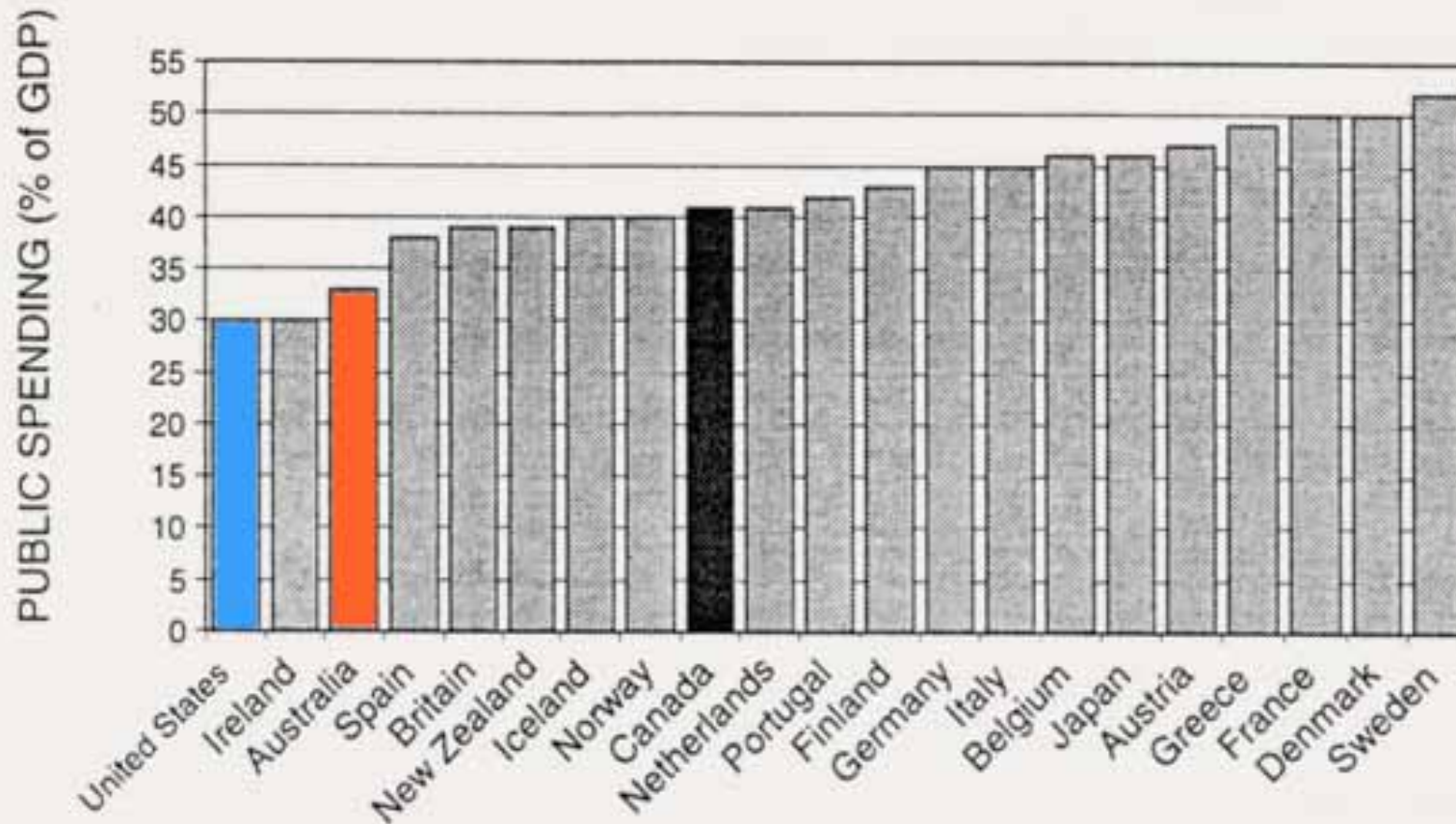
- Most of the increase in health care cost can be explained by **inflation** and **population growth**.
- Per capita expenditures for health care in constant dollars **increased by about a factor of 2** in the past 35 years.

Health Care in Canada 2010: **Assertion 2**

Public administration is the major cause for the increased health care spending.

- Governments will be unable to raise the required revenues in the near future.
- Taxes in Canada are already too high and are adversely affecting the economy.

Assertion 2: Facts



Canada has tax rates similar to those in other developed countries, except for the U.S.

Assertion 2: Facts

Since 1975, Canada's expenditures for health care as a percentage of the GNP have been reasonably stable in comparison with other sectors of the economy, such as

- Transportation
- Communications
- Recreation
- Entertainment
- Financial services

that have all undergone a major growth.

