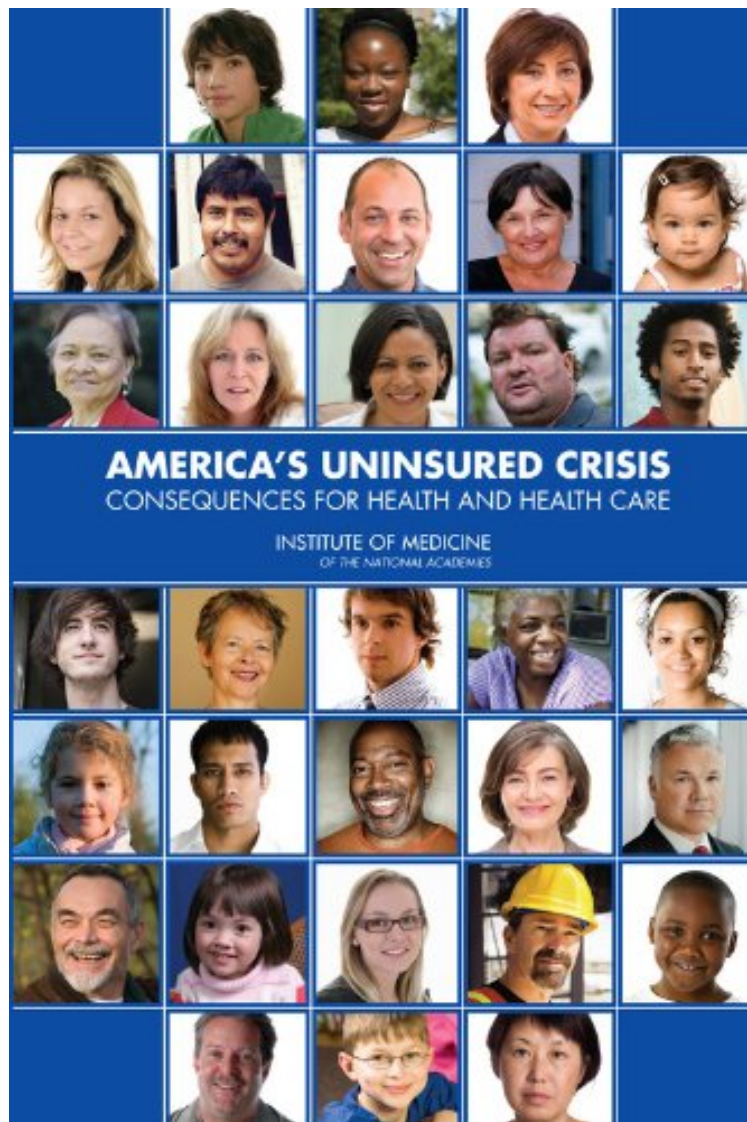


# America's Uninsured Crisis: Consequences for Health and Health Care

*Institute of Medicine, Board on Health Care Services, Committee on Health Insurance Status and Its Consequences*

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**Institute of Medicine, Board on Health Care Services, Committee on Health Insurance Status and Its Consequences : America's Uninsured Crisis: Consequences for Health and Health Care** before purchasing it in order to gage whether or not it would be worth my time, and all praised America's Uninsured Crisis: Consequences for Health and Health Care:

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By me sitting here

Although well reasoned and written for what this book does review, it leaves three major gaps unexplored. First, as a literature review the work fails to provide new objective knowledge. Since it acknowledges the emergence of knowledge in this area, it is unfortunate that the investment of time and resources was not applied to scientific study which could be relied upon beyond the level currently available from existing original research. Criticisms of the design of existing research are sound and the gaps which have been noted in this and other works are substantial enough to undermine this work as well. Second, the individual resource controls necessary to analyze this domain are not present. It would be surprising if morbidity and mortality were not impacted by lack of access to care, since lack of access to care is a clear differentiator between societies with better or worse results in this area. To the extent lack of health insurance can be equated to lack of access to healthcare, one would expect lack of health insurance to equate to poor results. In other works, there is a strong relationship between limited financial resources, indexed by net income and by disposable income, and reduced access to care; with the strongest correlation between levels of disposable income and access to care. If that is the case, conclusions which are not grouped by some measure of income cannot be applied to the entire population and may lead to false conclusions. Third, the individual needs controls necessary to analyze this domain are not present. Many IOM studies indicate higher rates of morbidity and mortality among individuals with chronic conditions who do not receive proper care as compared to the population as a whole. Additionally, a similar pattern is revealed when looking at various age groups, with young adults and very aged individuals having relatively less impact to both measures when they lack access to care, as compared to the populations under 20 years of age and between the ages of 35 and 75. Since both are true, one would assume that a model which can predict the relative impact of access to care to individuals in age bound and condition specific demographic groups could be devised with adequate results. Since access to care is the true issue of concern, not possession of health care insurance, this model could lose accuracy when aligned to the later, however, the absence of such a model places the totality of this work in question. As stated at the start of the review, this book is well written for what it is, however, the conclusions it draws are not adequately supported by the facts. Until original research is completed with the substantial resources which have been applied to this domain, continued reliance on literature reviews is of little value. Moreover, it draws valuable research resources away from the truly useful original work which is required if we are to truly examine the issue at hand.

When policy makers and researchers consider potential solutions to the crisis of uninsurance in the United States, the question of whether health insurance matters to health is often an issue. This question is far more than an academic concern. It is crucial that U.S. health care policy be informed with current and valid evidence on the consequences of uninsurance for health care and health outcomes, especially for the 45.7 million individuals without health insurance. From 2001 to 2004, the Institute of Medicine (IOM) issued six reports, which concluded that being uninsured was hazardous to people's health and recommended that the nation move quickly to implement a strategy to achieve health insurance coverage for all. The goal of this book is to inform the health reform policy debate--in 2009--with an up-to-date assessment of the research evidence. This report addresses three key questions: What are the dynamics driving downward trends in health insurance coverage? Is being uninsured harmful to the health of children and adults? Are insured people affected by high rates of uninsurance in their communities?