

# [Political process of healthcare delivery](https://assignbuster.com/political-process-of-healthcare-delivery/)

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The Political Process of Healthcare Delivery in and outside New Zealand

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| Political Process Element | New Zealand | United States of America |
| Inclusion | New Zealand’s health and disability system is mainly funded from general taxation   * Publicly funded health services include accident cover (ACC), eligibility for specific services, hospital visits, notifiable infectious diseases, maternity benefit, residential care, health services for Pacific Island people, subsidy cards, visiting a dentist and a doctor. * Accident Compensation Corporation (ACC) provide comprehensive and personal no- fault injury coverage for all New Zealand citizens and visitors to New Zealand. This is applicable to all working individual, retirees, children, students or a beneficiary. This also include oneself or somebody else who caused the accident that led to the injury and when the injury happened at place of work, during leisure sports or recreational activity, on the road or even at home. One can apply for assistance no matter how injured a person is or whoever fault is was. The subsidy can include a wide range of services which include payment towards treatment, help around the home while recuperating and support with income if one cannot work yet because of the injury incurred. Because of the huge coverage available from ACC after an accident or injury, one cannot file a case for personal injury in New Zealand , except for standard damages. As a crown organization, the ACC role is set out by the government of New Zealand. Details of the injuries covered are set out in ACC’s governing Accident Compensation Act 2001. The institution has several roles including preventing injury, making sure that people can get treatment if an injury happens, and helping people to resume daily life activities as soon as possible. * Other publicly funded health services include   Visiting a doctor or general practitioner. They are the first important contact for New Zealanders if they become ill . Qualification for eligibility for publicly funded disability and health services is needed to avail of the services free of charge.  Primary Health organizations(PHOs) are group of healthcare workers like the doctors, nurses and other people educated and trained to be skilled and are collaborating together to deliver a better healthcare service. Eligibility is also required and the government provides a better iaid for people with a PHO membership or registration.   * Health Cards ( High Use Health Card and Prescription Subsidy Card) is also a plus benefit.   This is to help people with the cost of the purchased medicines and the frequency of doctor’s consultations.  Community Services card gives subsidy for low income family for them to have access to discounted doctor’s visit and free home based support for people with disabilities.   * Hospital Visits   Eligible people can avail of services free of charge including inpatient and outpatient treatment at a public hospital; X-RAYS and laboratory tests carried out in public hospitals.   * Visiting a dentist   Dental education, preventive, treatment and primary health treatment services are provided free of charge to children and adolescent up to 18 years old.  There is a certain limit in a wide range of services for adults that is also publicly funded.   * Pregnancy services   Pregnant women are eligible for free and subsidized maternity-related services if they qualify for the publicly funded health and disability services.  The purpose of this funding is to ensure the child of an eligible person with the best chance of being healthy.   * Notifiable infectious diseases   A person who is suspected of having an infectious disease and who is posing a risk to others have access to certain publicly funded services regardless of eligibility.   * Services for Pacific   Island people  A guide to eligibility for public health services is also available for these people who live in Fiji, Tonga, Cook Islands, Samoa, Niue, Tuvali Tokelau, Fiji, Vanuatu, and other Pacific islands.   * Eligibility for specific services   The specialists from the District Health Board apply to the Ministry of Health as a representative of the patient.  Very expensive treatments includes medical health treatment that is not available in New Zealand or treatment that is only currently available in private facility and not in public health system.   * Residential care   A person must have a needs assessment to determine their needs and the level of care required to meet those needs in order to be eligible for publicly funded residential care | Affordable Care Act( Obama care)   * Ten essential Benefits: Emergency services, hospitalizations, laboratory services, maternity care, mental health and substance abuse treatment, out- patient or ambulatory care, pediatric care, prescription drugs, preventive care, rehabilitative and rehabilitative ( helping maintain daily functioning) services, vision and dental care for children. * Medicaid, a government health insurance for low income people in the US whose income falls below a certain income limit.   It is one of the country’s largest social welfare program which differ from state to state and funded both by the state and by the federal governments.   * Medicare is an insurance program provided by the federal government for the elderly (over 65 years old) who paid Medicare payroll taxes for at least 10 years and younger disabled people and dialysis patients. |
| Good Governance | The District Health Boards are responsible for planning, managing, providing or funding the provision of health services for the population in their district.  The Ministry of Health is the one responsible for budgeting and procuring the disability support services and some health services.  There are 20 DHBs in New Zealand governed by 11 board members.  Public hospitals are owned and funded by the DHBs.  Claims, provider payments and entitlements of the citizen of New Zealand contain the following: adolescent oral health enrollment, artificial eye subsidy, breast prosthesis subsidy, care plus, care support, dental subsidy, dialysis while on holiday, general medical subsidy, high use health card payment, immunization, laboratory, maternity service payment, pharmacy, residential care, national travel assistance claim etc. | Obama care helps to control the growth in healthcare expenditure.  Medicare will improve for seniors including eliminating the doughnut hole, diminishing down the rates and intensifying free preventive services.  Young adults can stay on parent’s plan until 26 years of age.  According to the initial report from a US health news website, Medicaid will expand up to 15. 9 million men, women and children below 138% of the poverty level.  Over half of uninsured Americans can get free or low cost health insurance using their state’s health insurance market place.  Small business can get tax credits for up to 50% of their employees’ health insurance premium cost.  Obama care requires companies with 50 or more employees to offer insurance to their employees.  Obama care prohibits insurers from placing limits on the benefits an individual can receive during their lifetime.  Obama care requires insurers to cover pre- existing conditions. |

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