

Hidden Costs Value Lost Uninsurance In America Insuring Health

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The Oxford Handbook of the Social Science of Poverty David Brady 2016-03-23 Despite remarkable economic advances in many societies during the latter half of the twentieth century, poverty remains a global issue of enduring concern. Poverty is present in some form in every society in the world, and has serious implications for everything from health and well-being to identity and behavior. Nevertheless, the study of poverty has remained disconnected across disciplines. The Oxford Handbook of the Social Science of Poverty builds a common scholarly ground in the study of poverty by bringing together an international, inter-disciplinary group of scholars to provide their perspectives on the issue. Contributors engage in discussions about the leading theories and conceptual debates regarding poverty, the most salient topics in poverty research, and the far-reaching consequences of poverty on the individual and societal level. The volume incorporates many methodological perspectives, including survey research, ethnography, and mixed methods approaches, while the chapters extend beyond the United States to provide a truly global portrait of poverty. A thorough examination of contemporary poverty, this Handbook is a valuable tool for non-profit practitioners, policy makers, social workers, and students and scholars in the fields of public policy, sociology, political science, international development, anthropology, and economics.

Health Law Barry R. Furrow 2004 The standard text in the field, Health Law: Cases, Materials and Problems provides an overview of health law as it affects professionals, institutions, and entities that deliver and finance U.S. health care. The expert authors' comprehensive treatment focuses on concerns such as the oversight of quality, control costs, adequate access to services, patient protection, tax issues, the Employee Retirement Income Security Act (ERISA), and malpractice litigation. Written without a policy bias to fairly reflect all viewpoints, the soft-cover one-volume book considers the legal and ethical issues involving death, human reproduction, medical treatment decision making, and medical research. It also explores the government's efforts to control costs and expand access through Medicare and Medicaid and examines government attempts to police anticompetitive activities, fraud, and abuse. Using carefully edited primary materials and effective classroom-tested problems, the book exposes students to the core issues in health law.

Organ Donation Institute of Medicine 2006-09-24 Rates of organ donation lag far behind the increasing need. At the start of 2006, more than 90,000 people were waiting to receive a solid organ (kidney, liver, lung, pancreas, heart, or intestine). Organ Donation examines a wide range of proposals to increase organ donation, including policies that presume consent for donation as well as the use of financial incentives such as direct payments, coverage of funeral expenses, and charitable contributions. This book urges federal agencies, nonprofit groups, and others to boost opportunities for people to record their decisions to donate, strengthen efforts to educate the public about the benefits of organ donation, and continue to improve donation systems. Organ Donation also supports initiatives to increase donations from people whose deaths are the result of irreversible cardiac failure. This book emphasizes that all members of society have a stake in an adequate supply of organs for patients in need, because each individual is a potential recipient as well as a potential donor.

Die Architektur der Märkte Neil Fligstein 2010-10-14 Die Architektur der Märkte fasst grundlegende Schriften Neil Fligsteins aus verschiedenen Arbeitsphasen zusammen, in denen er eine wirtschaftssoziologische Sicht auf kapitalistische Gesellschaften entwickelt hat. Fligstein hat mit der These von der sozialen Konstruktion oder Architektur von Märkten auf die Bedeutung des Staates und der modernen Unternehmen aufmerksam gemacht und die institutionelle Rahmung des Wirtschaftslebens in den Mittelpunkt gerückt. Der Band hat nach seinem Erscheinen für große Aufmerksamkeit gesorgt und gilt zu Recht als eine der wegweisenden Aufsatzsammlungen der neueren Wirtschaftssoziologie.

