

Health: The Basics, 12e (Donatelle)

Chapter 16 Making Smart Health Care Choices

1) Taking responsibility for your health care includes all of the following EXCEPT

- A) learning how to navigate the health care system.
- B) using over-the-counter medications to treat a sudden, serious illness.
- C) being knowledgeable about the benefits and limits of self-care.
- D) learning when to seek medical attention.

Answer: B

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

2) Self-care involves all of the following EXCEPT

- A) knowing your body.
- B) paying attention to body signals.
- C) taking appropriate action to stop the progression of illness.
- D) avoiding medication and taking a "tough it out" approach to illness.

Answer: D

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

3) Communication with health care providers can be improved by all of the following EXCEPT

- A) knowing your family history.
- B) relying on your health care provider for all information on health care issues.
- C) writing down information so that you remember it accurately.
- D) seeking a second opinion when you have doubts about the provider's recommendations.

Answer: B

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

4) The primary difference between a board certified and board eligible physician is that a board

- A) certified physician has demonstrated competency in a given specialty.
- B) eligible physician practices alternative medicine.
- C) eligible physician has failed the board exam.
- D) certified physician is associated with an accredited health care facility.

Answer: A

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 5) In a clinical trial for a new pain medication, Hayden was given an inactive substance instead of an actual drug. After taking it, however, his headache improved. This resulted from the
- A) analgesic effect.
 - B) placebo effect.
 - C) ingredients in the inactive pills.
 - D) passage of time.

Answer: B

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 6) Self-care can include
- A) diagnosing acute symptoms.
 - B) treating infections.
 - C) checking your blood pressure.
 - D) self-diagnosing cancer.

Answer: C

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 7) You should seek expert medical care if you experience
- A) unexplained sudden weight loss.
 - B) a bout of diarrhea.
 - C) dizziness upon standing.
 - D) a runny nose.

Answer: A

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 8) Which of the following symptoms probably does NOT warrant professional medical advice?
- A) You notice that your lips are bluish in color.
 - B) You get a tingling sensation in your arm and your speech is slurred.
 - C) You develop a low-grade fever and sore throat.
 - D) Your throat is swelling after taking a new medication.

Answer: C

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 9) You should consult a physician
A) to check blood pressure and temperature.
B) to learn new relaxation techniques.
C) to treat a reaction to an insect bite.
D) if you vomit after dining out.

Answer: C

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 10) When choosing a health care provider, you should examine all of the following EXCEPT
A) their educational training.
B) their affiliations with accredited medical facilities.
C) how their methods of treatment compare to established medical practices.
D) their membership in local organizations such as country clubs or service clubs.

Answer: D

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 11) Your mom's doctor works at a hospital accredited by the Joint Commission. This type of accreditation indicates that
A) only specialists can practice there.
B) all practitioner education, licensing, and training qualifications have been verified.
C) all physicians must be trained in both traditional and alternative medicine.
D) only generalists can practice there.

Answer: B

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 12) Conventional Western medical practice is known as
A) naturopathic medicine.
B) allopathic medicine.
C) holistic medicine.
D) homeopathic medicine.

Answer: B

Diff: 1

Skill: Remembering

Section: Conventional Health Care

Learning Outcome: 16.2

- 13) All of the following statements are true about traditional Western medical practice EXCEPT
- A) all treatments have had the benefit of extensive clinical trials.
 - B) practitioners complete rigorous education and clinical training programs.
 - C) it can be practiced by a wide range of specialists and health professionals.
 - D) treatments may change dramatically as new advances replace older practices.

Answer: A

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

- 14) Which of the following health professionals is least likely to be a primary health care provider?

- A) allergist
- B) internist
- C) pediatrician
- D) obstetrician-gynecologist

Answer: A

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

- 15) Due to the differences in training, an osteopathic physician would probably have more experience dealing with which condition than a medical doctor?

- A) low back pain
- B) heart disease
- C) cancer
- D) kidney failure

Answer: A

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

- 16) Your primary care provider suspects that you may have an unusual infection in your eyes. To whom would he or she refer you?

- A) physician assistant
- B) optician
- C) optometrist
- D) ophthalmologist

Answer: D

Diff: 3

Skill: Applying

Section: Conventional Health Care

Learning Outcome: 16.2

17) Treating a minor health problem yourself without seeking professional help is

- A) urgent care.
- B) emergency care.
- C) self-care.
- D) non-urgent care.

