

Canadians' satisfaction with their health care isn't much different from uninsured Americans.

An Unsatisfying Change?

BY JOHN R. LOTT, JR.

University of Maryland

Shortly before the November 2006 election, the Kaiser Family Foundation, in conjunction with *USA TODAY* and ABC News, released a survey on Americans' satisfaction with their health care system. It found that 89 percent of Americans were satisfied with their own personal medical care, but only 44 percent were satisfied with the overall quality of the American health care system (questions 4 and 14). Importantly, even most of the respondents who recently had been seriously ill or who suffered from a chronic illness were satisfied with their care. While the survey only gathered this information for those who were insured, 93 percent of those who had suffered a serious illness recently and 95 percent of those who suffered from chronic illness were satisfied with their health care (question 13 conditional on illness).

Thus, perhaps surprisingly, most Americans — including a majority of the uninsured — like their own health care, but don't like the health care system. These findings are significant given the current national debate over reforming the system and the frequent comments of many reform proponents that they would prefer the United States adopt a system similar to Canada's single-payer, government-run system. This article compares recent health care satisfaction surveys in both the United States and Canada and asks who is most satisfied with the access to and quality of health care: uninsured Americans, insured Americans, or Canadians. The findings raise the question whether "universal coverage" necessarily translates into higher rates of satisfaction.

AMERICAN SATISFACTION

Some in the media, such as Bloomberg Media's Al Hunt writing in the *International Herald Tribune*, charge: "It's tough to find a family with a severely ill or injured child that doesn't despise its private health insurer." However, that does not

John R. Lott, Jr. is senior research scientist at the University of Maryland, College Park. He thanks the Institute for Policy Innovation for its help in this study.



square with what respondents told Kaiser about their insurance carriers:

- Some 90 percent of those who suffered a serious illness while insured and 92 percent of those who contracted a chronic illness while insured rated their overall health insurance coverage as excellent or good.
- Fully 50 percent in both categories gave it an excellent rating.

It's hard to think of any other service that would receive such high percentages of American satisfaction. The American Customer Satisfaction Index (ACSI) finds a large range in the percent of customers who are satisfied with other industries, but none of those industries exceeded the 85 percent satisfaction threshold in the 2007 survey. Personal care and cleaning products achieved that high of a satisfaction rate, with pet foods and soft drinks both tied for second at 84 percent. The

2007 average across the survey's 43 industries was 76 percent — with the lowest being a 62 percent satisfaction rate for the cable and satellite television industry. In fact, firms had a relatively high level of satisfaction in 2007 compared to other years. Between 1995 and 2007 there was only one other year when the average rate was as high as it was in 2007.

There is more variation at the level of individual firms, but even among the 222 individual firms for which customers were surveyed, only one firm got as high as a 90 percent satisfaction rate (H. J. Heinz Co., a food manufacturer) and the second highest received an 88 percent (Amazon.com). The ACSI survey finds that the websites for government agencies have an average satisfaction rating of 73 percent.

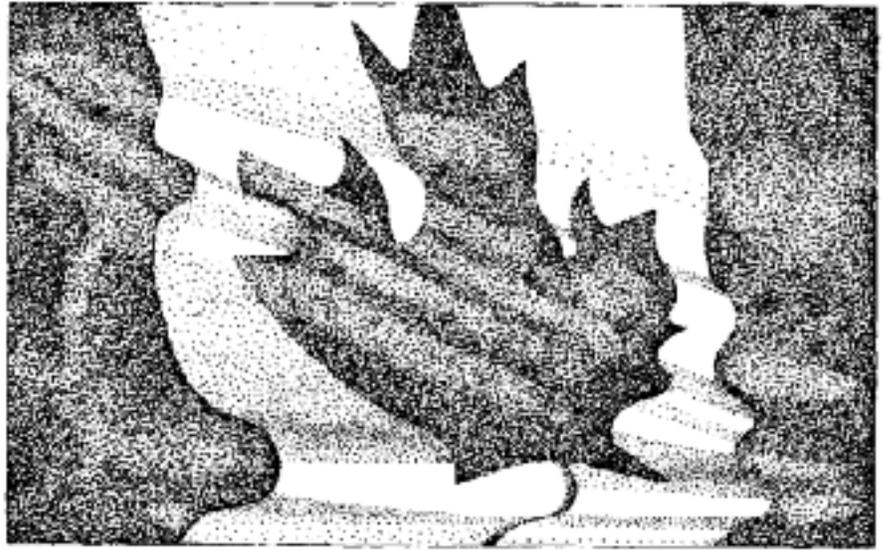
THE INSURED The huge difference in the Kaiser survey between people's satisfaction with their personal medical care and with the overall health care system arises because of the overwhelming concern about the uninsured and the risk that each of us as individuals could become uninsured. According to the Kaiser survey (question 6):

sured who are believed to be dissatisfied with their care. But Americans make two assumptions in this tradeoff:

- The uninsured are unsatisfied with the health care they receive.
- Changes in the health care system would improve the quality of care for the uninsured.