Operations Management in Healthcare, Second Edition Corinne M. Karuppan, PhD, CPIM 2021-12-07 This thoroughly revised and updated second edition of Operations Management in Healthcare: Strategy and Practice describes how healthcare organizations can cultivate a competitive lead by developing superior operations using a strategic perspective. In clearly demonstrating the "how-tos" of effectively managing a healthcare organization, this new edition also addresses the "why" of providing quality and value-based care. Comprehensive and practice-oriented, chapters illustrate how to excel in the four competitive priorities - quality, cost, delivery, and flexibility - in order to build a cumulative model of healthcare operations in which all concepts and tools fit together. This textbook encourages a hands-on approach and integrates mind maps to connect concepts, icons for quick reference, dashboards for measurement and tracking of progress, and newly updated end-of-chapter problems and assignments to reinforce creative and critical thinking. Written with the diverse learning needs in mind for programs in health administration, public health, business administration, public administration, and nursing, the textbook equips students with essential high-level problem-solving and process improvement skills. The book reveals concepts and tools through a series of short vignettes of a fictitious healthcare organization as it embarks on its journey to becoming a highly reliable organization. This second edition also includes a strong emphasis on the patient's perspective as well as expanded and added coverage of Lean Six Sigma, value-based payment models, vertical integration, mergers and acquisitions, artificial intelligence, population health, and more to reflect evolving innovations in the healthcare environment across the United States. Complete with a full and updated suite of Instructor Resources, including Instructor's Manual, PowerPoints, and test bank in addition to data sets, tutorial videos, and Excel templates for students. Key Features: Demonstrates the "how-tos" of effectively managing a healthcare organization Sharpens problem-solving and process improvement skills through use of an extensive toolkit developed throughout the text Prepares students for Lean Six Sigma certification with expanded coverage of concepts, tools, and analytics Highlights new trends in healthcare management with coverage of value-based payments, mergers and acquisitions, population health, telehealth, and more Intertwines concepts with vivid vignettes to describe human dynamics, organizational challenges, and applications of tools Employs boxed features and YouTube videos to address frequently asked questions and real-world instances of operations in practice

The Corporate Transformation of Health Care John P. Geyman, MD 2004-09-14 The author explores how the corporate transformation of hospitals, HMOs, and the insurance and pharmaceutical industries has resulted in reduction in services, dangerous cost cutting, poor regulation, and corrupt research. He sheds light on the political lobbying and media manipulation that keeps the present system in place. Exposing the shortcomings of reform proposals that do little to alter the status quo, he makes a case for a workable single-payer system. This is an essential read for today's practitioners, policy makers, healthcare analysts and providers, and all those concerned with the precarious state of America's under- and uninsured.

Hidden Costs, Value Lost Institute of Medicine 2003-07-19 Hidden Cost, Value Lost, the fifth of a series of six books on the consequences of uninsurance in the United States, illustrates some of the economic and social losses to the country of maintaining so many people without health

insurance. The book explores the potential economic and societal benefits that could be realized if everyone had health insurance on a continuous basis, as people over age 65 currently do with Medicare. *Hidden Costs, Value Lost* concludes that the estimated benefits across society in health years of life gained by providing the uninsured with the kind and amount of health services that the insured use, are likely greater than the additional social costs of doing so. The potential economic value to be gained in better health outcomes from uninterrupted coverage for all Americans is estimated to be between \$65 and \$130 billion each year.

Rethinking the Gross Domestic Product as a Measurement of National Strength United States. Congress. Senate. Committee on Commerce, Science, and Transportation. Subcommittee on Interstate Commerce, Trade, and Tourism 2012

Health, United States, 2006 with Chartbook on Trends in the Health of Americans 2007-02 Annual report on national trends in health statistics. Includes a highlights section, chartbook, and 147 trend tables.

Vulnerable Populations in the United States Leiyu Shi 2021-02-10 An in-depth look at disparities in health and health care, fully updated for 2021
Vulnerable Populations in the United States, 3rd Edition provides a general framework for studying vulnerable populations and summarizes major health and health care disparities by race/ethnicity, socioeconomic status, and health insurance coverage. This updated contains the latest statistics and figures, incorporates new information related to Healthy People 2020, analyzes the latest data and trends in health and health care disparities, and provides a detailed synthesis of recent and increasingly expansive programs and initiatives to remedy these disparities. In addition, the Third Edition offers new coverage of health care reform, the "deaths of despair" (suicide, opioids, etc.), and the global primary care initiative. Based on the authors' teaching and research at the Johns Hopkins Bloomberg School of Public Health and the Keck School of Medicine of the University of Southern California, this landmark text is an important resource for students, researchers, practitioners, and policymakers for learning about vulnerable populations. The book's Web site includes instructor's materials that may be downloaded. Gain a general understanding of health and health care disparities related to race/ethnicity, socioeconomic status, and health insurance coverage
Access online resources including editable PowerPoint slides, video, and more
Delve into the programs and initiatives designed to remedy inequalities in health and health care, including Healthy People 2020 updates
Enjoy new coverage of health care reform, the "deaths of despair" (suicide, opioids, etc.), and the global primary care initiative
End of chapter revision questions and other pedagogical features make this book a valuable learning tool for anyone studying at the advanced undergraduate or graduate levels. Additionally, it will prove useful in the field for medical professionals, social and community workers, and health educators in the public sphere.

