

CAN THERE BE REFORM?

1. SYSTEM

Employment based, decentralized, fragmented, variable

But most (75-80%) Americans get comprehensive access to high quality care vs. all (95% plus) Germans, British, Japanese, Canadians get good to very good care (and 5% get better than that).

System flexible, innovative---open to new technology, new organizational forms (Which way does the learning go? Change here is not a national system decision)

Medical Research well supported/diffused---biotechnology, scanners, artificial heart

2. PROBLEMS

10-15 % limited access, charitable dependant, state dependant care

Variability

Cost?

Better elsewhere? UK clearly underinvests, Canadians losing confidence in system, Germany can't control costs. Japan ?

3. MISSED OPPORTUNITY?

Clinton political errors but could it have happened with better judgements?

No cost increase unrealistic at best; creates opportunity for fear of being worse off

Cold War dividend missed?

4. **FUTURE**

If no big system change decision likely then will significant change be done incrementally?

Technology forces change? End Stage Renal Disease. The artificial heart?

No change----housing, education----mixed system, lots of variability, decentralization, lack of coordination, but pretty good

Mostly listen to your mothers---don't smoke, drive fast or hang around with the wrong crowd and don't worry