

Free Market Health Care: True Stories

By [Michael Parenti](#)

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I recently wrote an article about my personal experiences in dealing with the medical system while undergoing surgery (“Free Market Medicine: A Personal Account”). In response, a number of readers sent me accounts of their own experiences trying to get well in America.

Health care in this country is hailed by conservative boosters as “the best medical system in the world.” It certainly is the most expensive, most profitable, and most complicated system in the world, leaving millions of Americans in shock. None of the people who wrote to me had anything positive to say about the U.S. health system. Below are some of the responses to my article. (Several of the senders requested that their real names not be used).

~ This first email, in a few words, contains one of the more familiar stories:

“In the mid-90s I had an attack of sciatica while visiting my wife’s daughter in the Bay Area. I went to Alta Bates Emergency. After I waited three hours, a doctor stopped by, saw me for two minutes, gave me a pain prescription & sent me home.

“ Total bill was over \$1,000.”

—John Steinbach

~ Price gouging is the name of the game:

“I had a kidney stone which was causing me great pain. I drove myself to the emergency ward where I was told the kidney stone was so large that it had to be ‘shattered.’ I spent one night in the hospital. The operation was performed early the next morning. My family had to come pick me up which they did by noon that same day. I wasn’t even in the hospital for 24 hours. Imagine my shock when the bill came. It was \$57,000, not including the doctor’s bill! I actually thought it was a typo. I thought they had put the comma in the wrong place.

“Blue Cross paid it, except for \$2,500 which I had to pay. Then Blue Cross promptly dumped me.”

—Angel Ewing

~ In my original article, I did not have much to say about pharmaceutical costs, but this next reader does:

“Medicare cannot negotiate drug prices, which means that the one Rx I take costs over \$700 every three months, of which I pay \$90 until I reach the ‘doughnut hole,’ which happens

with just this one drug. When I first started on this medication, the cost was about \$350, so it has doubled in just three years. No improvements, it's the same exact drug and there are no generics. The only change is the higher price!

“ Speaking of higher prices, I just renewed my prescription and the three month cost has increased again, from \$718 to \$781. My doctor at Kaiser said that should I get into the ‘doughnut hole’ she would give me a prescription I can use at a Canadian pharmacy. It’s crazy that even with a drug coverage plan, I’ll eventually have to buy from a Canadian pharmacy!”

—Joan Leslie Taylor

~ Another subject deserving of more attention, iatrogenic disaster:

“The U.S. medical/hospital/industrial system as it has developed is horrifying to me. I went through the hospital and nursing home process with my late parents in the 90s up through 2000 when my mother died from an infection from an antibiotic resistant strain of bacteria, Mercer, caught in the hospital.

“At least you were not subject to staying overnight and having to endure a hospital food system which is criminally poor in nutritional value. . . . Plus the added risk of infection.”

—Dennis Goldstein

~ Here is another reported tragic mishap:

“When the nurses went on strike at Alta Bates, a friend of mine was being treated for her uterine cancer, which was finally in remission. The replacement nurse misdiagnosed the treatment and connected a tube in an erroneous way. My friend tragically died from the mishap. Such a sweet, wonderful person taken by medical error.

“So, my friend, you were basically lucky that you got out with your life. [My wife] recently had a small procedure and she is still getting bills from the treatment - six months later. In other words, you are right, be prepared for the other shoe to drop.”

—Roberto Ronaldi

~ Medical care in America for the longest time has been all about owing, billing, and paying. This letter deals with events from fifteen years ago. (The writer is herself an M.D. who is on disability):

“I have had my own disastrous hospitalization. In 1997, I had private insurance that left a lot unpaid. The hospital ate some of the uncovered costs as a one time only concession, but the “extras” (anesthesiologist, radiologists, etc.) insisted on full payment. I went over the supplies billing and was shocked at the repetitions and also waste. . . .

“ At that time almost all my income from Workman’s Comp went to pay my insurance coverage. Within a couple of years I was unable to continue to afford being insured due to pre-existing conditions.

“The whole thing was so traumatic, I couldn’t even write about it, though I wanted to! And I

signed myself out a day early because I felt unsafe due to the many errors of omission or neglect made in my 3 days there.

“A problem which I could not prove was surgical or due to post-op neglect left me with one-and-a-half years of rehab, a limp, and continued hip pain which, by the way, was not the area that was to be addressed by the surgery- it was my neck! But they took some bone from my hip to fix the neck... and apparently, the hip ended up being less well connected to the rest of me afterwards. And that was Free Market Medicine and Worker’s protection health benefits 15 years ago.”