Science, Technology, and Society Sal P. Restivo 2005 'Science, Technology, and Society' offers approximately 150 articles written by major scholars and experts from academic and scientific institutions worldwide. The theme is the functions and effects of science and technology in society and culture.

America Back on Track Edward M. Kennedy 2007-08-28 From one of America's most respected progressive voices comes an inspiring vision of reform and renewal In a Senate career spanning more than four decades, Edward M. Kennedy has become one of the most authoritative voices in American politics. His first major book in more than twenty years, *America Back on Track* argues that our nation has departed more deeply from its fundamental ideals than at any time in modern history. From a dangerous foreign policy to the threats against constitutional checks and balances, Kennedy tackles the country's gravest concerns and charts a course toward a stronger, freer, and fairer America. A provocative call to action, this will be read by everyone seeking political clarity in these tumultuous times.

Departments of Labor, Health and Human Services, Education, and Related Agencies Appropriations for 2009: Dept. of Labor FY 2009 budget justifications United States. Congress. House. Committee on Appropriations. Subcommittee on the Departments of Labor, Health and Human Services, Education, and Related Agencies 2008

Poor Families in America's Health Care Crisis Ronald J. Angel 2006-05-29 *Poor Families in America's Health Care Crisis* examines the implications of the fragmented and two-tiered health insurance system in the United States for the health care access of low-income families. For a large fraction of Americans their jobs do not provide health insurance or other benefits and although government programs are available for children, adults without private health care coverage have few options. Detailed ethnographic and survey data from selected low-income neighborhoods in Boston, Chicago, and San Antonio document the lapses in medical coverage that poor families experience and reveal the extent of untreated medical conditions, delayed treatment, medical indebtedness, and irregular health care that women and children suffer as a result. Extensive poverty, the increasing proportion of minority households, and the growing dependence on insecure service sector work all influence access to health care for families at the economic margin.

Issues for Debate in American Public Policy CQ Press 2007 In the tradition of nonpartisanship and current analysis that is the hallmark of *Congressional Quarterly*, *Issues for Debate in American Public Policy* investigates sixteen important and controversial policy issues. Each article gives substantial background as well as current analysis of the issue in addition to the following special features: a pro/con box that examines two competing sides of a single question; a detailed chronology; an annotated bibliography and Web resources; photos, charts, graphs and maps. Book jacket.

A review of hospital billing and collections practices United States. Congress. House. Committee on Energy and Commerce. Subcommittee on Oversight and Investigations 2004

The 1st Annual Crossing the Quality Chasm Summit Institute of Medicine 2004-09-13 In January 2004, the Institute of Medicine (IOM) hosted the 1st Annual Crossing the Quality Chasm Summit, convening a group of national and community health care leaders to pool their knowledge and resources with regard to strategies for improving patient care for five common chronic illnesses. This summit was a direct outgrowth and continuation of the recommendations put forth in the 2001 IOM report *Crossing the Quality Chasm: A New Health System for the 21st Century*. The summit's purpose was to offer specific guidance at both the community and national levels for overcoming the challenges to the provision of high-quality care articulated in the Quality Chasm report and for moving closer to achievement of the patient-centered health care system envisioned therein.

Hidden Costs, Values Lost: Uninsurance in America 2003

Reimagining Global Health Paul Farmer 2013-09-07 Bringing together the experience, perspective and expertise of Paul Farmer, Jim Yong Kim, and Arthur Kleinman, *Reimagining Global Health* provides an original, compelling introduction to the field of global health. Drawn from a Harvard course developed by their student Matthew Basilico, this work provides an accessible and engaging framework for the study of global health. Insisting on an approach that is historically deep and geographically broad, the authors underline the importance of a transdisciplinary approach, and offer a highly readable distillation of several historical and ethnographic perspectives of contemporary global health problems. The case studies presented throughout *Reimagining Global Health* bring together ethnographic, theoretical, and historical perspectives into a wholly new and exciting investigation of global health. The interdisciplinary approach outlined in this text should prove useful not only in schools of public health, nursing, and medicine, but also in undergraduate and graduate classes in anthropology, sociology, political economy, and history, among others.

