Pathways for Achieving Universal Coverage

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Three Roads to **UNIVERSAL COVERAGE**

- **Single-Payer Coverage (U.K.)**
- **Regulated Private Health Coverage (the Netherlands)**
- **Mixed Public-Private Coverage (France)**
Single-Payer Coverage (U.K.)

- Spending: 9.7% of GDP
- CMWF Rank: 1
- What is covered? Comprehensive care; no copays at point of service
- Who is covered? All residents
- Financing and care delivery: Government finances health care with taxes and pays providers directly
Regulated Private Health Coverage (Netherlands)

- Spending: 10.5% of GDP
- CMWF Rank: 2
- What is covered? Government-defined health benefits; deductible for some services
- Who is covered? Everyone is required to have insurance unless they qualify for an exception
- Financing and care delivery: People pay premiums for regulated private health coverage; insurers pay health providers
Mixed Public-Private Coverage (France)

- Spending: 11% of GDP
- CMWF Rank: 10
- What is covered? Wide range of services with some cost-sharing; private insurance fills gaps
- Who is covered? All residents
- Financing and care delivery: Government finances nonprofit funds that pay providers; most people buy additional private insurance
International Health Care System Profiles: international.commonwealthfund.org

Country Profiles

Australia | Canada | China | Denmark | England
France | Germany | India | Israel | Italy
Japan | Netherlands | New Zealand | Norway | Singapore
Sweden | Switzerland | Taiwan | United States
http://www.commonwealthfund.org/interactives/2017/july/mirror-mirror/

Mirror, Mirror 2017: International Comparison Reflects Flaws and Opportunities for Better U.S. Health Care

By Eric C. Schneider, Dana O. Sarnak, David Squires, Arnav Shah, and Michelle M. Doty

1 The United States Health System Falls Short
2 Performance Varies Among Health Systems
3 Causes of Poor Performance
4 Lessons for the United States
5 How We Measured Performance