

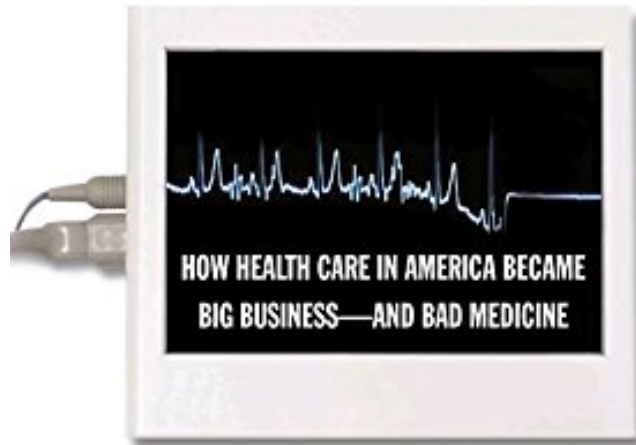
(Free) Critical Condition: How Health Care in America Became Big Business--and Bad Medicine

Critical Condition: How Health Care in America Became Big Business--and Bad Medicine

Donald L. Barlett, James B. Steele

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CRITICAL CONDITION

FROM THE NEW YORK TIMES #1 BESTSELLING AUTHORS OF
AMERICA: WHAT WENT WRONG?
DONALD L. BARLETT & JAMES B. STEELE
WINNERS OF THE PULITZER PRIZE
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Donald L. Barlett, James B. Steele : Critical Condition: How Health Care in America Became Big Business--and Bad Medicine before purchasing it in order to gage whether or not it would be worth my time, and all praised Critical Condition: How Health Care in America Became Big Business--and Bad Medicine:

2 of 2 people found the following review helpful. What You Need To Know About US MedicineBy Patricia W.

Zimmerman I thought the VA medical scandal was bad, but according to this author, the entire medical situation in the US is in desperate need of reform. It's true that this book is a few years old, but many of the facts given remain the same. This book was a revelation to me and will help readers get a look at the medical situation rarely covered in the news. 1 of 1 people found the following review helpful. Critical Condition: How Health Care in America Became Big Business and Bad Medicine By Josh Meier This should be required reading for every American. Before my auto crash, like most Americans, I, now and then, briefly brushed up against America's health care system and sensed something wrong. Yet I really had no clue what the facts were arousing my suspicion and prompting my intuition. Critical Condition places the facts together like a large jigsaw puzzle, providing a very clear picture of what is going on right under our noses. The authors provide a very practical and healthy solution at the end of the book. It is my hope that America could follow Europe's lead in being a "we" nation instead of a "me" nation. But I'm not sure that's possible. Critical Condition: How Health Care in America Became Big Business--and Bad Medicine 0 of 0 people found the following review helpful. Arm yourselves... read up on America's Healthcare ... By Kindle Customer Arm yourselves... read up on America's Healthcare system.

Exposing the most controversial, little-known practices of America's most flawed system, Time magazine's Pulitzer Prize-winning investigative team pulls back the curtain on the health care industry to explain exactly how things grew so out of control. Dirty examination and operating rooms in doctors' offices and hospitals . . . Health care executives pulling in millions in bonuses for denying treatment to the sick . . . More than 100 million people with inadequate or no medical coverage . . . This may sound like the predicament of a third-world nation, but this is America's health care reality today. The U.S. spends more on health care than any other nation, yet our benefits are shrinking and life expectancy is shorter here than in countries that spend significantly less per capita. Meanwhile, HMOs, pharmaceutical companies, and hospital chains reap tremendous profits, while politicians beholden to insurers and drug companies enact legislation for the benefit of the few rather than the many, while the entire system is on the verge of collapse. In *Critical Condition*, award-winning investigative journalists Donald L. Barlett and James B. Steele expose the horror of what health care in America has become. They profile patients and doctors trapped by the system and offer startling personal stories that illuminate what's gone wrong. Doctors tell of being second-guessed and undermined by health care insurers; nurses recount chilling tales of hospital meltdowns; patients explain how they've been victimized by a system that is meant to care for them. Drug companies profit by selling pills in the same manner that Madison Avenue sells soap, while Wall Street rakes in billions by building up and then tearing down health care businesses. And politicians pass legislation perpetuating the injustices and outright fraud the system encourages. By analyzing the industry and offering an insightful prescription for getting it back on the right track, *Critical Condition* is an enormously compelling investigative work that addresses the concerns of every American.

