## T02P02 / Comparing Different Models of the Public/Private Sector Mix in the Delivery of Healthcare Services

Topic: T02 / Comparative Public Policy sponsored by Journal of Comparative Policy Analysis

Chair: Howard Palley (Sch., of Social Wk, University of Maryland)

## GENERAL OBJECTIVES, RESEARCH QUESTIONS AND SCIENTIFIC RELEVANCE

This panel examines how different models of the public/private sector financing affects the delivery of healthcare service outcomes in different developed nations. For example, the U.S. complex mix of about 50% public and 50% private financing has contributed to the highly fragmented character of healthcare services that serve different population groups. The Canadian model of about 70% public and 30% private financing sometimes labeled "narrow but deep" results in universal access without financial barriers to hosFpital care and ambulatory medical services but greater variation in coverage at the provincial/territorial level for prescription drugs and other long-term healthcare delivery services. The Swiss model of mandated but individual choice of basic health insurance has also resulted in extensive regulated services and some variation in access across Cantons. The Japanese model includes universal insurance for medical and hospital services that is provided by public and private hospitals and physician care in many small physician run clinics. The italian model of overall universal health insurance administered at the regional level includes a significant degree of "contracting out" of delivery of services. In France universal coverage goes hand in hand with significant private options in a complex system. This panel examines how different models, of which I have provided some examples, with a variety of public/private financing arrangements affect the quality of healthcare services and the achievement of social equity.

#### **CALL FOR PAPERS**

The healthcare systems of various nations all utilize a mix of governmental and private services. This mix differs from nation to nation and is related to institutional development, ideology and culture, politics and the disposition to act of political leadership, as well as funding arrangements. This mix encompasses predominantly tax-funded national healthcare delivery systems and social insurance systems. Often in such systems low-income groups lag in healthcare due to a multiplicity of factors that may include social determinants of health as well as the lack of availability of quality healthcare services. A key hypothesis of this session is that different national models of healthcare delivery will produce different outcomes with regard to the delivery of quality health care services and result in differences regarding the achievement of social equity in health care delivery. A second hypothesis is that a vigorous public regulatory framework conscientiously implemented can result in a public/private sector mix which provides a broad base of quality health services in an equitable manner. Various papers are invited that examine national health delivery systems with respect the model of the public/private sector mix developed and which relate to the hypotheses noted.

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#### Session 1 The Public/Private Sector Mix in Health Care Delivery: A Variety of Models

Friday, June 30th 10:30 to 12:30 (Manasseh Meyer MM 2 - 3)

#### **Discussants**

Marian Palley (University of Delaware)

### Hierarchy, market or network? Analysing governance of the Japanese mixed health care delivery

Ryozo Matsuda (Ritsumeikan University)

### How Public/Private Mix in Health Care Financing and Delivery Shape a Health System Structure and Outcomes: a Case of Russia

Tatiana Chubarova (Institute of Economy, Russian Academy of Sciences)

Natalia Grigorieva (Lomonosov Moscow State University)

#### Health policy Chile: Ten years after the reform

Oriana Piffre (Universidad Central de Chile)

## Public – private mix in the Brazilian health system: regulation, financing, and interests compromising equity

lenaura lobato (Fluminense Federal University)

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Session 2 Some Comparative Analyses of the Public/Private Sector Mix in a Variety of Health Care Services

Friday, June 30th 13:45 to 15:45 (Manasseh Meyer MM 2 - 3)

#### **Discussants**

Howard Palley (Sch, of Social Wk, University of Maryland)

#### The safeguard of public values and governance structures in health care

Salvador Parrado (UNED- Spanish Distance Learning University)

Anne-Marie Reynaers (Autonomous University Madrid)

#### Regulating Dual Practice in Israel and Canada: A Comparative Policy Analysis

Gregory Marchildon (Institute of Health Policy, Management and Evaluation, University of Toronto)

### Conceptualizing oral health care systems for comparative analysis – public, private and statutory

Carmen Huckel Schneider (University of Sydney)

Joerg Eberhard (University of Sydney)

Kate Ruiz (University of Sydney)