Free medical care!

With the swirling talk about the health care system in the USA, it has been interesting for me to interact over the past month with people who live in countries that have public or government funded health care.

While the idea of a government funded health care system at first may sound like a very good idea, it is worth exploring what happens when a publicly funded health care system is put into place.

Both Brazil and Argentina are countries I have recently been traveling to and talking with people about their health care systems. Both of these countries have health care that is funded to a major extent by the government.

Argentina has a complex system with all unionized workers being covered under one type of public insurance (about 50 percent of the population). Non-union workers, the poor and the unemployed are covered under the general public health care system (40 percent), and the remaining 10 percent have private insurance.

However, there is a mix within these groups, and many people have some sort of private insurance to help cover their public plans, such as a plan that might help to cover the costs of prescription drugs.

Brazil has a two part system. There is the public insurance and there is the private health insurance that covers about a third of the population. Again, some people have a combination of plans, paying for partial private insurance to add to their publicly funded plans.

In both of these countries, and in others with similar systems throughout the world, everyone is covered by the public health insurance. Stop and think about this for a moment—if every single person in the country is covered by a public health care system, meaning that every person in the country, as a part of their taxes, is paying for their part of the health care system—then why would anyone in their right mind also pay out-of-pocket for an individual, private health care insurance policy?

The answer is simple. The health care that is provided by the government is not good enough. The public systems are under-funded, require long waiting periods for general medical care and are infamous for their low standards of patient care.

For example, doctors in Brazil tell me that a patient who needs a hip replacement may have to wait five years until their name is called from the waiting list. To see a doctor in the public system in Argentina, a patient may have to arrive at the hospital very early in the morning, stand in a hallway waiting all day, and then be seen only briefly in the hall by the doctor, without a private room because the resources are so limited.

In these systems, anyone who can afford additional private insurance does. If one of their family members becomes ill, they do not want to have to brave the public system to try to get the medical care that is needed.

While technically every person in these countries is covered, many people end up paying for both their public and their private insurance plans. Even many employers and even the Brazilian government recognize that the public plan is insufficient, and they provide private insurance for their employees.

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