

U.S. Lags in Health Care Access and Affordability

BY JANE ANDERSON

FROM HEALTH AFFAIRS

Adults in the United States are far more likely than those in 10 other countries to go without health care because of cost, have difficulty paying their medical bills, and have disputes with their insurers over bills, according to a new 11-country survey published last month.

The United States lags significantly on access, affordability, and problems with health insurance despite spending more than twice as much on average as the other 10 countries included in the annual survey, according to "How Health Insurance Design Affects Access to Care and Costs, by Income, in Eleven Countries," published online in the journal.

But some of these disparities could be reversed as provisions of the Affordable Care Act, approved last spring, begin to take effect, Karen Davis, president of the Commonwealth Fund, said during a telephone press briefing.

"There could be some effects early on, but the big difference should show up in 2015 or 2016," Ms. Davis said.

The Commonwealth Fund has surveyed adults in these 11 countries for the last 13 years to gain insights into how different coverage and program designs affect access, financial protection, and other health insurance issues. The 2010 edition of the survey involved interviews with 19,700 adults in Australia, Canada, France, Germany, the Netherlands, New Zealand, Norway, Sweden, Switzerland, the United Kingdom, and the United States (10.1377/hlthaff.2010.0862).

The report found significant disparities between the United States and most of the other countries studied.

For example, the report showed one-third of U.S. adults went without necessary care, failed to see a physician when sick, or failed to fill a prescription because of the costs involved. Germany and Australia also scored poorly on those measures – 25% of Germans and 22% of Australians reported going without care because of costs.

About 35% of Americans faced \$1,000 or more in out-of-pocket costs each year, more than any of the other countries studied, the survey found. Twenty-one percent of Australians and 25% of Swiss residents also faced out-of-pocket costs of \$1,000 or more.

One-fifth of U.S. respondents reported a serious problem with affordability or being unable to pay a health care bill, compared with 9% in France, the next highest on this measure.

In addition, 31% of Americans said they spent a lot of time on health insurance-related paperwork or disputes over medical bills, or that their health insurer had denied payment or hadn't paid as much as expected.

Twenty-three percent of respondents in France and Germany each reported

VITALS

Major Finding: The U.S. lags behind 10 other industrialized nations when it comes to major indicators of access to care, including cost, difficulty paying medical bills, difficulty accessing needed care, and overall problems with health insurance.

Data Source: Survey of 19,700 adults in 11 countries by the Commonwealth Fund.

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those problems, according to the study.

"We emerged as the only country in the study where being insured doesn't guarantee you'll be covered when you get sick," said Cathy Schoen, senior vice president at the Commonwealth Fund and lead author of the study.

U.S. adults were significantly less likely than their international peers to have confidence in their ability to afford care, and were less confident than adults everywhere except in Sweden and Norway that they would receive the most effective treatment when needed, according to the study.

Only 70% of U.S. adults said they expected they would receive the most effective treatment, including diagnostic tests and drugs.

To determine the responsiveness of the different health care systems, the survey asked about waiting times to receiving care.

"Switzerland stands out for rapid access: 93% of the Swiss respondents had received a same- or next-day appointment the last time they were sick," according to the study report. Meanwhile, one-fourth or more of Canadian, Swedish, and Norwegian adults reported having to wait 6 days or more to see a doctor or nurse when sick, and also reported waits of at least 2 months to see specialists.

Rapid access to health care when sick varied significantly when patients' income was considered in Canada, the Netherlands, and the United States, with the widest income gap in the United States.

The Affordable Care Act should begin to reverse some of the disparities between the United States and other industrialized countries, although the changes will take some time to be felt, said Ms. Davis. "The new law will ensure access to affordable health care coverage to 32 million Americans who are uninsured, but just as important are the system reforms in the new law."

However, with health care spending in the United States topping \$7,500 per person, more than twice the average of the other 10 countries in the survey, it will take time to begin to "bend the cost curve," she said, adding that "we see about half a percentage point slowdown" in the annual increase in health care costs as a result of ACA provisions. ■

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