

Course work on rising healthcare costs

[Technology](#), [Development](#)



“ Medicare” is a type of health service responsible for provision of services to old people. “ Medicaid” is a health program that offers health services to poor people of all age groups. A person qualifies for Medicare if he is aged above 65 years and is eligible for social plus social security benefits. A person also qualifies if he is permanently impaired or has severe renal disease. For a person to qualify for Medicaid, he should be poor and medically unfit. Persons who require Medicare should be well covered by offering “ health care” and “ physician services”. An example of such a service is the health insurance. Persons eligible for Medicaid should also be covered. According to certain state laws, people who have the need for Medicaid should receive benefits. The benefits are to be in agreement to the set laws. Such benefits are those of “ hospital and physician services”. Other services are “ dental and eye care coverage” (Austin, 2011).

With the current technological advancements both in hospital industry and other areas, the future of health care is expected to be marked by great changes. Most countries especially developed ones have now started to use electronic medical recording equipments. They are willing to spend much of their money in order to render record keeping in hospitals digital. With these technological changes, the need for health care will rise and costs of offering health care services as well. Technological innovation by various countries will change the market for medical gadgets and thus the future of “ medical technology” (Austin, 2011).

The costs of health care have been increasing in various hospitals, for example, in the United States the expenditures of health have been going up above the inflation levels of their economy. The methods of funding health

care affects how health care is offered to people, its quality plus cost. There are several reasons for rising in spending for health care purposes: Drug prescription and costs imposed in hospitals as well as Medicare and Medicaid play a major role in the escalating costs. In America, changes have been put in place to control spending that is reducing certain amounts of “reimbursements” and other benefits. Managed care organizations (HMOs) whose purpose is to offer better health to people at a given amount of money, have played a significant role in affecting the health care costs. They have made governments to increase their funding to make certain proper health services are offered to those in need. The expansion of health care has accelerated increasing health care expenses. Some technological advancement in hospitals is the widening of medical devices. These services include “pacemakers plus other implants, research and development; medical imaging, surgery and genetic mapping” (CMS, 2006).

There has been controversy among policy making bodies on the requirements and potential over-use of rising technology in health care. A vital development that has arised in health care is the use of electronic recording. Although it is not in use in the entire health care, it has replaced a number of written documents. An important influence of the accomplishment of electronic recording is the improvement of patient safety as well as workflow efficiencies. HMOs feature is the incentive to keep expenditures by use of “primary gatekeeper approach”. To come up with an explanation as to why the costs of health are rising, one has to scope the economics plus health policy and literature. The lack of markets with adequate strengths in

competition may be responsible for increasing expenditures (Manning, 1998).

Reference

Austin, A., & Wetle, V. (2011). The U. S. health care system: Combining business, health, and delivery. Upper Saddle River, NJ: Pearson.

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