The Kaiser Family Foundation survey found that 13 percent of Americans are uninsured. But while the Kaiser survey asks whether people are insured and satisfied with their health care, the organization and the media that covered the survey strangely never asked what would seem the obvious question: How many Americans are both uninsured and unsatisfied with the health care that they receive? Surprisingly, the uninsured are also quite satisfied with the quality of their health care.

THE UNINSURED There appears to be a common assumption among many U.S. politicians, the media, and the public that an uninsured person has no access to health care. Indeed, many accept Senate majority leader Harry Reid's claim, as



- 52 percent believe becoming uninsured poses a “critical problem.”
- 36 percent view the threat of losing their insurance as “serious but not critical,” and another 7 percent see it as a “problem but not serious.”
- Only 4 percent viewed loss of insurance as “not much of a problem.”

Because of those concerns, according to the survey, Americans were said to support major efforts to reduce the number of uninsured — endorsing policy responses ranging from requiring businesses to offer insurance to expanding government health care programs.

The Kaiser poll is not the only one to get such results (e.g., “Growing Health Care Concerns Fuel Cautious Support for Change,” ABC News/*Washington Post*, Oct. 19, 2003). According to other polls, Americans seem willing to trade off some of the quality of their own medical care in order to help the unin-

quoted in a Summer 2005 *George Washington University Law School Alumni Magazine* profile, that “There are 45 million Americans without health care.” What Reid presumably meant was that 45 million Americans don't have health insurance. The difference is important because many uninsured Americans do see a doctor and get other forms of health care, often paying out of pocket for that care. Plus there are many free sources of health care for those who have trouble paying for it. In fact, estimates indicate that the uninsured spend on average up to 60 percent of what the insured spend on health care (see, e.g., the 2008 *Health Affairs* paper by Jack Hadley et al.).

An important policy question, which is almost never considered, is how satisfied the uninsured are with the health care they receive. Using the Kaiser estimates, only 2.3 percent of Americans are both uninsured and very dissatisfied with the health care they receive, as indicated in Table 1. The uninsured who indicate some level of dissatisfaction represent 3.9 percent.

The survey indicates that very few uninsured Americans

Table 1

The Uninsured

Percent of Americans who are both without health insurance and dissatisfied with their medical care

Please tell me whether you are very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied with:	Percent who are very dissatisfied	Percent who are either dissatisfied or very dissatisfied
The quality of the health care you receive?	2.3	3.9
Your health care costs, including both expenses not covered by insurance, and the cost of your insurance, if any?	7.8	10.3
Your ability to get a doctor's appointment when you want one?	2.9	5.5
Your ability to see top-quality medical specialists, if you ever need one?	4	5.2
Your ability to get the latest, most sophisticated medical treatments?	4.6	5.1
The quality of communication with your doctor?	1.3	3.0
Your ability to get emergency medical care?	3.8	5.4
Your ability to get non-emergency medical treatments without having to wait?	4.2	7.2

SOURCES: ABC News/USA TODAY/Kaiser Family Foundation health care poll, conducted Sept. 7–12, 2006; author's calculations

NOTE: These are calculated by using Kaiser estimates for the percent of the population that are uninsured, and multiplying it by the share of the uninsured who are very dissatisfied or very dissatisfied and dissatisfied with their health care.

have had trouble getting a doctor's appointment, access to top-quality medical specialists, the most sophisticated medical treatments, or access to emergency or non-emergency medical care. Nor do the uninsured appear to be treated by doctors differently from other patients — only 1.3 percent of Americans were both uninsured and very dissatisfied with their communication with their doctors.

The only category where the majority of the uninsured are very dissatisfied with their care is cost concerns. Yet, those costs do not seem to be so large as to cause the uninsured to be dissatisfied with the overall quality of their care.

UNINSURED AMERICANS VS. CANADIANS

Let us now consider two important questions:

- How satisfied are uninsured Americans with the quality of health care they receive compared to Canadians, who have universal coverage?
- Are there segments of American society, by race or income, that are less satisfied with the quality of their health care?

