UNIVERSAL HEALTHCARE

The United States is the only industrialized nation that does not have some form of universal healthcare system. Despite having the best training, healthcare providers, and medical infrastructure of any industrialized nation, the United State’s healthcare system ranks poorly relative to other industrialized nations. The World Health Organization ranked the performance of the U.S.’s healthcare system as 37th in the world. Administrative costs are 50-100% more in the United States than in countries with a single-payer system. Connecticut alone spends $22 billion every year on healthcare. Despite the system’s high cost, there are over 45 million Americans that do not have health insurance and millions more that are underinsured and don’t have adequate financial protection for healthcare costs. Lack of adequate and affordable healthcare is a serious problem that affects the health and well-being of all U.S. citizens.

Background

Uninsured individuals have less access to quality healthcare. The uninsured are less likely to be able to fill prescriptions and more likely to pay much more of their money out-of-pocket for prescriptions. Studies show that the uninsured are three to four times more likely than those with insurance to report problems getting needed medical care, even for serious conditions. The uninsured are also less likely to have a regular source of healthcare; 40% of the uninsured do not have a regular place to go when they get sick, compared to 10% of insured individuals. As a result, 20% of uninsured say their usual source of care is the emergency room, compared to 3% of insured individuals.

Inadequate and delayed access to care adversely affects health. Uninsured individuals are less likely to get needed preventive care. Uninsured, non-elderly adults are 50% less likely to receive preventive care, including pap smears, mammograms, blood pressure checks, sigmoidoscopies, cholesterol screening and prostate exams. They are also more likely to receive poor care for chronic diseases, leading to an increased risk of hospitalization and disability. Individuals who delay medical services get diagnosed later, negatively affecting disease prognosis. The Institute of Medicine estimates that the uninsured have an excess annual mortality rate of 25%, which translates into 18,000 excess deaths per year for people between the ages of 25-64.

The costs of not achieving universal healthcare are high. The annual cost of diminished health and shorter life spans for uninsured Americans is $65-130 billion. Uninsured children are more likely to suffer delays in development due to poor health. In addition, inadequate access to healthcare in children contributes to poor health later on in life, less productivity, and a greater burden to society.

Recommendations

The CPHA supports H.B. 6600, An Act Concerning the Establishment of the SustiNet Plan This legislation will establish a universal healthcare system in Connecticut. Such a system would increase access and improve quality of healthcare to Connecticut residents in addition to saving money by encouraging preventive healthcare and early interventions in medical illnesses. For additional information on CPHA’s position on universal healthcare and other public health issues, please contact CPHA Advocacy co-chairs Annamarie Beaulieu at annamarie.beaulieu@cpha.info or Alyssa Norwood at Alyssa.norwood@gmail.com.