Assertion 2: Facts

If government programs are bad what about:

- Fire and Police Protection
- Road works
- Sewers
- Educational services
- Post office...

These are all government programs with significant success and public support.

Health Care in Canada 2010: **Assertion 3**

Private sector is always more efficient than the public sector as a result of:

- Better management
- Market forces controlling costs
- Higher labor productivity

Assertion 3: Facts

- Canada spends about **12 %** of its total health care costs for administration.
- U.S. spends:
 - About **25 %** of its health care costs on administration of its private medicine.
 - About **5 %** on administration of its public system (Medicare and Medicaid).

Health Care in Canada 2010: **Assertion 4**

Health care in the U.S. is superior to that in Canada.

FACTS

Standards of care: Similar in both countries.

Health indicators: Canada outperforms the U.S.

Cost: Canada outperforms the U.S.

Access: Problems in both countries.

Health Care Indicators

- Accessibility
- Per capita spending on health care
- Percentage of GNP spent for health care
- Life expectancy
- Infant mortality rate
- Maternal mortality rate
- Waiting lists for diagnostic and therapeutic procedures
- Access to high technology equipment

Infant Mortality Ranking

1 Singapore

Infant Mortality Ranking

- 1 Singapore
- 2 Sweden
- 3 Hong Kong
- 4 Japan
- 5 Iceland
- 6 Finland
- 7 Norway
- 8 Malta
- 9 Czech Republic
- 10 Andorra

Infant Mortality Ranking

- | | |
|------------------|----------------|
| 1 Singapore | 11 Germany |
| 2 Sweden | 12 France |
| 3 Hong Kong | 13 Switzerland |
| 4 Japan | 14 Macau |
| 5 Iceland | 15 Spain |
| 6 Finland | 16 Slovenia |
| 7 Norway | 17 Denmark |
| 8 Malta | 18 Austria |
| 9 Czech Republic | 19 Belgium |
| 10 Andorra | 20 Australia |

Infant Mortality Ranking

- | | |
|------------------|-------------------|
| 1 Singapore | 21 Liechtenstein |
| 2 Sweden | 22 Guernsey |
| 3 Hong Kong | 23 Canada |
| 4 Japan | 24 Luxembourg |
| 5 Iceland | 25 Netherlands |
| 6 Finland | 26 Portugal |
| 7 Norway | 27 Gibraltar |
| 8 Malta | 28 United Kingdom |
| 9 Czech Republic | 29 Jersey |
| 10 Andorra | 30 Ireland |
| 11 Germany | 31 Monaco |
| 12 France | 32 Greece |
| 13 Switzerland | 33 San Marino |
| 14 Macau | 34 New Zealand |
| 15 Spain | 35 Aruba |
| 16 Slovenia | 36 Isle of Man |
| 17 Denmark | 37 Italy |
| 18 Austria | 38 Faeroe Island |
| 19 Belgium | 39 Cuba |
| 20 Australia | 40 Taiwan |

Infant Mortality Ranking

1	Singapore	21	Liechtenstein	41	United States
2	Sweden	22	Guernsey	42	Croatia
3	Hong Kong	23	Canada	43	Lithuania
4	Japan	24	Luxembourg	44
5	Iceland	25	Netherlands		
6	Finland	26	Portugal		
7	Norway	27	Gibraltar		
8	Malta	28	United Kingdom		
9	Czech Republic	29	Jersey		
10	Andorra	30	Ireland		
11	Germany	31	Monaco		
12	France	32	Greece		
13	Switzerland	33	San Marino		
14	Macau	34	New Zealand		
15	Spain	35	Aruba		
16	Slovenia	36	Isle of Man		
17	Denmark	37	Italy		
18	Austria	38	Faeroe Island		
19	Belgium	39	Cuba		
20	Australia	40	Taiwan		

Assertion 4: Facts

HDI indicators	U.S.	Canada	KSA	OECD
Life expectancy (years)	79.6	81.0	73.3	79.5
Infant mortality (per 1000 live births)	8	6	21	6.0
Maternal mortality (per 100 000 live births)	24	12	24	---
Median age (years)	36.8	40.7	25.0	---

WHO ranking of health care systems

WHO ranking was last produced in **2000** ranking health care systems of 190 countries.
The ranking is no longer produced because of complexity of the task.