The first question is important because, if the United States were to consider adopting a Canadian-style health care system in order to improve the care delivered to the uninsured, we should first determine whether Canadians are more satisfied with the care they receive. The second question is important because one reason for supporting a Canadian system is to eliminate discrepancies in the quality of health care obtained by different segments of society. Do specific American populations perceive greater discrepancies in the quality of health care when compared to Canadians?

While consumer satisfaction surveys are commonly used for everything from the quality of health care to computers, an

important caveat should be considered. For example, consumers who choose Apple computers over Dells, even after accounting for obvious measurable differences such as age, income, race, gender, and where one lives, may harbor some other, harder-to-detect differences. If relatively difficult-to-please customers buy Apple computers, and that factor can't be measured, whatever lead Apple has in consumer satisfaction surveys may understate the true difference in product quality.

Similarly, with regard to health care it might be easy to please people over age 70, for example, but very difficult to please those under 30. The same may hold for the insured and the uninsured. Those differences in preferences may create apparent differences in satisfaction rates when none actually exist. Still, differences in satisfaction can at least give us some rough idea of the quality of the service they are getting.

STUDY DATA There are two surveys used in this study, one American and one Canadian. The American survey is the Kaiser Family Foundation survey mentioned above, which was conducted by the market research firm TNS Global. The survey polled 1,201 U.S. adults from September 7 to 12, 2006. The Canadian survey was sponsored by the Texas-based conservative think tank Institute for Policy Innovation (IPI) and was conducted by Harris/Decima TeleVox. The survey polled 1,022 Canadian adults from May 8 to 13, 2008.

While some questions that are applicable to Americans are not applicable to Canadians, the Canadian survey was intended to be as similar as possible to the American one. Demographic, income, sex, level of schooling, age, marital status, geographic identifiers (i.e., Canadian province vs. U.S. state),

Table 2

Insurance and Income in the United States

Percent uninsured by income

Income	Insured	Not insured	Percentage of population in survey with that level of income
Less Than \$20,000	64.5	35.5	16.4
\$20,000–\$35,000	78.8	21.2	17.3
\$35,000–\$50,000	85.3	14.7	17.8
\$50,000–\$75,000	94.6	5.4	17.4
\$75,000–\$100,000	97.0	3	13.0
Over \$100,000	98.9	1.1	14.9
Refused to Answer	86.2	13.8	3.1
Overall incomes	86.9	13.1	100

SOURCE: ABC News/USA TODAY/Kaiser Family Foundation poll

and political views (party identification in Canada and ideology in the United States) are included in both surveys. The Canadian survey asks all respondents whether they have suffered a serious or chronic illness, but the U.S. survey only asks that question of those who have insurance. The questions that ask about how people view the quality of their system and the quality of the treatment that they receive are identical in the two surveys, with the exception that the Harris/Decima TeleVox poll also includes questions about the speed with which Canadians are able to obtain treatment. It is interesting that the Kaiser survey didn't consider it important to ask Americans about the speed with which they receive medical care.

The U.S. survey also has information on whether an individual has insurance and which type: private insurance, Medicare, or Medicaid. Canadian surveys do not ask about the respondent's race because a large number of people view the topic as a privacy issue and refuse to answer the question.

THE UNINSURED The Kaiser survey implied that 13.1 percent of American adults did not have health insurance in 2006. The likelihood that someone is uninsured depends a lot on income. As Table 2 shows, 35.5 percent of those making incomes less than \$20,000 a year are uninsured. The rate falls to 21.2 percent for those making \$20,000–\$35,000, and 14.7 percent for those making \$35,000–\$50,000. After that, the uninsured percentage falls to the low single-digit range. Especially for lower-income households, people with children are less likely to be uninsured than those without children.

SATISFACTION Table 3 compares how Americans and Canadians rate the quality of medical care they receive. While Canadian satisfaction levels generally fall between uninsured and insured Americans, they are usually much closer to the uninsured than they are to the insured.

