

Health insurance plans essay examples

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Health insurance plans

Health insurance involves taking an insurance plan to cover any medical expenses that one might incur over one's lifetime. One is required to pay premiums to cover the health insurance plan. The amount and the frequency of the premium to be paid is determined by the insurance company with the agreement of the person taking the insurance cover (Frum, 2000). The health insurance is kind of a social or private contract between the person to pay the premiums and the insurance company to be paid. The person could be an individual person taking a private policy plan, an employer taking cover for his employee. An individual can also pay premiums to the federal government to get a health insurance cover over one's lifetime.

Insurance policies in America are the most expensive when compared to other common wealth countries. This is according to a survey done by the commonwealth fund in 2007. The U. S health system is not only the most expensive, but it also under performs and does not have universal health cover.

In the U. S there are both private and social health coverage policies. The social insurance policies include the Medicare, Medicaid and other government social programs that provide health care to poor people unable to meet the costs of private health insurance premiums. It is important to note at this point that about 57 – 59% of all Americans rely on private health insurance covers. This is among the reason why the U. S health system was considered as the most expensive among the common wealth nations. Due to the high cost of private health insurance cover, a significant part of the population goes without cover annually in America. It is estimated that about

46 million people did not have any health insurance cover in 2007. It is highly risky for one to lose one's job as with the loss one also loses the source of money to pay health insurance premiums which in most cases are paid by the employer.

Before assessing the impact various health insurance covers have over health organizations, it is imperative to know and understand the various health insurance covers, both private and the ones provided by the government. Most health care institutions in the United States are owned by private entities. This makes access to health care in the United States very expensive. There are various programs though which have been put forth to aid local Americans have access to health care.

Medicare is among these social health insurance covers provided by the federal government. This program covers people who are 65 years and over, those who are under 65 but are physically disabled permanently and those with any other special deformity according to the federal government.

Medicare is divided into four parts (Lemieux, Chovan & Heath, 2008). These parts include hospital insurance, medical insurance, a combination of the first two and prescription of drug coverage. The first part covers all inpatient care in a health institution and requires one to meet certain requirements. The second part covers the doctor's services which are not covered in the first part. It is usually optional. Both parts require one to pay monthly premiums depending on one's monthly income. In case one paid while working, then one is free of the premiums. The cover extends to the spouse of the one holding the insurance cover. The minimum premium that most people pay here is \$115. 40 (Lemieux, Chovan & Heath, 2008). The third part

combines the first and the second cover and sometimes also the fourth to enable one pay for all the services including access to drugs and medicines easily. It is although managed by private insurance companies and can prove to be a challenge to many people. The last part can be accessed by everyone with Medicare cover. Medicare is managed by the government. One is entitled to receive nearly any form of medic help. It although does not cover one for access of all prescription drugs. It requires one to take a separate policy for other type of drugs other than the drugs covered by the policy.

Medicaid is essentially not for the elderly but they too can fall into this category. This government funded social policy health insurance cover is for citizens living under the federal government poverty line. This cover is funded by both the federal governments and the state. It covers citizens with very low income and disabled people (Bayer, 2008). Though it is optional for the federal governments to fund this health insurance cover, all the states have been involved since 1982.

The private health insurance cover though is the main source of health insurance to most Americans. About 60% of all Americans with health insurance covers access the same through an employment based insurance cover. Insurance companies providing health policies recorded substantial amounts of profits in the recent year (Sylvia, 1974). This has in some way prevented most Americans from accessing health insurance covers thus the deteriorating health conditions among the majority poor. This is way the current government is keen on reforming health insurance policies to help the American people have access to proper and cheap health services.

Medicare and Medicaid as well as other health insurance covers like the children's health insurance program have had a very large social impact on the American population. These two programs are revolutionizing the once expensive service into an affordable and accessible service to all Americans. With the signing of health care legislation in 2010, millions of American citizens will now have access to health insurance cover at affordable prices. The insurers were also prohibited from refusing insurance covers to the American citizens based on their pre-existing conditions. This has seen the health conditions of most Americans improve significantly

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