

Health insurance and reimbursement course work

[Economics](#), [Money](#)



In 2009, the US healthcare system is said to have made transactions worth over two trillions US dollars/ year . There are various ways that an individual can pay for healthcare services. The purpose of this paper is to discuss the various forms of insurance payment such as the private, government and self pay system.

The self-pay for healthcare includes both those that have money to pay out of pocket and those that do not have healthcare insurance coverage at all (Finn et al., 2009). The authors state that there are as many as “ 46 millions Americans,” that our individual self pay (Finn et al., 2009). They also stated that the problem with this payment system is that the doctor is unable to provide an real price quote at the time of providing the service. The doctor can just provide an estimation and send the bill to the patient weeks later hoping that the patient will be able to pay back. In my experience however, sometimes the doctor may ask the patient to make a payment of a deposit upfront. If someone is uanble to pay off their bill it can be a very hard and complicated life with debt collectors behind yoru back and sometimes lawsuits can ensue.

Private insurance reimbursement of healthcare is one that is individually or through organisations or employer groups. Most of these individuals belong to a common pool of insured and the costs is shared . This is a good cost savings plan where people often have the option of chosing different levels of coverage.

Finally, governement insurance includes Medicare, Medicaid, Disability etc. The Medicaid coverage “ is available only to certain low-income individuals and families who fit into an eligibility group that is recognized by federal and

state law” . The other side, Medicare is health coverage for “ people age 65 or older, people under age 65 with certain disabilities, and people of all ages with End-Stage Renal Disease” . For the government provided insurance, individuals must qualify by falling into specific categories. Due to the large nature of the country, each states manages its part of this coverage. These plans are good because they provide insurance to people that would otherwise not be able to work and get insurance or are working and cannot just afford it. Unfortunately, there are also many people that are working to just barely pay their bills and yet do not qualify for government assistance. These people end up being uninsured as a result.

America’s Health Insurance plan is an association in which private health insurers, covering “ more than 200 million Americans” (2011). This includes all three types of reimbursement systems and regulates them. I think it is not easy to charge which payment system is better because it there are many factors that play into the decision. A fair assessment would be one that supports individual self pay through deductibles, part government pay and the other part government supplied. Healthcare is just too expensive to be left to one payer. Individuals must always remain proactive about healthcare decisions, understand their right and support those decisions that seek to make the system better.

References

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