1.	France	36.	Costa Rica
2.	Italy	37.	USA
---		38.	Slovenia
10.	Japan	39.	Cuba
---		---	
25.	Germany	41.	New Zealand
26.	Saudi Arabia	42.	Bahrain
27.	United Arab Emirates	---	

29.	Morocco		
30.	Canada		
31.	Finland		

Health Care in Canada 2010: **Assertion 5**

Privatization is the only solution for the current impasse in the Canadian Health Care debate.

Current buzzword in health care bureaucracy is PPP or P3 standing for **Public-Private Partnership**.

Public vs Private Component

Proportions of total health expenditures

	Public (%)	Private (%)
Canada	70	30
United States	45	55
KSA	75	25
OECD average	72	28

SOURCE: OECD

Assertion 5: Facts

Over the past 25 years the greatest increases in health care spending have occurred in areas covered by the private sector:

- Dental services
- Visual services
- Prescription drugs

Public-Private Partnerships (P3s)

- ❑ **Promise** to deal with design, construction, financing, maintenance, and capital renewal.
- ❑ **Have been used successfully** to build highways, bridges, prisons, public buildings, water treatment facilities, etc.
- ❑ **Have had questionable success in building hospitals.**
- ❑ **Partnership ?** - The public pays, the private sector profits.
- ❑ Should be called P4: Public-Private Partnership for Profit.

Health Care in Canada 2010: **Assertion 6**

Canada devotes too much of its GNP and an ever-increasing portion of its GNP to health care.

If this trend is left unchanged, economic ruin will result.

Health Care Cost (2010)

	% GNP	% Public	Cost per capita
Canada	10	70	3900
U.S.	16	45	7300
KSA	~ 5	75	500
OECD	8.9	73	3000

France: 11 %
Switzerland: 10.8 %
Germany: 10.4 %

Luxembourg: 90%
U.K.: 86%
Sweden: 85%
Iceland: 84%
Norway: 84%
Ireland: 80%

Norway: 4800
Switzerland: 4400
Austria: 3800
France: 3600
Holland: 3500

HEALTH CARE COST as percentage of GNP



Health Care Service (2007)

	Physicians per 1000	Nurses per 1000	MRI per million pop.	CT per million pop.
Canada	2.1	9.0	6.7	12.7
U.S.	2.4	8.2	26.6	32.2
OECD	3.0	8.6	9.8	20.6

Greece: 4.9
Italy: 4.2
Belgium: 4.0
Holland: 3.6
Austria: 3.5
Norway: 3.5

Korea: 1.6
Mexico: 1.6
Turkey: 1.4

Japan: 35.3
Iceland: 17.1
Austria: 15
Switzerland: 14.3
Finland: 14
Korea: 11

Health Care Service (2007)

	Physicians per 1000	Nurses per 1000	MRI per million pop.	CT per million pop.
Canada	2.2	9.0	6.7	12.7
OECD	3.1	9.6	11	20.2

To attain OECD average Canada needs:

- +30 000 physicians (current number: 70 000)
- +162 MRI machines (current number: 162)
- +323 CT scanners (current number: 356)

Health Care Service (2007)

	Physicians per 1000	Nurses per 1000	MRI per million pop.	CT per million pop.
U.S.	2.4	10.6	26.6	32.2
OECD	3.1	9.6	11.0	20.2

To attain OECD average the U.S. needs:

- +180 000 physicians (current number: 720 000)
- 4800 MRI machines (current number: 7800)
- 3300 CT scanners (current number: 9600)

Medical Schools in the U.S. and Canada

Accredited by: **Liaison Committee on Medical Education (LCME)**

- United States : 125
- Canada : 17

Medical Graduates per 1000 practicing Physicians

Canada	25.8
U.S.	26.5

Canada / KSA Cooperation

- ❑ ~ 3500 Saudi medical doctors have completed post-graduate studies in Canada.
- ❑ ~ 800 Saudi medical doctors are currently studying in Canada.
- ❑ ~1000 Canadian medical doctors are currently working in KSA health care institutions.
- ❑ Student visa requirements for study in Canada have been simplified.

Health Care in the U.S.: Conclusions

- U.S. health care costs at 16 % of GNP are very high, yet 50 million residents have no insurance.
- 1 in 3 Americans is un-insured or under-insured.
- HMOs deny care to patients with “expensive” and pre-existing illnesses.
- U.S. health indicators are generally lower than those in other developed countries.
- Doctor - patient relationship is deteriorating.
- Malpractice insurance is significant problem.