The Measure of America Sarah Burd-Sharps 2008 *The Measure of America* is the first-ever human development report for a wealthy, developed nation. It introduces the American Human Development Index, which provides a single measure of well-being for all Americans, disaggregated by state and congressional district, as well as by gender, race, and ethnicity. The Index rankings of the 50 states and 436 congressional districts reveal huge disparities in the health, education, and living standards of different groups. Clear, precise, objective, and authoritative, this report will become the basis for all serious discussions concerning the realization of a fair, just, and globally competitive American society.

Who Has the Cure? Jason Furman 2009-09-01 The Hamilton Project at the Brookings Institution was established to foster policy innovation from leading economic thinkers—ideas based on evidence and experience, not ideology and doctrine. The overall goal is to promote America's long-

term economic growth, and economic security for American families. This important book brings The Hamilton Project's approach to one of the most critical issues facing Americans today—health care. In *Who Has the Cure?* a team of noted economists and policy analysts emphasizes the importance of universal health care—not just its value to individual and families, but also the overall economy. They examine in detail four policy alternatives for achieving universal health insurance coverage that would also improve efficiency in the health care industry. The contributors to this volume also evaluate proposals designed to make health care more affordable and effective. Among the possible strategies studied here are an expansion of preventive care, income-related cost sharing, and reform of Medicare's prescription drug benefit.

The Law of Health Care Organization and Finance Barry R. Furrow 2004 A spin-off publication of *Health Law: Cases, Materials & Problems*, 5th Edition, the text begins with an introduction to fundamental concepts affecting law and policy. The next chapter considers quality control in the health care setting. The following four chapters examine issues central to structuring integrated systems and the organization of health care institutions. It also covers the problem of health care access and cost control issues, with particular attention paid to the ongoing policy debate about the proper role of government and the nation's responsibilities to provide health care for indigent citizens. Examines legal oversight of private health financing, and looks at Medicare and Medicaid.

The Measure of America 2010-2011 Kristen Lewis 2010-11-01 Provides information and statistics on the health, education, and standard of living of all Americans.

More Than Ramps Lisa I. Iezzoni 2006 Many Americans live with some sort of disability and this book in three parts looks initially at the historical roots of healthcare access for those with disabilities. The second part discusses the current situation and the final part discusses the ways in which healthcare quality and access can improve.

Health Care Management and the Law Hammaker 2017-03-02 *Health Care Management and the Law-2nd Edition* is a comprehensive practical health law text relevant to students seeking the basic management skills required to work in health care organizations, as well as students currently working in health care organizations. This text is also relevant to those general health care consumers who are simply attempting to navigate the complex American health care system. Every attempt is made within the text to support health law and management theory with practical applications to current issues.

Best Care at Lower Cost Institute of Medicine 2013-05-10 America's health care system has become too complex and costly to continue business as usual. *Best Care at Lower Cost* explains that inefficiencies, an overwhelming amount of data, and other economic and quality barriers hinder progress in improving health and threaten the nation's economic stability and global competitiveness. According to this report, the knowledge and tools exist to put the health system on the right course to achieve continuous improvement and better quality care at a lower cost. The costs of the system's current inefficiency underscore the urgent need for a systemwide transformation. About 30 percent of health spending in 2009--roughly \$750 billion--was wasted on unnecessary services, excessive administrative costs, fraud, and other problems. Moreover, inefficiencies cause needless suffering. By one estimate, roughly 75,000 deaths might have been averted in 2005 if every state had delivered care at the quality level of the best performing state. This report states that the way health care providers currently train, practice, and learn new information cannot keep pace with the flood of research discoveries and technological advances. About 75 million Americans have more than one chronic condition, requiring coordination among multiple specialists and therapies, which can increase the potential for miscommunication, misdiagnosis, potentially conflicting interventions, and dangerous drug interactions. *Best Care at Lower Cost* emphasizes that a better use of data is a critical element of a continuously improving health system, such as mobile technologies and electronic health records that offer significant potential to capture and share health data better. In order for this to occur, the National Coordinator for Health Information Technology, IT developers, and standard-setting organizations should ensure that these systems are robust and interoperable. Clinicians and care organizations should fully adopt these technologies, and patients should be encouraged to use tools, such as personal health information portals, to actively engage in their care. This book is a call to action that will guide health care providers; administrators; caregivers; policy makers; health professionals; federal, state, and local government agencies; private and public health organizations; and educational institutions.