Answer: C

Diff: 1

Skill: Remembering

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

18) An optometrist

- A) treats skeletal and muscular problems.
- B) prescribes medications to treat eye illnesses.
- C) fits individuals for prosthetic limbs.
- D) performs eye exams and prescribes and fits lenses.

Answer: D

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

19) The primary care practitioner in your school's health clinic has a master's degree and is authorized to perform exams, conduct diagnostic tests, and in some states may also prescribe medications. He is a

- A) nurse practitioner.
- B) vocational nurse.
- C) licensed practical nurse.
- D) registered nurse.

Answer: A

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

20) Before receiving any care, patients must be made aware of the treatment plan and any potential risks involved. This is known as the right

- A) of informed consent.
- B) to receive care.
- C) to privacy.
- D) to access medical records.

Answer: A

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

21) Physician assistants

- A) are competently able to treat 100 percent of those seeking primary care.
- B) can provide treatment and write prescriptions when supervised by a physician.
- C) are not licensed by state boards of medicine.
- D) are the same as physicians, but with fewer years of experience.

Answer: B

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

22) Of the following types of health care expenditures, the United States spends the most on

- A) health insurance.
- B) government administration and research.
- C) drugs and medical products.
- D) hospital care.

Answer: D

Diff: 2

Skill: Understanding

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

23) By the year 2013, what percentage of gross domestic product (GDP) will the United States be spending on health care?

- A) nearly 5 percent
- B) nearly 10 percent
- C) nearly 20 percent
- D) nearly 30 percent

Answer: C

Diff: 1

Skill: Remembering

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

24) The 2010 Affordable Care Act (ACA) was designed to do all of the following EXCEPT

- A) deny health care coverage to those with preexisting conditions.
- B) improve the overall quality of health care.
- C) address the cost of health care.
- D) improve access to health care.

Answer: A

Diff: 2

Skill: Understanding

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

- 25) The term *defensive medicine* refers to actions taken to
- A) avoid malpractice claims.
 - B) protect against infectious disease.
 - C) slow the progress of chronic diseases.
 - D) ensure that patients are informed about medical choices.

Answer: A

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

- 26) Over-the-counter drugs are commonly used for all of the following EXCEPT
- A) allergies.
 - B) weight loss.
 - C) sleep problems.
 - D) diabetes.

Answer: D

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

- 27) All of the following are true with respect to generic drugs EXCEPT that they
- A) contain the same active ingredients as their brand name counterpart.
 - B) are generally less expensive than brand name drugs.
 - C) have the same inactive ingredients as their brand name counterpart.
 - D) are sold under a chemical name instead of a brand name.

Answer: C

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

- 28) The legal term for improper or negligent treatment of a patient by a health care provider that results in loss or harm to the patient is
- A) incompetence.
 - B) malpractice.
 - C) malfunction.
 - D) abandonment.

Answer: B

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

29) Originally health insurance only covered major medical expenses. What effect did this type of coverage have on the medical system?

- A) It helped contain costs.
- B) It encouraged patients to improve their lifestyle choices to prevent disease.
- C) It encouraged doctors to provide more medical procedures for patients.
- D) It discouraged hospitals from investing in expensive medical equipment and facilities.

Answer: C

Diff: 4

Skill: Analyzing

Section: Health Insurance

Learning Outcome: 16.3

30) In a 2014 survey, approximately what percentage of college students said they had no health insurance?

- A) 5 percent
- B) 10 percent
- C) 15 percent
- D) 20 percent

Answer: A

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

31) Approximately how many Americans have no health insurance?

- A) 5 million
- B) 15 million
- C) 25 million
- D) 35 million

Answer: C

Diff: 1

Skill: Remembering

Section: Health Insurance

Learning Outcome: 16.3

32) Which of the following is TRUE with respect to health care spending accounts (FSAs or HSAs)?

- A) They provide affordable health care coverage.
- B) They are only available to low-income individuals.
- C) They allow people to save money tax-free for health care costs.
- D) They provide funds that help employers finance company health plans.

Answer: C

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

33) Most private health insurance plans require the patient to pay a certain amount each year toward health care expenses before the plan benefits begin; this amount is the

- A) copayment.
- B) coinsurance.
- C) deductible.
- D) premium.

Answer: C

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

34) A set fee that an insurance plan requires that patients pay at the time of service (per office visit or prescription) is the

- A) coinsurance.
- B) copayment.
- C) deductible.
- D) premium.

Answer: B

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

35) If an insurance policy covers 90 percent of your total medical bills, the remaining 10 percent that you must pay is your

- A) coinsurance amount.
- B) copayment amount.
- C) deductible amount.
- D) premium amount.

