HW 3:
The insured, the uninsured, and the in-between

Due in class Jan 30

Problem 1

The US has an entrepreneurial health system including three federal/state run programs: Medicare, Medicaid, and CHIP.

a. Describe the population covered by each of these three systems (be specific to Texas when applicable)
   i. Medicare:
   ii. Medicaid:
   iii. CHIP:

b. Those not covered by the three programs listed above usually receive insurance through employer sponsored insurance or by buying insurance on their own. However, it is estimated that 24.6% of the Texas population is uninsured, this large population includes 21% of children, many working adults, and a growing population of adults that earn > $50,000-75,000/year. Read the following report and list 4 reasons for this large uninsured population:
   http://www.window.state.tx.us/specialrpt/uninsured05/

Problem 2

A commonly used anti-depressant, Zoloft (sertraline), recently became available as a generic drug. The most common regimen is 50mg, taken daily.

a. Find out how much a year’s supply of Zoloft and the generic costs for:
   i. A person without insurance using the Walgreen’s online pharmacy:
      1. Zoloft:
      2. sertraline:
   ii. A Canadian using the online Canadian Prescription Drugstore:
      1. Zoloft:
      2. sertraline:

b. Based on your calculations and the NPR report below, speculate on the reasons for the price differences you identified.

Problem 3

Read the following report:
http://www.npr.org/programs/atc/features/2002/may/uganda/

Next, listen to this update on the story:

a. How is this system similar to the Oregon Health Plan?

b. Evaluate this co-op system as a model for the rest of Africa by answering the following questions:
   i. Assess this health system in terms of access and likely outcomes for the town in Uganda that was described:
   ii. Only about 6% of the population of Uganda has AIDS, in Botswana and Zambia the prevalence is >2x greater. How might the growing AIDS epidemic impact participation in a health care co-op? What sort of AIDS-related care do you think community co-ops would decide to cover?