Health Care in Canada: Conclusions

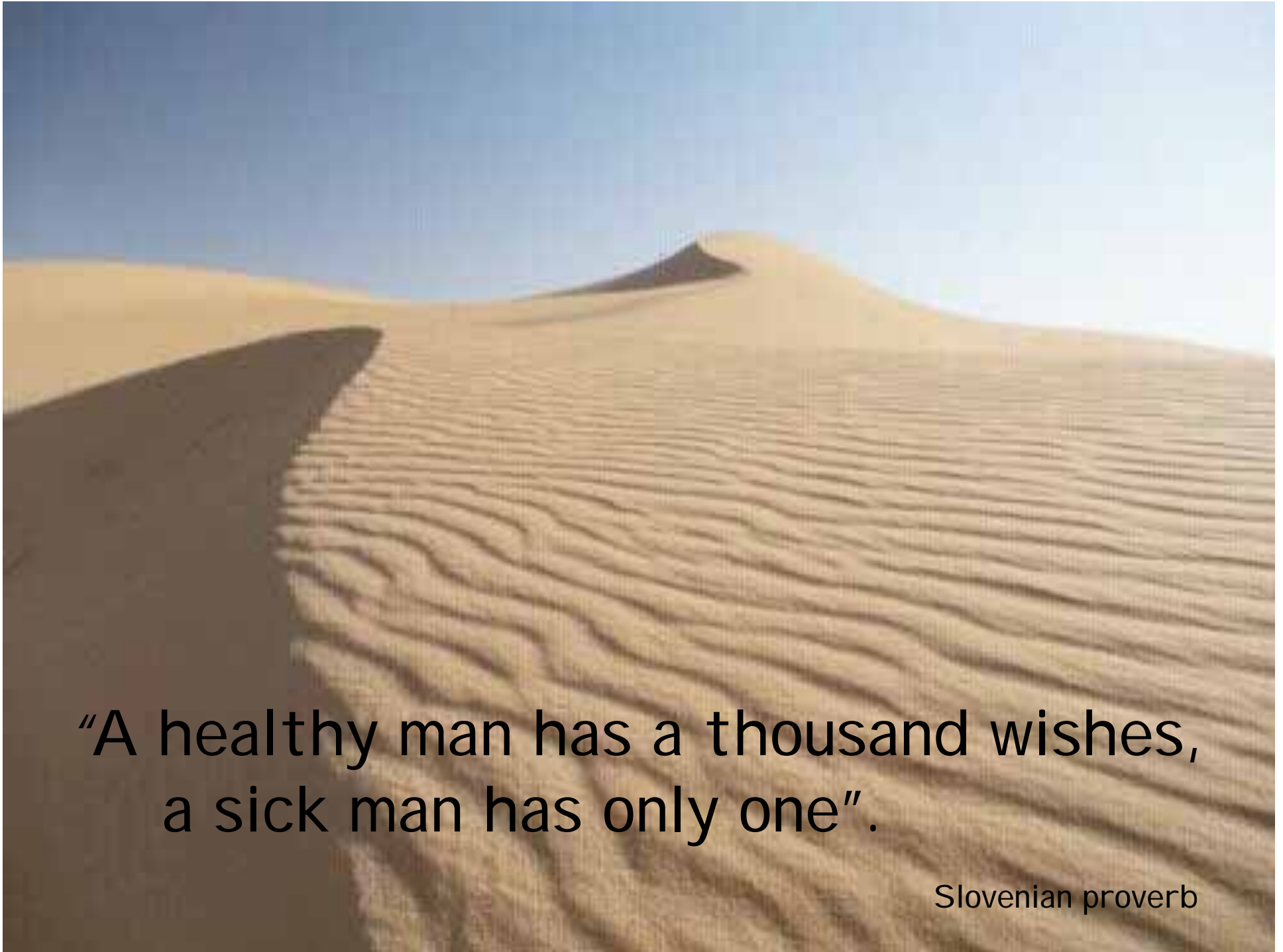
- ❑ Canada, at 10 % of GNP, devotes a lower portion of its GNP to health care than do several other OECD countries.
- ❑ There is nothing magic about the 10 % of GNP, Canada could afford to spend 11 % or 12 % of GNP to solve the problems with access to health services caused by:
 - Shortages in health care personnel.
 - Shortages in high technology equipment.
- ❑ For all health care indicators:
 - Attaining the OECD average should be the norm.
 - Exceeding the OECD average should be the goal.

Health Care : Conclusions

Health care should not be treated like an ordinary market commodity.

Access to health care is **not a privilege**; rather, it is **a basic human right**.

Public administration is the best vehicle for ensuring equal and timely access to health care.



“A healthy man has a thousand wishes,
a sick man has only one”.

Slovenian proverb

