



جامعة المستقبل  
AL MUSTAQBAL UNIVERSITY

## كلية العلوم قسم الانظمة الطبية الذكية

### Lecture: ( 4 )

### Healthcare Systems Administration

**Subject: Healthcare Systems Administration I**

**Level: Fourth**

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## **Introduction**

Healthcare administration involves managing the operation, policy, and economics of healthcare systems. Understanding how healthcare systems function, their challenges, and global comparisons is crucial for improving care delivery and efficiency. This lecture explores the U.S. healthcare safety net, healthcare quality and efficiency, and global healthcare data comparisons using OECD research and other sources.

## **U.S. Healthcare Safety Net**

The U.S. healthcare safety net comprises a network of providers offering medical services to individuals without sufficient insurance coverage. These providers ensure access to essential health services regardless of a patient's financial or insurance status. Key programs include Medicaid and community-based care centers.

Medicaid, jointly funded by federal and state governments, provides insurance to individuals and families with low income. Each state administers its Medicaid program under federal guidelines, allowing flexibility in eligibility and services.

### **Major safety net providers include:**

1. Retail clinics
2. Rural health centers (public, private, or non-profit)
3. State health agencies (e.g., loan repayment programs for physicians)
4. School-based clinics
5. Specialty service providers (e.g., HIV/AIDS programs)
6. Community and migrant health centers
7. Federally Qualified Health Centers (FQHCs)



8. Disproportionate Share Hospitals (DSHs)

9. Teaching hospitals

10. Private physicians and volunteers.

**Example:** Community health centers play a key role in providing preventive and primary care to underserved populations. According to HRSA (2023), over 30 million Americans received care from FQHCs, demonstrating their critical role in the U.S. healthcare infrastructure.

### **Healthcare Quality & Efficiency in the U.S.**

Healthcare quality refers to the degree to which healthcare services increase the likelihood of desired health outcomes consistent with current professional knowledge (AHRQ, 2022). Efficiency, on the other hand, reflects the optimal use of resources to maximize health outcomes while minimizing costs.

The U.S. healthcare system is known for its technological advancement and specialized care, but it faces challenges in cost management and equitable access. High costs often do not directly translate into superior health outcomes compared to other developed nations.

Consequences of poor efficiency include:

- High expenditure without proportional improvement in outcomes
- Resource strain on hospitals and clinics
- Imbalanced supply and demand of healthcare services
- Limited access to essential goods and services for low-income populations

**Example:** Despite spending over 17% of GDP on healthcare (OECD, 2023), the U.S. ranks below several nations in life expectancy, infant mortality, and preventable diseases.



### 3. Global Healthcare Data Sources

Global health data from organizations like the OECD, WHO, and World Bank provide valuable insights into healthcare system performance across countries. These databases track metrics such as spending, life expectancy, hospital efficiency, and patient satisfaction.

According to the OECD Health Statistics (2023), the United States allocates about 17% of its GDP to healthcare, nearly double the average of other high-income countries. Switzerland, Germany, and France follow with expenditures between 11% and 12%. However, this higher spending does not always correlate with better outcomes.

**Example:** In 2019, the U.S. had the highest healthcare expenditure per capita (\$10,637), yet life expectancy remained lower than in countries like Japan (84.5 years) and Switzerland (83.8 years).

### **Healthcare Rankings and Outcomes**

The OECD 2023 report highlights that while the U.S. leads in innovation, it lags behind in population health outcomes. Obesity rates exceed 40%, and chronic diseases such as diabetes and heart disease remain major contributors to mortality.

In contrast, countries with universal healthcare systems—like Norway, France, and Australia—demonstrate better overall outcomes and longer life expectancies. These systems often emphasize preventive care, early detection, and equal access for all citizens.



### **Administrative Costs and Reform Needs**

Administrative complexity contributes significantly to U.S. healthcare costs. A multi-payer system requires extensive billing, insurance verification, and regulatory compliance, which inflates administrative expenses.

Harvard economist David Cutler (2021) notes that administrative costs in the U.S. are among the highest globally—nearly twice that of single-payer systems such as Canada's. Streamlining administrative processes could free resources for direct patient care.