Strengthening Employer-provided Health Care United States. Congress. House. Committee on Education and Labor. Subcommittee on Health, Employment, Labor, and Pensions 2009

Encyclopedia of Health Economics 2014-02-21 The *Encyclopedia of Health Economics* offers students, researchers and policymakers objective and detailed empirical analysis and clear reviews of current theories and policies. It helps practitioners such as health care managers and planners by providing accessible overviews into the broad field of health economics, including the economics of designing health service finance and delivery and the economics of public and population health. This encyclopedia provides an organized overview of this diverse field, providing one trusted source for up-to-date research and analysis of this highly charged and fast-moving subject area. Features research-driven articles that are objective, better-crafted, and more detailed than is currently available in journals and handbooks Combines insights and scholarship across the breadth of health economics, where theory and empirical work increasingly come from non-economists Provides overviews of key policies, theories and programs in easy-to-understand language

Protecting the U.S. Population's Health Against Potential Economic Recessions and High Unemployment and the Endemic Inflation of Health Care Costs Fritz Dufour 2019-12-15 This book has three main parts: (1) the challenges of the U.S. health care system; (2) the impacts of economic recessions and high unemployment on the U.S. population's health; and (3) recommendations or a look into what might improve the health care system. Part I, through a dissection of the challenges faced by the U.S. health care system, exposes the particularities and the vulnerabilities of the system. It shows the role played by businesses and employment in the U.S. population's health and describes major challenges of the health care system such as astronomical health care costs, the average family health spending – which is exceedingly high, wasteful spending, death due to inaccessibility to health care, and the hardships that medical costs created for more than half of Americans. Part II is an analysis as to why do economic recessions have health implications. That analysis is done by considering the health implications of economic recessions both at the micro and macroeconomic levels and by considering the societal costs of uninsurance or inaccessibility to health care due to economic recessions and high unemployment. Part III primarily focuses on what can make the system better, that is more efficient and more cost-effective. Ironically, as Part III argues, there are a myriad of feasible recommendations that are waiting to be fully explored, agreed upon, adopted and implemented nationwide: · Design labor and fiscal policies aimed at preventing economic recessions and high unemployment · Blend labor and fiscal policies into structural reforms · Create job security and take other steps that guarantee health care security during financial hardship · Improve health outcomes through nationwide permanent supportive housing to combat chronic homelessness during economic recessions and high unemployment · Prioritize the use of more cost-effective medical technologies · Promote telemedicine to reduce costs and improve accessibility to health care · Eliminate health disparities thanks to the democratization of health care · Promote health literacy and the valorization of communities · Design policies or procedures that 1) promote health care costs reduction and efficiency through affordable insurance coverage and 2) eliminate Wasteful spending: · Extend drug coverage and implement cost-effective pricing policies · Extend coverage of more medical procedures and implement cost-effective policies On the other hand, Part III also sells the idea of a thorough and bold revolution in our health care system, which would make health care a right of citizenship. It does so by analyzing the political, social, ethical, and economic aspects of the issue. Furthermore, it argues that the relationship between universal health care and economics justifies the notion of “health care as a right of citizenship.”

The Instability of Health Coverage in America United States. Congress. House. Committee on Ways and Means. Subcommittee on Health 2009

Health Care Politics and Policy in America Kant Patel 2006 Fully updated for this new edition, *Health Care Politics and Policy in America* combines background and context for the evolution of U.S. health care policy with analysis of recent trends and current issues. The book introduces public policy students to the complex array of health care issues, and health care professionals to the study of public policy. It

provides comprehensive coverage of policy issues related to health care at the federal, state, and provider/patient levels, from Medicare and Medicaid funding and managed care to medical liability law and ongoing debates over the beginning of life and end-of-life decisions. Health Care Politics and Policy in America successfully integrates political, ethical, economic, legal, technological, and medical factors in an issue-focused survey of U.S. health care policy. It includes a chronology of health care-policy-related events and legislation from 1798 through 2005, and an appendix comparing medical malpractice tort laws state-by-state.