—Deb Rosen

~ Among the hardest hit are the homeless. Here is a report from the field, from someone who works for Task Force for the Homeless:

“Every day we ‘house’ 500-700 homeless Atlantans [Georgia], who are men, mostly. We distribute mail daily as well, and the bulk of the mail is hospital bills from our former ‘charity’ hospital which is now a private hospital. Homeless men who owe that hospital for treatment are often denied jobs and housing because of their credit problems. We are in the process of fighting those bills. All too often, our friends don’t even seek treatment because they know they cannot pay. The prescriptions at that same hospital cost \$10 each, and so people who take more than one medication often go without, as in the case of one man who has heart failure [and needed] life-saving medication.”

—Anita Beaty

~ A reader offers a look at the Swiss system:

“Last year I had four eye surgeries and breast cancer and the maximum I paid was 7000 CHF for it all. I had to fight to get out of the hospital after five days because they wanted to make absolutely sure I had no problem with drainage. I was able to walk out (no wheelchairs). A portion of my insurance payment does go to cover people who can’t afford insurance. I’m fine with that.

“I had a team that still keeps tabs on me and a lead nurse who is there 24/7 (she does have off time with a substitute who is there for whatever I need.).

“No way would I ever live in the US again. It’s too cruel. I do carry insurance that if I were in the US and I get sick, I get air ‘freighted’ back to a civilized society.”

—Dora Philips

~ From a friend in Canada:

“I am just appalled reading your account—although our Conservative government is trying very hard to destroy our cherished health care system these days. But to give you a personal example, my husband just had a total hip replacement and is due for another one this summer. Five years ago he had a serious bowel operation which required a nine day stay at the hospital.

“ NO bills were sent to us for either of these operations. It is all included in our health care system OHIP for Ontario. Ontario Health Insurance Plan.

“The only cost this time is for buying a commode chair, a bath bench and a walker (which we could have rented). And we will be able to deduct these expenses on our income taxes. We also have a \$100.00 deductible yearly for our medications so it cost us about \$6 to \$8 for each prescription.

—Madeleine Gilchrist

~ From another friend in Canada; after giving a detailed account of the excellent free treatment accorded her mother, she added:

“Far too many Americans accept an utterly depraved and bizarre system of health-care-for-profit. The health system in the USA is an aberration. Many Americans have been led to think that we Canadians pay a fortune for our health care in taxes. But Americans already pay more per capita in taxes for health care (that most of you don’t receive) than do Canadians. We get full, FREE coverage, no questions asked.

“Our system is under attack by the Conservatives. But so far, only free prescription drugs have been taken away from my Mum’s coverage. She now pays about 20% of the cost of her heart medications. Until about a decade ago they were totally free of charge.

“Meanwhile, my fellow Canadians are being lied to, and many are being hoodwinked. They look at the TV commercials for American for-profit health care, and listen to Fox television and its Canadian counterpart, Sun television, and the ranting of Prime Minister Steven Harper, and conclude that we have an inferior system.”

—Amanda Bellerby

~ These observations from a friend in England:

“I just read your article – a lot of it left me speechless. Some I am not surprised by; my friends in California have told me about their own horror stories when it comes to accessing health care. The National Health Service [in the U.K.] is far from perfect but we had peace of mind when a family friend had surgery recently and was taken to and from the hospital by mini-bus—so different from your experience. . . .

I noticed when interviewing some of my refugee/asylum seeking clients that a huge percentage of them are given anti-depressants. Doctors readily hand out prescription drugs rather than referring to other services (which are more costly). I can now easily spot when someone is taking them as their memory is often bad and they have delayed responses to my questions. One man I was talking to the other day from Zimbabwe has been taking anti-depressants for seven years and was prescribed them after just one meeting with his doctor. We used to have an NHS service in Nottingham where I live called Health In Mind who were great with supporting refugees suffering post-traumatic stress, but it’s been scrapped now. Companies who supply anti-depressants must be making a fortune here.

—Sharon Walia

In sum, readers found the conditions I described in my earlier article to be quite unsettling. But the above comments indicate that many people in the USA have a story of their own to tell about the heartless medical industry. And people abroad make clear to us that their “socialized” medical systems are more humane and less cruel than ours—even if they too sometimes suffer from faulty practices.

The corporate goal in the United States and elsewhere is to treat medical care not as a human right but as a market-determined profit-driven service. We should unequivocally demand socialized medicine, that is, a publicly funded and publicly administered system whose purpose is human care rather than profit accumulation. It will cost so much less and serve us so much better.

Michael Parenti's most recent book is *The Face of Imperialism* (2011). For more information about his work, see his website: www.michaelparenti.org , and the Michael Parenti Blog.

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