

A Healthcare Tale of Two Countries

I spent six weeks in France early this summer with my daughter and her children so that my granddaughter, age five, could attend a French preschool to learn French.

Before we left California, my granddaughter had been battling a bad cough and runny nose for weeks. But Kaiser kept telling my daughter, “It’s a virus and we can’t treat it – you have to let it run its course.”

After a few days at her French school, the teacher called and said she was sending my granddaughter home because she was not well. We asked for the phone number of a doctor and she recommended one whose office, it turned out, we could see from our apartment balcony. It was just steps away. Friends also gave us several phone numbers of their doctors. It appears that there is a general practitioner in every neighborhood.

We obtained an appointment for the same day. She came home from school at 10 a.m., and at 12:30 we were at the doctor’s office. The doctor was part of a private practice of four doctors. He examined my granddaughter carefully, looked in her ears, nose, and throat and listened to her chest with a stethoscope while she took some deep breaths. Then he announced that she had bronchitis, an ear infection in both ears, and an infected throat.

So much for “Untreatable, let it run its course”!

The doctor prescribed amoxicillin, some cough syrup, nasal spray, allergy medication (he believed the origin of the infection was allergy-caused mucus that got infected) and aspirin. We were paying out of pocket since I haven’t lived in France for 25 years and am probably no longer in the system. The doctor’s visit cost 30 Euros (\$32.50)—about the same as my Kaiser copay. The cost for all the medicine at the pharmacy was 17 Euros (\$18.50), for a total cost of \$51.

A couple of days later, my granddaughter felt much better and a week later she was fine.

I have been reading articles calling France a “multi-payer” system, so I cleared that up while I was there as well. It is basically single payer, with most of the medical costs covered by Social Security. Depending on the type of care, Social Security covers 70% to 100% of the bill. For example, a doctor’s visit is covered at 70% in most of France. (Where we were in Lorraine, it is covered at 90% because that region once belonged to Germany.). Thus, with Social Security coverage, the cost for my granddaughter, had we been covered, would have been \$5.10.

The change that has occurred is that since 2016 the supplemental private (non-profit) insurance is no longer optional, but mandatory. For about \$25 - \$150/month (supplemental insurance prices vary according to one’s age and the quality of the insurance), it covers the portion of one’s bill not covered by Social Security (e.g. the remaining \$5.10 of my bill). So that is why journalists are calling it “multi-payer”. The government covers the cost of supplemental insurance for low-income people, including low-income seniors.

Once back in the U.S., I met with a French friend who lives in Sacramento. She is a retired attorney and can afford great health insurance. As a foreigner, she is probably unaware that in the U.S. the quality of care depends on how wealthy a person is. She claims that the French healthcare system has problems and that there are “medical deserts” all over France. She even sent me a French article to prove her point. The article talked about the “worrisome problem” of medical deserts in France where people have no access to care. It said 8% of the population lived in such a region and 0.5% of the population had no access to care.

That’s one-half of one percent of the population without access to care in France.

So I looked up the statistics for this country. I found that 80% of the counties in the U.S. lack adequate healthcare infrastructure in some shape or form, and that:

37% of the population live in a [healthcare desert county](#).

Almost 30 million Americans are [uninsured](#).

43% of working-age adults are [underinsured](#).

About half of U.S. adults say they have difficulty [affording health care costs](#).

66.5% of [bankruptcies](#) in the US are caused directly by medical expenses.

So tell me, which system would you prefer?