Answer: A

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

36) Before the Affordable Care Act, if you had a history of back problems and needed health insurance, it was unlikely that your new insurance plan would cover any treatment related to your back problems until the policy had been in effect for a period of time. Your back problem was considered a(n)

- A) prior diagnosis.
- B) preexisting condition.
- C) lifestyle risk.
- D) untreatable condition.

Answer: B

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

37) A 70-year-old retired person would be eligible for health insurance coverage through

- A) COBRA.
- B) Medicaid.
- C) Medicare.
- D) Social Security.

Answer: C

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

38) Your father was laid off six months ago but recently started a new job. He was able to keep his health insurance during the transition through

- A) COBRA.
- B) Medicaid.
- C) Medicare.
- D) Social Security.

Answer: A

Diff: 3

Skill: Applying

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

39) Capitation refers to

A) payment of a fixed monthly amount to a health-care provider per enrolled patient, regardless of the type or number of services provided.

B) a one-time fee that is paid to health care providers from insurance companies if the patient enrolls in an HMO.

C) care received from salaried practitioners at a specific health care facility, such as a hospital or clinic.

D) administrators and stockholders in a proprietary hospital determining the fee schedule for a given fiscal year.

Answer: A

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

40) Drugs that can be purchased without a prescription as part of self-care are

A) over-the-counter drugs.

B) generic drugs.

C) brand-name drugs.

D) formulary drugs.

Answer: A

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

41) If you have moved to a new town and want to find a physician you can see for annual wellness exams and the treatment of routine ailments, you are seeking a(n)

A) in-network practitioner.

B) allopathic practitioner.

C) internal medicine practitioner.

D) primary care practitioner.

Answer: D

Diff: 3

Skill: Applying

Section: Conventional Health Care

Learning Outcome: 16.2

42) Concerns about HMOs include all of the following EXCEPT

- A) questions about care allocation.
- B) profit-motivated medical decision making.
- C) the high cost of copayments.
- D) questions about access to services.

Answer: C

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

43) What do preferred provider organizations (PPOs) and point of service (POS) plans have in common?

- A) Both provide service from in-network medical providers.
- B) Both are designed to coordinate a patient's care across various providers.
- C) Both provide care from networks of independent doctors and hospitals.
- D) Both allow patients to seek outside care but require patients to pay the extra cost.

Answer: D

Diff: 4

Skill: Analyzing

Section: Health Insurance

Learning Outcome: 16.3

44) The federally funded health insurance program that covers 99 percent of the U.S. population age 65 and older is

- A) Medicare.
- B) Medicaid.
- C) Social Security.
- D) COBRA.

Answer: A

Diff: 1

Skill: Remembering

Section: Health Insurance

Learning Outcome: 16.3

45) If your PPO has an in-network coverage rate of 90 percent and an out-of-network coverage rate of 60 percent, this means that

- A) your deductible will decrease by 30 percent if you visit an out-of-network specialist.
- B) you will be responsible for paying 40 percent of the costs associated with out-of-network services.
- C) you are more likely to be denied coverage for out-of-network services.
- D) you can expect to pay 60 percent of costs for out-of-network services.

Answer: B

Diff: 3

Skill: Applying

Section: Health Insurance

Learning Outcome: 16.3

46) If you are concerned about the costs of health care, which of the following practices should you avoid?

- A) obtaining recommended health screenings
- B) maintaining a healthy weight
- C) exercising regularly
- D) using the emergency room for your routine health care

Answer: D

Diff: 3

Skill: Applying

Section: Health Insurance

Learning Outcome: 16.3

47) All of the following are provisions of the Affordable Care Act (ACA) EXCEPT coverage for

- A) preventive services.
- B) preexisting conditions.
- C) prescription medications.
- D) young adults on a parent's plan through age 30.

Answer: D

Diff: 2

Skill: Understanding

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

48) The ACA is intended to improve the quality of health care by emphasizing

- A) emergency care.
- B) surgical care.
- C) preventative care.
- D) rationed care.

Answer: C

Diff: 2

Skill: Understanding

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

49) Which of the following statements is NOT true about costs in the U.S. health care system?

- A) The U.S. spends more on health care than any other nation.
- B) Growing rates of obesity are pushing costs higher.
- C) New technologies are lowering costs.
- D) Overtreatment is an issue.

Answer: C

Diff: 2

Skill: Understanding

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

50) The health insurance program jointly funded by the states and the federal government that provides coverage for low-income individuals and families is

- A) Medicare.
- B) Medicaid.
- C) Social Security.
- D) COBRA.

