

Health policy expert says US can learn from Dutch universal healthcare coverage

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The United States can learn from the Dutch Health Insurance System model, according to an article by Pauline V. Rosenau, Ph.D., in the December issue of the *Journal of Health Politics, Policy and Law*.

Rosenau, professor of management, policy and community health at The University of Texas School of Public Health at Houston, co-authored the lead article, which discusses universal health care coverage in the Netherlands and its possible lessons for the United States.

The article examines the 2006 Enthoven-inspired Dutch health insurance reform, which is based on regulated competition and requires individuals to purchase basic insurance policies. The structure of the Dutch model provides insight into the effects that universal health care reform could have in the United States, Rosenau said.

"Although this type of reform is important and critical, policymakers must think carefully on how it is done," she said.

According to Rosenau's evidence-based assessment, U.S. policymakers seeking to establish universal health care should be aware that, according to the Dutch model, it may not control costs. Insurance companies have seen profit loss on basic policies, health care providers are in opposition and public satisfaction is not high in the Netherlands.

"The Netherlands is the best test of market competition-based health insurance reform to date," Rosenau said. "But U.S. policymakers should

be careful with this form of universal coverage because it has failed, so far, to reduce costs or improve quality."

However, according to Rosenau, the quality and access to health care is sometimes better in the Netherlands, while the healthcare cost per person is half the amount of the United States.

"We suspect that if patient satisfaction with the Dutch healthcare system has not declined dramatically since the insurance reform (and surveys provide conflicting findings), it is because of a dedicated 'army' of primary care physicians who remain committed to their patients. An excellent example is the after-hours care provided by Dutch primary care physicians," says Rosenau.

With several industrialized countries providing universal health care coverage, Rosenau believes the Netherlands' model closely resembles the model that U.S. policymakers are looking to create.

The Dutch Health Insurance System requires regulated sale of health insurance policies and makes the purchase of basic health policies mandatory by implementing fines and penalties for those who ignore the law. The basic policy requires services such as primary and specialist care, hospitalization for up to one year, maternity care, ambulance service and prescription pharmaceuticals. For basic health insurance policies, there are no limitations on preexisting conditions. Citizens can purchase supplementary coverage for procedures such as cosmetic surgery or expanded dental or vision care, but insurance companies are able to choose the patients they want to cover.

Source: University of Texas Health Science Center at Houston

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