

The_high_cost_of_healthcare_in _America.edited.docx

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Healthcare Cost in the United States

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The United States of America has long been regarded as land of opportunities, where people are accorded all kinds of benefits at their disposal. In addition to that, it is the only country that plays a crucial role in changing the world by adopting measures of viewing the world in a broader dimension, removing barriers and hurdles that halt the country's progress. The high costs of healthcare are not solely attributed to the baby boom generation, prescription drugs, or the frustration by citizens to overcome ageing emblems. However, looking at recent developments, especially in health care, there is very little to be desired. The cost of healthcare continues increasing, leaving many Americans without a means to access quality health services.

To many Americans, the high cost of medical services remains an issue. In many American households, affording medical care is a hardship. Over the years, a relentless rise in medical premiums has forced many families to cancel their medical insurance plans. Moreover, whereas the Affordable Care Act has extended insurance coverage to many citizens, it does not explicitly address cost, which is a problem for many American households (Papanicolas et al., 2018). Many Americans, including those with medical insurance, have raised concerns regarding the increasing out-of-pocket expenses. Nearly half of Americans have complained about out-of-pocket payments for medical services, including prescription drugs that have gone up over recent years (Rosenthal, 2018). In essence, this happens because new insurance plans, as well as policies covered by the Affordable Care Act, were formulated to be discriminatory to low households.

With the increase in medical costs, many Americans are less likely to get much-needed healthcare services. One reason is the high cost of health care services which is out of reach to many even if they have medical cover, and the other is the additional costs that must be funded

using other means and are not part of the insurance cover. For instance, whereas the Affordable Care Act has made it mandatory to cover certain types of screening services for free, any treatment after that entails that patients must find other ways of funding medical expenses (Rosenthal, 2018). Besides, many Americans wish doctors would be at the forefront in discussing how they can manage healthcare costs, but that is not the case. Notably, discussing money upfront is taboo in the American healthcare system. Many Americans shy away from discussing medical expenses whenever they visit their doctors (Lawrence, n.d). In addition to that, many physicians argue they are never prepared to discuss healthcare costs with patients. They do not know the cost of treatment anyway, partly because of the uncertainties surrounding insurance settlements.

Nonetheless, this information is essential to Americans because it helps them manage their health expenses. On the same point, insurance paperwork is problematic to many citizens, making it difficult for them to access medical insurance. The American medical billing system has created a burden that many Americans tend to avoid. For instance, after a doctor's visit, a patient might take days just trying to navigate medical bills. Even after minor illnesses, patients are confronted with huge files containing payment plans and bills. Trying to understand the medical bills while cross-referencing them with the insurance paperwork is tiresome to someone who is not literate.

However, all is not lost. At the local, state, and federal levels, measures are being adopted to ensure healthcare costs do not burden Americans. For instance, there are calls for healthcare price transparency at the regional and federal governments (Rosenthal, 2018). The government must inform the Americans about the costs ³ of medical procedures, services, and prescription drugs to lower patients' costs. Consequently, Americans are being encouraged to divorce

healthcare and politics. For a long time, health has been a campaign tool for many presidents, governors, and senators. Different leaders promise better outcomes only for them to be elected into office and forget about their representatives' plight. In addition to that, other states have come up with medical aid for households that cannot afford medical insurance (Dickman et al., 2017). This is a step in the right direction that other jurisdictions in America should emulate.

Despite the efforts made to lower healthcare costs in America, a lot needs to be done. One way to achieve this progress is to develop policies and regulations that govern healthcare. For instance, experts have championed an end to the dominant fee-for-service model that rewards medical experts for the number of services offered and not the quality of service delivered (Lawrence, n.d). In this manner, the American healthcare setup will ¹ shift from a fee-for-service model to a patient-centred, value-based model where healthcare experts are compensated for their effectiveness and not the amount of work they do. Furthermore, many states and local administrations have adopted legislation requiring Medicare to directly negotiate prices with pharmaceutical firms to avoid extra costs of prescription drugs, as well as adopting easy-to-understand healthcare prices.

In conclusion, many Americans are struggling to afford healthcare services, whereas many providers are also suffering because they cannot collect their dues from economically stressed patients. In essence, healthcare coverage must ensure that individuals seek the care they need, knowing that their treatment is within their financial budget. However, in reality, many Americans opt to avoid, delay or abandon treatment because of their inability to meet their medical expenses. Furthermore, communication about the cost of treatment often comes after acquiring medical services from an expert, which is not recommended moving forward.

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