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1. Structure of the government and the policy development process
2. Processes involved in establishing federal healthcare policies
3. The organization of the public healthcare subsystem at the state, and local levels
4. Factors that influence the cost of medical care

Political regime United States: The United States is a federal presidential republic. The Federal Parliament is formed by the House of Representatives (435), whose members are appointed for a period of 2 years, and the Senate (100 senators elected for six years), which are renewed by thirds every two years. The Federal Republic is made up of 50 states, plus the District of Columbia, and includes a series of territorial units in the Pacific Ocean and the West Indies, as well as the Commonwealth of Puerto Rico (Irani, 2018) .

Public policies are specific solutions for how to handle public affairs. They part with the public agenda. They are usually a second-best regarding an optimal strategy in the substantive. Development policies (public policies) allow guiding the management of a government to achieve its objectives (Irani, 2018).

It is possible to differentiate between types of policies, those that achieve their ends through public services (and require substantial bureaucratic resources in terms of people and money) and those that make their ends through regulation and the tax system and require fewer means (Irani, 2018).

The establishing of public policies begins with problem identification, definition of relevant objectives and goals; Search for alternatives: examine all alternative solutions for achievement of goals and analyze all possible consequences for each alternative of policy with its probability of occurrence; Compare alternatives with previously defined objectives and goals and choose solution whose results provide greater scope of objectives, greater benefits with equal costs or lower costs with equal benefits; Definition, evaluation, approval or rejection of policy options; A process of technical-political articulation (desirable and possible) of a character competitive; discussion and interaction stage with relevant actors; Selection of a solution to the problem: design of public policy; And resource allocation ( ).

The American health system is one of the most advanced in the world in terms of dispersion, technology and vocational training. We can find clinics and hospitals everywhere, even in rural areas and more remote areas of the country. Most of these hospitals are private, although it has subsidies from local and state governments. In other cases they appear as "non-profit associations", despite being affiliated with large medical corporations. The health centers have high-tech equipment, medicines and professional staff with high levels of training. US system as the 1st in response capacity, but 37th in global response. In 2014, three times more money was invested in biomedical research than any country (Apostle, 2017).

The United States health system is mixed, with public and private health insurance. What sets it apart is the predominance of the private sector over the public and the lack of universal health coverage. In 2016, 49% of the US population received private medical insurance through their employer, 5% had independent health insurance, 13% were covered under the Medicare program, 18% under Medicaid and 16 % did not have any health insurance, leaving 50 million people without coverage. Given the high health costs in the United States, most people without coverage cannot afford the most expensive treatments, so they must do without putting their lives and well-being at risk, or having access to other forms of care (self-medication, curanderismo, professionals without a license) (Apostle, 2017).

Having more money does not automatically produce more and better health for everyone. The gap between resources and results lies in the way in which the former must become the latter. Behind this possible failure, many causes appear, which cannot be resolved by increasing expenses but require finding the points where things are not being done as they should (Apostle, 2017) .

The real thing is that health costs and their growth, have a multicausal origin, like any health problem, which manifests itself in different ways and different combinations, depending on the country, the time, the epidemiological situation, health policies or economic development. It must be understood then that the same cause maybe just in a particular situation and the other quite the opposite. It is reasonable if it is about constructing health policies, reformulating the health model, reorganizing care, reducing costs or facing crisis problems, it is not about going directly to expand or minimize budgets but identify what the most significant causes are, what they represent and that contribute or not to the objectives that are intended (Apostle, 2017).

**References**

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