Overall, there are 28 direct comparisons that can easily be made between Americans and Canadians (seven questions and four levels of satisfaction or dissatisfaction). Of those 28 cases, uninsured Americans and Canadians provide answers that are not statistically different from each other in 20 instances (71 percent). Making the same comparisons between insured Americans and Canadi-

ans is much more likely to show a difference in how they view the care that they receive, with it not being possible to reject that the two groups are the same in only 10 of the 28 possibilities (36 percent). In short, uninsured Americans are much more similar to Canadians, who have universal coverage, than

Table 3

United States and Canada

Survey results on satisfaction with health care

	United States (percent)			Canada (percent)	Significant at 5 percent level in two-tailed test	
	Insured	Uninsured	Total	Total	Comparing U.S. uninsured to Canadians	Comparing U.S. insured to Canadians
How satisfied are you with the quality of the health care you receive?						
Very satisfied	56	28	52	39	No	Yes
Somewhat satisfied	37	34	37	47	Yes	Yes
Somewhat dissatisfied	4	12	5	9	No	Yes
Very dissatisfied	3	18	5	3	Yes	No
How satisfied are you with your ability to get a doctor's appointment when you want one?						
Very satisfied	55	30	51	33	No	Yes
Somewhat satisfied	32	27	31	35	No	No
Somewhat dissatisfied	7	20	9	18	No	Yes
Very dissatisfied	6	22	8	11	Yes	Yes
How satisfied are you with your ability to see top-quality medical specialists, if you ever need one?						
Very satisfied	50	14	45	17	No	Yes
Somewhat satisfied	34	30	34	41	No	Yes
Somewhat dissatisfied	6	19	7	20	No	Yes
Very dissatisfied	6	31	9	12	Yes	Yes
How satisfied are you with your ability to get the latest, most sophisticated medical treatments?						
Very satisfied	42	11	38	16	No	Yes
Somewhat satisfied	41	36	40	42	No	No
Somewhat dissatisfied	7	14	8	19	No	Yes
Very dissatisfied	6	35	10	7	Yes	No
How satisfied are you with the quality of communication with your doctor?						
Very satisfied	59	36	56	48	No	Yes
Somewhat satisfied	31	32	31	34	No	No
Somewhat dissatisfied	6	13	7	9	No	No
Very dissatisfied	4	10	5	6	No	No
How satisfied are you with your ability to get emergency medical care?						
Very satisfied	55	20	50	26	No	Yes
Somewhat satisfied	33	34	33	38	No	No
Somewhat dissatisfied	4	12	5	19	No	Yes
Very dissatisfied	4	29	8	8	Yes	Yes
How satisfied are you with your ability to get non-emergency medical treatments without having to wait?						
Very satisfied	39	17	36	23	No	Yes
Somewhat satisfied	38	24	36	37	Yes	No
Somewhat dissatisfied	11	23	13	20	No	Yes
Very dissatisfied	9	32	12	11	Yes	No
How satisfied are you with your ability to see top-quality medical specialists, if you ever need one quickly?						
Very satisfied				14	No	Yes
Somewhat satisfied				31	No	No
Somewhat dissatisfied				25	No	Yes
Very dissatisfied				19	No	Yes
Unweighted N	1,200			1,022		

SOURCES: ABC News/USA TODAY/Kaiser Family Foundation poll; Institute for Policy Innovation poll, conducted May 8–13, 2008

they are to insured Americans in how satisfied they are with their health care.

This relationship is especially true for questions about:

- “Your ability to get a doctor’s appointment when you want one.”
- “Your ability to see top-quality medical specialists, if you ever need one.”
- “Your ability to get the latest, most sophisticated medical treatments.”
- “The quality of communication with your doctor.”
- “Your ability to get emergency medical care.”

For none of those questions is the percentage of satisfied (very satisfied plus satisfied) Canadians and uninsured Americans statistically different. That result is the same whether one examines it at the 90 percent or 95 percent level for a two-tailed

and Canadians. By contrast, that can only be said for one category between insured Americans and Canadians. However, if one adds up those who are satisfied and very satisfied, Canadians are much closer in overall satisfaction to the uninsured than they are to the insured (the large difference between those who are very satisfied under the two systems is more than offset by the smaller difference between those who are satisfied).

For non-emergency care, two differences are significantly large when comparing the insured and uninsured to Canadians. Canadians’ satisfaction is almost right in the exact middle between insured and uninsured Americans.

There is one final possible comparison. The Kaiser survey didn’t ask Americans if they were able to get access to top-quality medical specialists quickly. Only 45 percent of Canadians were either very satisfied or somewhat satisfied with quick access to specialists. Since Canadians appear much more disappointed

Canadians are more similar to uninsured Americans than to insured Americans in how satisfied they are with their health care.

t-test. At the same time, the same comparison for insured Americans and Canadians shows that the percent of those satisfied (very satisfied plus satisfied) is significantly greater for insured Americans.