From Publishers Weekly Bestselling investigative journalists Barlett and Steele (*America: What Went Wrong?*) deliver a devastating indictment, supported by excellent research, of a health-care system that they say is failing to provide first-rate services to its citizens, 44 million of whom are without insurance. According to these Pulitzer Prize-winning reporters, now with Time magazine, the U.S. compares poorly with other Westernized nations in delivering quality care and a healthy life expectancy, and preventing infant mortality. Per capita health-care spending continues to exceed the amount spent by many other countries, the authors say, because one out of every three U.S. dollars pays for administrative costs. The authors also present case histories of patients, some with life-threatening conditions, who were ignored by bureaucratic HMOs that put profit first. Barlett and Steele describe how health care first became driven by profits on Wall Street during the Reagan administration. Competing insurance plans, they say, led not to better choices for consumers, but to physicians who are prevented by insurers from prescribing needed treatments; a severe shortage of nurses; and unsafe hospitals where staff shortages and unsanitary conditions result from cost-cutting. The authors, who strongly advocate a single payer plan, successfully depict a health-care system in crisis. Copyright Reed Business Information, a division of Reed Elsevier Inc. All rights reserved. From *The New England Journal of Medicine* Love thy neighbor: an American paradox? The United States has one of the highest levels of church attendance in the world, but when it comes to health care, it seems that churchgoers find it difficult to love their neighbors in the way that secular Europeans take for granted. *Critical Condition*, a fine polemic, describes how health care in the United States is financially rewarding to insurers and providers but delivers poor-quality health care to many of its citizens. Although U.S. health care has been described as the "best system in the world" (and it is in parts), it is also a failure because of its inability to deliver good-quality care to the disadvantaged. However, this paradox is also the triumph of the system, since its component parts do what they are designed to do. Medicaid provides variable support for some of the poor. Medicare offers a finite package of care for the elderly, with patients in the eastern United States receiving 60 percent more care than those in the West. Veterans are cared for in a mini-National Health Service, which appears to have had some success in shifting cases from the hospital to primary care settings. The majority of U.S. workers are offered little choice in insurance plans by their employers, who, confronted by an escalation in costs, increasingly have recourse to higher levels of deductibles and copayments and are pruning benefit

packages. Then there are the 43 million Americans with no health insurance. Over the life cycle, the American lottery can move people across these systems with significant consequences for their material well-being and health. In each of these health care systems, Americans face price discrimination and bankruptcy if they are unlucky in their genes and life events. In their book, Barlett and Steele describe these problems in graphic detail. They explain how, instead of cross-subsidizing the poor with revenues from people who are more affluent, providers charge them higher prices for the same services as those received by the more fortunate. This price discrimination is supported by vigorous pursuit of people who fail to pay their health care debts. American private-sector bureaucrats, like their public-sector counterparts in Europe, increasingly have recourse to "cookbook medicine," in which practice guidelines and protocols (all too often evidence-free) are imposed on practitioners. Given that medical practice exhibits established and significant variations and well-chronicled medical errors, together with a remarkable reluctance to measure success in improving the quality of life of patients, it is unsurprising that bureaucrats seek to establish quality standards in the health care industry. What is surprising is that their efforts in the United States and elsewhere remain feeble and are rarely "confused" by evidence of cost-effectiveness. But there again, this is no accident but, rather, the deliberate product of the incentive structures inherent in the U.S. health care system. These incentives protect the insurers and providers from contestability, muting price competition and ensuring that competition in quality is superficial and rarely informed by patient-outcome data. Barlett and Steele offer a nicely documented and well-written insight into all that is bad with the U.S. health care system. For skeptical Europeans on the receiving end of evidence-free health care reforms often inspired by unevaluated policies from the United States, this book is a welcome antidote. There are no simple solutions to complex problems inherent in health care systems worldwide, and the authors' advocacy of national insurance as the solution to the problems of equity and access that they document is unconvincing. First, insurers and providers thrive at the current health care feast and are unlikely to support reforms that redistribute their jobs and incomes. Second, tax-financed national insurance does not address the problems of inefficiency in the supply of health care as demonstrated by Europe. National insurance enables societies to love their neighbors, but as Adam Smith, the 18th-century Scottish economist, noted, capitalists always conspire to exploit the consumer, and nowhere is this more evident than in the health care sector. Will Barlett and Steele precipitate altruistic reform, unlike their many predecessors who have described the failings of U.S. health care? The recent presidential election makes this unlikely. Americans appear to prefer to practice their religion in isolation from their social policies. Alan K. Maynard Copyright 2005 Massachusetts Medical Society. All rights reserved. The New England Journal of Medicine is a registered trademark of the MMS. From Booklist Forty-five million Americans who are uninsured or underinsured face the choice of risking financial ruin or risking their lives by not seeking medical attention until they are critically ill; meanwhile, doctors are restricted in making decisions about patient care by insurance company bureaucrats. Barlett and Steele, investigative journalists, examine how and why the U.S. has come to have the largest, most expensive, but least efficient and effective health-care system in the developed world. They chronicle the changes in the last decade that have seen health care transform from a largely nonprofit to a for-profit enterprise. The result is huge disparities in the availability of treatment and cost for those with medical insurance and those without. Doctors and nurses tell horror stories of the pressure to shortchange patient care. On the other side of the equation are HMOs, drug companies, and corporate executives reaping huge profits. The authors prescribe an overhaul of the current system: universal health coverage with one agency to collect medical fees and pay claims. Vanessa Bush Copyright American Library Association. All rights reserved