Hidden Costs, Value Lost Institute of Medicine 2003-06-19 Hidden Cost, Value Lost, the fifth of a series of six books on the consequences of uninsurance in the United States, illustrates some of the economic and social losses to the country of maintaining so many people without health insurance. The book explores the potential economic and societal benefits that could be realized if everyone had health insurance on a continuous basis, as people over age 65 currently do with Medicare. Hidden Costs, Value Lost concludes that the estimated benefits across society in health years of life gained by providing the uninsured with the kind and amount of health services that the insured use, are likely greater than the additional social costs of doing so. The potential economic value to be gained in better health outcomes from uninterrupted coverage for all Americans is estimated to be between \$65 and \$130 billion each year.

Hidden Costs, Value Lost Institute of Medicine (USA). Committee on the Consequences of Uninsurance 2003

Essentials of Health Policy and Law Joel Bern Teitelbaum 2013 Given the prominent role played by policy and law in the health of all Americans, the aim of this book is to help readers understand the broad context of health policy and law. The essential policy and legal issues impacting and flowing out of the health care and public health systems, and the way health policies and laws are formulated. Think of this textbook as an extended manual.introduutory, concise, and straightforward.to the seminal issues in U.S. health policy and law, and thus as a jumping off point for discussion, reflection, research, and analysis.

Essentials of Health Policy and Law Department of Health Policy Milken Institute School of Public Health the George Washington University Joel B Teitelbaum 2012-04-06 Essentials of Health Policy and Law provides students of public health with a firm foundation of the basics of American health policy and law. Given the prominent role played by policy and law in the health of all Americans, the aim of this book is to help readers understand the broad context of health policy and law, the essential policy and legal issues impacting and flowing out of the health care and public health systems, and the way health policies and laws are formulated. Important Notice: The digital edition of this book is missing some of the images or content found in the physical edition.

Essentials of Health Economics Diane M. Dewar 2015-06 Essentials of Health Economics, Second Edition examines the public health care system through the lens of economic theory. Through the use of numerous examples and profiles related to the field, students will learn the importance health economics and its relevance to more general analysis of health policy issues. This text is ideal for courses in programs of public health, health administration, and allied health professions as it conveys the essence of the economic issues at hand while avoiding complicated methodological issues that would interest only students of economics. Written with the non-specialist in mind, the book focuses on how to do descriptive, explanatory and evaluative economics in a systematic way. The Second Edition features: * Highly accessible content * Ideal for students with a modest quantitative background * Real world examples throughout, giving the student hands-on experience in actual policy-related issues as economic concepts are introduced. * Comprehensive coverage of the specifics of the health care markets, the evaluation of health care services delivered, and health care reform * Updated statistics and references throughout * New chapters on Noncompetitive Market Models and Market Failures; International Health System Issues and Reform; and National and State Health Care Reforms Instructor Resources: Instructor's Manual, PowerPoint Lecture Slides, Test Bank

Science, Technology, and Society Sal Restivo 2005-05-19 Emphasizing an interdisciplinary and international coverage of the functions and effects of science and technology in society and culture, Science, Technology, and Society contains over 130 A to Z signed articles written by major scholars and experts from academic and scientific institutions and institutes worldwide. Each article is accompanied by a selected bibliography. Other features include extensive cross referencing throughout, a directory of contributors, and an extensive topical index.

Economic Recovery and Job Creation Through Investment in America United States. Congress. House. Committee on Ways and Means 2009 The Encyclopedia of Social Work Terry Mizrahi 2008 Conveys the breadth and depth of the social work profession's collective expertise, formulated and written by social workers from many backgrounds and competencies.

Insuring America's Health Institute of Medicine 2004-02-14 According to the Census Bureau, in 2003 more than 43 million Americans lacked health insurance. Being uninsured is associated with a range of adverse health, social, and economic consequences for individuals and their families, for the health care systems in their communities, and for the nation as a whole. This report is the sixth and final report in a series by the Committee on the Consequences of Uninsurance, intended to synthesize what is known about these consequences and communicate the extent and urgency of the issue to the public. Insuring America's Health recommends principles related to universality, continuity of coverage, affordability to individuals and society, and quality of care to guide health insurance reform. These principles are based on the evidence reviewed in the committee's previous five reports and on new analyses of past and present federal, state, and local efforts to reduce uninsurance. The report also demonstrates how those principles can be used to assess policy options. The committee does not recommend a specific coverage strategy. Rather, it shows how various approaches could extend coverage and achieve certain of the committee's principles.