Can one get an appointment when one wants one? While 87 percent of insured Americans are satisfied with their ability to get an appointment, the percentage of Canadians and uninsured Americans are 68 and 57, respectively. Canadians are better off than the U.S. uninsured in this respect. But notice the size of the gaps. The difference between Canadians and insured Americans is thus almost twice as large as the gap between Canadians and the uninsured. The differences for those seeking access to top-quality care are virtually identical: only 14 percent of the uninsured and 17 percent of Canadians are very satisfied with their ability to get an appointment.

For access to sophisticated medical technology and emergency medical care, the gap is even larger. Between Canadians and the insured, the difference is almost 2.5 times as large as it is between Canadians and the uninsured. While 42 percent of insured Americans are very satisfied with their access to sophisticated medical technology, the analogous percentages for the uninsured and Canadians are 11 percent and 16 percent.

The results are more mixed for the next two questions:

- “The quality of the health care you receive.”
- “Your ability to get non-emergency medical treatments without having to wait.”

In terms of the quality of health care, for two of the four possible answers (very satisfied and somewhat dissatisfied), there is no statistical difference between uninsured Americans

with the speed of their medical care than Americans, the last section of Table 3 compares this question for the Canadians to the closest question for Americans (it’s the same question, but it doesn’t qualify for speed). The Kaiser comparison assumes that access to top-quality care for Americans is a question of whether they receive it or not, not of whether they receive it quickly. In this case, the Canadians are much closer to uninsured than to insured Americans. Insured Americans are 39 percentage points more satisfied than Canadians, and Canadians are only one percentage point more satisfied than uninsured Americans.

If this last category is included, there are 32 cases to compare. Canadians are not statistically different from uninsured Americans in 24 of the comparisons (75 percent), and are not statistically different from the insured in only 11 cases (34 percent). Concerning satisfaction, the Canadian system produces health care that is much closer to what uninsured Americans receive when sophisticated treatment is involved or there is a need for emergency care.

REGRESSION RESULTS It is possible that wealthier people are much more satisfied with the quality of their health care than poorer people, or that younger people are happier with their care than older people. Possibly the comparison differs in other ways. The broader question is whether the possible differences in happiness differ for Americans and Canadians. To examine this, we can run a regression that looks at whether people are satisfied with their health care (very satisfied plus somewhat satisfied) after accounting for such demographic differences as level of education, age, marital status, income, gender, political views, race, and where they live.

Table 4 shows the estimates for these regressions for the United States and Canada. The numbers in the “odds ratio” column express the percentage change in public satisfaction with health care, given a 1 percent change in the various independent variables listed in the left column. For example, the 1.08 odds ratio for U.S. respondents in the \$50,000–\$75,000 income group indicates that these individuals are 4 percent more likely to be satisfied with their health care than the left-out category of those who refused to state their income. Likewise, the 0.81 odds ratio for U.S. respondents in the \$50,000–\$75,000 income group indicates that they are 19 percent less likely to be satisfied.

It is possible to test whether the coefficients for different levels of education or age are different from each other. The more extreme values are shown at the bottom of the table, even after accounting for all the individual characteristics available in the survey, including whether they have insurance. For Americans, there is really one difference that stands out: Americans over 70 years of age are happier with their health care than Americans under age 60. Some weaker differences also exist for those with less than a high school education compared to those with a graduate school education, though the percent of the population with no high school education is very small (only about 2.3 percent of those surveyed).

For example, the difference between those over 70 and those 18–29 is significant at better than the 1 percent level. Even after accounting for other differences across people, including whether they have insurance, people over 70 are about 2.3 times more likely to be satisfied than those 18–29. People over 70 also tend to be significantly happier with their medical care than people 30–39, but not from any of the other age groups.

By comparison, there are no major differences by level of satisfaction across races and no differences by level of income, level of schooling, marital status, gender, or political beliefs. By far the two most potentially explosive inequalities would involve race and income. But blacks are just as satisfied as whites with their health care — this is true even if the variable for insurance is removed. The one exception involves Asians, who are significantly less satisfied than whites but not other groups. Whether someone makes less than \$20,000 per year or between \$20,000–\$35,000, there is no

statistically significant difference in their satisfaction with health care, though significant differences do arise once one no longer accounts for whether one has insurance.

