American healthcare still tied to reducing costs: the impact of uncompensated car...

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The United States healthcare system has been effectively in creating a better environment under which it is much possible to receive standard care based on the various healthcare programs that have been put into consideration. Uncompensated care includes healthcare services that are provided by hospitals that are not repaid. In most cases, uncompensated care tends to arise when healthcare seekers do not have insurance and cannot afford to pay the cots care demanded for the healthcare services rendered. A hospital suffers bad debts when it cannot be able to reimburse for the services delivered to individuals who are unable to afford the quality of care provided(Reiter, Noles, & Pink, 2015).

The United States healthcare industries has approximately 5600 registered hospitals. These hospitals are engaged differently on how they offer quality healthcare based on size, location, finances and affiliations. Therefore, the two hospitals that will be considered in this case include acute care and Long-term hospitals. Acute care hospitals are involved mainly in offering shorter care for illness, disease, injury or surgery that focuses on quick medical solution to various issues within the medical environment. The Long-term care is mainly engaged in chronic illnesses, rehabilitation or psychiatric care. The acute care make up to 91% of all hospitals within the United States(Song, Lee, Alexander, & Seiber, 2013).

The acute care hospitals are the highly affected with uncompansted care considering the fact that they are involved in dealing with daily healthcare issues facing individuals. The fact that acute care hospitals deal with short-term focus in healthcare it becomes very difficult in developing a proper plan where delivery of care can be effectively monitored in ensuirng that every patient is able to pay for healthcare. The long-term care hospitals are involved in patients suffering from chronic illnesses that are very expensive and thus it reaches a time when patients are unable to afford healthcare due to the increasing cost of care(Camilleri, 2017).

Uncompensated care is detrimental to the overall delivery of quality healthcare since it limits the ability of a healthcare institution to be able to provide quality healthcare due to limited funds available. A hospital must ensure that they limit the cost of uncompensated care that is turns into bad debts. The acute care hospitals are expected to operate on daily basis without compromising the quality of healthcare delivered. It is therefore an important consideration under which key strategies are put in place to ensure that the cost co uncompensated care are shared across the health system and ensure that the quality of healthcare is maintained within the required health standards. Therefore, management policies and structure need to be flexible enough where it is much possible to develop a clear understandingthe policies that are put in place.

The Long-term care hospitals are highly engaged in providing a better environment under which delivery of care can be effectively undertaken. Uncompensated care among healthcare seekers in this case have adopted by Long term care creates a better environment under which it is much possible to create a better environment under which it is much possible to put into focus quality healthcare measures where uncompensated care individuals can be able to access care even when they are uninsured.

Financial strain that is created by delivery of uncompensated care is always visible although the federal and state governments put in place crucial measures, which are aimed at improving the quality of healthcare, delivered. Uncompensated care even though is detrimental to the overall development process within healthcare environment is crucial in developing a better environment under which it is possible to engage uninsured individuals(Garthwaite, Gross, & Notowidigdo, 2015).

The hospitals in the United States that are more concerned with delivery of quality care rather than collection of any payments include Shriners and St Jude Hospitals. Shriner’s hospitals are specialized hospitals for children that provide specialized care to children with orthopedic condition, burns and spinal cord complications. St Jude Hospitals are children hospitals that provides treatment for kids with cancer and other chronic diseases. The key objective that is held between these hospitals is the need to provide quality and specialized healthcare for children with significant focus on the costs incurred(Camilleri, 2017)..

St Jude is a children’s research hospital that functions as a research, treatment and education center with its mission statement being to save children’s lives through focus on finding the cause of catastrophic illnesses, improving existing treatments and finding cures for diseases. The hospital tends to more than 8, 500 annually. The main way St. Jude funds for its service is mainly based on donors and sponsors who appreciate the work done by the hospital in trying to create a better engaged environment under which it is much easier to find solution to common problems among children which are effectively engaged to improve children health. The assets limited as to use include the assets that have been set aside by the board for liability insurance funding over which the board retains control. The hospital operates under favorable working environment under which it is much possible to significantly commit in providing a better environment under which it is possible to treat the different conditions among children(Parikh et al., 2017).