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Paul V. Dutton

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Paul V. Dutton : Differential Diagnoses: A Comparative History of Health Care Problems and Solutions in the United States and France (The Culture and Politics of Health Care Work) before purchasing it in order to gage whether or not it would be worth my time, and all praised Differential Diagnoses: A Comparative History of Health

Care Problems and Solutions in the United States and France (The Culture and Politics of Health Care Work):

2 of 2 people found the following review helpful. Excellent view of US and French health care
By Bruce_in_LA
Another reader has already placed a very detailed review which I "second." Other than a few fixed ideas about Canadian or UK healthcare, most Americans, including those in Congress, health insurers, and doctors, know very little about other European systems. We constantly hear that "all advanced nations but the US have broader health care" but no details. "Differential Diagnoses" provides not only a current comparison of US and French systems, but their historical development over the century. So if this is the one book you read on history of US health care, that's good too. It would be great if a similar English language book on German health care was available. (A half dozen such books are found at www..de with the key word Gesundheitssystem.) This volume deserves to be widely read and really should be a must-read for those in health policy, whether academic, government, etc.
7 of 8 people found the following review helpful. A useful comparison of the US and French systems
By Michael T Kennedy
This is a useful book. Like another reviewer, I wish the author had included a more thorough description of the present French system. My understanding is that electronic medical records, to some extent at least, are embedded in the health care card carried by members. When they visit a doctor's office, a swipe of the card in the reader, conveys some information (I wish I knew how much) to the doctor's office record and, at the same time, deposits the Securite Sociale payment in his practice account. It is interesting to see how much the French have preserved the private fee-for-service system. The author decries this a bit, emphasizing the risk of excessive utilization in the fee-for-service system. That is definitely true but the prepaid system of the HMO has the mirror-image risk of denying service to reduce expense. Buyers of new home prepaid service plans know how difficult it can be to get the service technician to come out to fix the dishwasher when he has already been paid.
The parallel history format of the book is good and, while I am very familiar with the history of US health care, it was valuable to see the contrast with the French system. The unique circumstance that had a lot to do with the diversion of the French system from ours was the loss to Germany in 1940 and the subsequent period of Vichy rule. All the older structures of government and the hierarchy of the medical profession were upset and replaced by a diluted version of the Nazi regime. The 1944 invasion and liberation placed the De Gaulle organization in charge and it was very interesting to learn that health care reform was a concern of the Free French even during the period of exile from 1940 to 1944. Again, the intervention of President DeGaulle in 1960 to establish fixed fee schedules was new to me and makes the two chapters, numbers five and six, the best part of the book.
I have a few disagreements with the author. He is obviously an enthusiast for the failed Clinton Health Plan of 1994 but he ignores the principle reason why it failed. He is correct that union opposition has been a barrier to reform in both countries, prolonging the employment link to health insurance far beyond the time when it made sense. He does not inform the reader, however, that the secrecy and the failure to include any non-academic providers in the task force preparing the plan led to widespread distrust and opposition. Additionally, the criminal penalties attached to practice outside the Clinton cooperatives alienated physicians completely. Having said that, I generally support his history of the US system although Paul Starr's book is more complete. He does misstate the position of the American College of Surgeons on a national health plan for the US. I have been a member of the College since 1972 and it first testified in favor of a national health plan in 1938. The fierce opposition he describes as coming from the AMA (and he is correct) was always the position of general practitioners. The Resource Based Relative Value Scale that he describes as part of Medicare reform in the mid 1980s was less a parallel of the DRG system and more an attempt to de-emphasize highly technical care. It is a form of rationing by devaluing the most time consuming and skill dependent procedures in surgery. As a matter of government policy, it is certainly within the power of government to impose but it has been dishonestly described. The author, not being a physician, may not be aware of the history of that particular development.
I wish the details of the present French system had been more complete as it may offer a better alternative as we seek new ideas for health care reform. The history was well done and he knows his subject quite well, as I can judge from his description of the US system. I recommend it.
0 of 2 people found the following review helpful. Great Buy! Seriously!!
By Laura B.
This book came BEFORE the estimated date and was in the best condition possible! Buy from this seller!

Although the United States spends 16 percent of its gross domestic product on health care, more than 46 million people have no insurance coverage, while one in four Americans report difficulty paying for medical care. Indeed, the U.S. health care system, despite being the most expensive health care system in the world, ranked thirty-seventh in a comprehensive World Health Organization report. With health care spending only expected to increase, Americans are again debating new ideas for expanding coverage and cutting costs. According to the historian Paul V. Dutton, Americans should look to France, whose health care system captured the World Health Organization's number-one spot. In *Differential Diagnoses*, Dutton debunks a common misconception among Americans that European health care systems are essentially similar to each other and vastly different from U.S. health care. In fact, the Americans and the French both distrust "socialized medicine." Both peoples cherish patient choice, independent physicians, medical practice freedoms, and private insurers in a qualitatively different way than the Canadians, the British, and many

others. The United States and France have struggled with the same ideals of liberty and equality, but one country followed a path that led to universal health insurance; the other embraced private insurers and has only guaranteed coverage for the elderly and the very poor. How has France reconciled the competing ideals of individual liberty and social equality to assure universal coverage while protecting patient and practitioner freedoms? What can Americans learn from the French experience, and what can the French learn from the U.S. example? *Differential Diagnoses* answers these questions by comparing how employers, labor unions, insurers, political groups, the state, and medical professionals have shaped their nations' health care systems from the early years of the twentieth century to the present day.

"The health care systems of France and the United States began the 20th century looking very much alike, then gradually moved in different directions while retaining a surprising number of common features. Dutton believes that both countries would benefit from taking a careful look at their similarities and differences. Both systems utilize a public/private mix of financing, maintain the fee-for-service basis for physician reimbursement, and hold out the ideals of physician practice autonomy and patient choice of doctor. Dutton says that the United States is almost inadvertently expanding coverage but with little planning; at the same time, the French are adapting U.S. managed-care techniques in an attempt to keep down costs and improve efficiency in a system already offering universal coverage. . . . This distinctive, readable, and well-organized history is recommended for public and academic libraries, especially where health-care reform is a hot topic." *Library Journal*

"In *Differential Diagnoses* Paul V. Dutton tells the story of two nations over the course of an entire century. This remarkable book is one part history, one part policy analysis, and it is held together by strong conceptual glue. *Differential Diagnoses* is distinguished by Dutton's smooth, jargon-free writing, its accessibility, its richness of anecdote, its blending of original archival research with synthetic research drawn from several disciplines, and its timely and level-headed diagnosis and prescriptions for change." Timothy B. Smith, Queen's University

"Paul Dutton exhibits superb scholarship and insight on the evolution of health care financing and organization in France and the United States. His lucid book demonstrates that France's health system is more relevant for the United States than the health systems of the usual suspects—Canada, Germany, and Britain. It should be read by all health policy analysts, scholars, and social reformers who are searching for ways to achieve universal health insurance coverage in the United States." Victor G. Rodwin, Professor of Health Policy and Management, Wagner/NYU; and Director, World Cities Project, International Longevity Center-USA

"By first exposing the stereotypes and then carefully exploring the distinct histories of health care provision in the United States and France, Paul Dutton provides unique and valuable insight into how both countries can better address their respective health crises." Jeremy Shapiro, Fellow and Director of Research, Center on the United States and Europe, The Brookings Institution

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About the Author Paul V. Dutton is Associate Professor of History at Northern Arizona University and a Fellow at the Woodrow Wilson International Center for Scholars. He is the author of *Origins of the French Welfare State*.