Generally, there is also little difference across Canadians. The one exception involves where they live. Canadians living in Manitoba are the most satisfied, followed by those living in

Table 4

Demographics and Health Care Satisfaction

Also accounting for differences across states or provinces

	United States		Canada	
	Odds ratio	t-stat	Odds ratio	t-stat
Age 30–39	0.61	-1.09	1.17	0.36
Age 40–49	0.96	-0.09	1.55	1.05
Age 50–59	0.59	-1.15	1.00	0.01
Age 60–69	1.08	0.14	1.44	0.81
Age 70 and older	2.27	1.37	1.43	0.8
Single	1.34	0.76	1.59	0.35
Married			1.77	0.43
Divorced	0.90	-0.25	1.41	0.25
Widowed	1.47	0.65	0.97	-0.02
Separated	1.60	0.68	1.18	0.12
Income <\$20,000	0.72	-0.66		
\$20,000–\$35,000	0.59	-1.16	0.96	-0.12
\$35,000–\$50,000	0.82	-0.44	1.07	0.2
\$50,000–\$75,000	1.04	0.08	1.53	1.12
\$75,000–\$100,000	0.81	-0.41	1.46	0.84
>\$100,000	1.57	0.79	1.57	1.12
Male	0.95	-0.2	1.10	0.47
Liberal	0.24	-1.85	1.77	1.66
Moderate	0.36	-1.35	1.38	1.03
Conservative	0.29	-1.61	1.13	0.37
No Label	0.09	-2.51	1.09	0.17
			0.33	-2.12
			2.84	1.32
			0.55	-2.03
Black	2.07E-08	-14.36		
White Hispanic	6.41E-08	-12.21		
Hispanic – No additional racial	7.80E-09			
Asian	7.43E-08	-10.49		
Other race	7.94E-09	-13.39		
White	1.47E-08	-14.4		
Less than high school	2.21E-07	-21.08	0.48	-0.9
Some high school	2.23E-07	-29.33	0.50	-1.14
High school grad	2.27E-07	-34.89	0.40	-1.67
Some college	2.08E-07	-35.67	0.92	-0.13
College	2.56E-07	-33.8	0.39	-1.75
Grad school	4.35E-07		0.27	-2.23
			1.18	0.88
Insured	3.172	4.32		
F-test age 30–39 to age >69	6.48	0.019	0.28	0.598
F-test: <\$20,000 to >\$100,000	1.81	0.179	1.91	0.1670
F-test: <High sch to grad sch	2.45	0.1174	0.75	0.3875
F-test: Liberal to Conservative	0.39	0.53	0.46	0.4987
F-test: Black – White	0.90	0.3437		
Number of observations	1200		1022	
Pseudo R ²	0.1527		0.0722	
Log pseudolikelihood	-295.241		-382.2	

SOURCES: ABC News/USA TODAY/Kaiser Family Foundation poll; Institute for Policy Innovation poll

British Columbia. The least satisfied Canadians are those who live in Newfoundland and on Prince Edward Island. Canadians living in Manitoba are 5.5 times more likely to be satisfied with their health care than those living on Prince Edward Island.

So what is the bottom line? The regressions indicate that in neither the United States nor Canada are there specific demographic segments of the population, by such factors as income or level of schooling, that have relatively low levels of satisfaction with their health care. Similar regressions were estimated for the other questions on satisfaction, and the results are relatively comparable.

CONCLUSION

The two surveys help us to answer an important question: How does the satisfaction of the uninsured in the United States compare to people in Canada, who have universal coverage? That question is especially relevant now, as federal lawmakers consider altering the health care system with an eye to Canada's system.

There are very few people in the United States who are both uninsured and dissatisfied with the health care that they receive. And there are no statistically significant differences in satisfaction between blacks and whites or across different income levels.

This is not to deny that some of the uninsured face cost and access problems when seeking medical care, especially if that care is very expensive, such as an organ transplant. But only about 2.3 to 3.9 percent of Americans, not all 13 percent of the uninsured as is often asserted, are unhappy with the care that they receive.

Even if the uninsured were precisely as happy as the insured, about 1 percent of the uninsured would still be dissatisfied. If the Kaiser survey results are accurate, then the vast majority of Americans, whether insured or uninsured, get timely access to quality care and are satisfied with it. That means Congress should consider more limited health care reforms that address the limited problems rather than introducing sweeping changes.

While people often recognize that a Canadian-style government-run insurance system creates access problems and waiting lines, they contend the tradeoff is worthwhile in exchange for universal coverage. The survey results discussed above give us reason to reconsider making that exchange. For most comparisons, Canadians are experiencing satisfaction levels much closer to that of America's uninsured than they are to America's insured. That suggests the drop in satisfaction for the insured under a U.S. health care reform initiative could be much greater than the increase in satisfaction for the newly insured Americans. **R**

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