Answer: B

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

51) Managed care is based on

- A) coordination of health care.
- B) doctors setting their own rates.
- C) few administrative rules.
- D) emergency health care.

Answer: A

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

52) One of the advantages of a single-payer health care system is that it

- A) can achieve lower cost through economies of scale.
- B) provides a higher quality of health care.
- C) rations health care services.
- D) encourages people to commit to lifestyle choices that reduce their risk for chronic diseases.

Answer: A

Diff: 2

Skill: Understanding

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

53) Categories established by the federal government to determine how much a hospital will be reimbursed for the care of a patient with a particular condition or multiple conditions are

- A) diagnosis-related groups.
- B) fee schedules.
- C) formulary tiers.
- D) diagnostic codes.

Answer: A

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

54) Which type of health insurance plan involves a contracted provider network and a focus on preventive care and cost control?

- A) fee-for-service
- B) managed care
- C) indemnity
- D) hospital-owned

Answer: B

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

55) A payment made to an insurance company, usually on a monthly basis, to cover the cost of an insurance policy is the

- A) deductible.
- B) premium.
- C) waiting period.
- D) lifetime limit.

Answer: B

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

56) Medical decision making based on clinical expertise, patient values, and data from scientific research is known as

- A) allopathic medicine.
- B) evidence-based practice.
- C) conventional medical care.
- D) primary practice.

Answer: B

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

57) Approximately what percentage of Americans currently uses one or more prescription drugs?

- A) nearly 10 percent
- B) nearly 40 percent
- C) nearly 70 percent
- D) nearly 90 percent

Answer: C

Diff: 1

Skill: Remembering

Section: Conventional Health Care

Learning Outcome: 16.2

58) The placebo effect is the disappearance of symptoms without any apparent reason or treatment.

Answer: FALSE

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

59) All patients have the legal right to access their medical records.

Answer: TRUE

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

60) An osteopath (D.O) does not complete the same level of training as a physician who is an M.D.

Answer: FALSE

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

61) Regular self-care should include learning about health from reliable health care publications, including websites.

Answer: TRUE

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

62) Allopathic medicine is based on scientifically validated methods and procedures.

Answer: TRUE

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

63) An optometrist holds a medical degree and can perform eye surgery.

Answer: FALSE

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

64) Requesting an x-ray when it is unnecessary but the patient demands it would be considered defensive medicine.

Answer: TRUE

Diff: 2

Skill: Understanding

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

65) A patient is entitled to know whether a recommended treatment is established practice or experimental.

Answer: TRUE

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

66) The labels of over-the-counter medications are not required to identify the purpose of the drug or the active ingredient.

Answer: FALSE

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

67) Cost sharing is one of the mechanisms private health care insurers use to help patients afford coverage.

Answer: FALSE

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

68) Health insurance is based on the idea that policyholders pay affordable premiums so they never have to face catastrophic medical bills.

Answer: TRUE

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

69) Under the Affordable Care Act (ACA), a person can be denied health coverage for a preexisting condition.

Answer: FALSE

Diff: 2

Skill: Understanding

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

70) All physicians must accept Medicare patients.

Answer: FALSE

Diff: 2

Skill: Understanding

Section: Health Insurance

Learning Outcome: 16.3

71) List and discuss five points that will help you communicate well with health care providers.

Answer: (Any five of the following)

- Know your personal and family medical history.
- Research your condition—causes, effect, possible treatments, etc. Don't rely solely on your provider for information.
- Bring someone with you to appointments to listen and ask questions. If you go alone, take notes.
- Ask the practitioner to explain the problem and possible tests, treatments, and medications. If you don't understand anything, ask for explanations in simpler language.
- If the provider prescribes medication, ask whether you can take a generic version.
- Ask for a written summary of the results of your visit and any lab tests.
- Seek a second opinion about important tests or treatment recommendations.
- After an appointment, write down an account of what happened and what was said.
- When filling prescriptions, make sure the pharmacist provides you with information about the drugs and their possible interactions.
- Read the label when purchasing over-the-counter (OTC) medications.

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

72) Discuss four common forms of self-care.

Answer: (Any four of the following)

- Diagnosing symptoms or conditions that occur frequently but may not require physician visits (e.g., common colds or minor abrasions)
- Performing breast and testicular self-exams on a monthly basis
- Learning first aid for common, uncomplicated injuries and conditions
- Using over-the-counter medications to treat minor ailments or injuries
- Checking blood pressure, pulse, and temperature
- Using home pregnancy and ovulation kits
- Using self-help books, tapes, websites, and videos

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

73) Andy has been taking a prescription antidepressant for 10 weeks and reports feeling less depressed since he began taking the medication. How can Andy be certain that his response isn't attributable to the placebo effect? Can he? And if not, what could he do to increase his understanding of his drug response?

Answer: Answer will vary. Students may discuss concepts similar to the following:

He cannot be certain. Researchers agree that expectations do influence human physiology. Not only mood, but pain and observable physical signs such as tremor respond to the placebo effect. Andy could conduct some research into the drug that he is taking, reading the published clinical studies or at least the abstracts of the studies. He could also ask his prescriber for more thorough information about the evidence for the effectiveness of the drug.

Diff: 3

Skill: Applying

Section: Taking Responsibility for Your Health Care

Learning Outcome: 16.1

74) Distinguish between nurse practitioners (NPs), registered nurses (RNs), and licensed practical/vocational nurses (LPNs/LVNs), comparing training and responsibilities.

Answer: Nurse practitioners are registered nurses who obtain additional training and certification, typically through a master's degree program or specialized NP program. They may conduct or order diagnostic tests and, in many states, prescribe medication. Registered nurses typically have either a 4-year bachelor of science in nursing (BSN) or a 2-year associate's degree in nursing (ADN). They must then pass a national certification exam in nursing. Licensed practical/vocational nurses typically have completed a 1-year or 2-year training program, often at a community college or in a large hospital, and have passed a licensing exam.

Diff: 2

Skill: Understanding

Section: Conventional Health Care

Learning Outcome: 16.2

75) List and explain the various mechanisms private insurance companies are still allowed to use, under the Affordable Care Act, to limit potential losses.

Answer:

- Deductibles—payments you must make before your insurance company starts paying
- Coinsurance—the percentage of the bill you must pay
- Copayments—a set amount you must pay at the time of service
- Limits on covered services—conditions or treatments not covered by a particular policy (for example, a plan may or may not cover eyeglasses, dental care, etc.)
- Waiting periods—a period of time (not to exceed 90 days) during which a person is enrolled and paying premiums but before coverage begins; does not apply to plans purchased by individuals

Diff: 4

Skill: Analyzing

Section: Health Insurance

Learning Outcome: 16.3

76) Identify at least four factors involved in the continuing increase in health care costs.

Answer: (Any four of the following)

- Excess administrative costs
- Duplication of services
- Aging population
- Increasing rates of obesity and inactivity
- Demand for new diagnostic and treatment technologies
- Emphasis on crisis-oriented care rather than prevention
- Physician overtreatment
- Inappropriate use of health care services by consumers

Diff: 4

Skill: Analyzing

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

77) List and discuss five key provisions of the Affordable Care Act (ACA).

Answer: (Any five of the following)

- Insurers are required to cover preventive services, such as screenings for cancer, mammograms and colonoscopies, tests of blood glucose and blood pressure, and other services.
- Insurers must offer coverage to young adults on a parent's plan through age 26.
- Coverage for prescription medications is required.
- Americans cannot be denied coverage because of preexisting conditions.
- No annual and lifetime limits on benefits are allowed.
- Affordable Insurance Exchanges help consumers shop for and enroll in plans with the same kinds of choices that members of Congress have.
- Small businesses receive special tax credits to help fund insurance plans.

Diff: 4

Skill: Analyzing

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4

78) Are you in favor of a national single-payer health insurance program in the United States? Support your answer with reasons why or why not.

Answer: Answers will vary. Students may make arguments similar to the following:

Yes; everyone should have access to affordable health care as a basic human right. Many other countries have successful programs that are cost effective. Currently, uninsured individuals increase system-wide costs by waiting to seek care until they are critically ill and foregoing expensive prescription drugs that they cannot afford. At the same time, insured individuals end up paying higher prices for health care since the industry tries to offset costs incurred by treating uninsured or underinsured individuals. Moreover, considerable savings would be achieved by reducing administrative costs currently incurred by the thousands of different health insurance plans, as well as office costs for providers who must bill a variety of insurance companies, payments, etc.

No; health care is not a right, but an individual responsibility. Many individuals do not take care of their health. Moreover, many individuals can afford health coverage but choose—and have a right—to decline it. A single-payer system would have to be funded through higher taxes. The oversight of the health care system should be left up to the free market.

Diff: 5

Skill: Evaluating

Section: Issues Facing Today's Health Care System

Learning Outcome: 16.4