

دراسة حول التأمين الصحي الأمريكي من الناحية الفلسوفية النظامية و الإصلاحية من هربرت كلارك هوفرت إلى رولند ويلسن ريقن (1930 إلى 1990)

خينش سومية

ملخص: من الناحية التاريخية النظام الصحي الخاص الأمريكي و النظام القائم على الموظفين كانا بمثابة المحركان الأساسيان لإدارة شؤون دولة بأكملها لمدة قرون. و على ما يبدو عرض إيديولوجية عديدة لنظام صحي خاص كان عائق ملحوظ في مجال التأمين الصحي. باختصار المقال التالي سيناقش 'يحلل' و يعيد النظر في إشكالية النظام الصحي في الولايات المتحدة الأمريكية. صف إلى ذلك المقال سيجادل بالخصوص كيفية عجز حكومة فيدرالية بأكملها لتأمين ملايين من المواطنين الأمريكيان في القطاع الصحي مع تنفيذ نظام و إصلاحات مبنية على شبكة عالمية من 1930 إلى 1990. حتى المنظمات الإنسانية العالمية قد لعبت دورا هاما في نشر و تعميم نظام تأمين الرعاية الصحية بتعاون مع منظمات أمريكية محلية مثل (ج أ) و (م) من المواطنين (ت ع). في الواقع مجموعة من المؤسسات الأمريكية الطبية في القطاع الخاص مثل: (م ط أ) و (م م) الأمريكيان عارضوا بشدة أية محاولة تعميم مثل هذا العمل الفدرالي الملقب على الأساس "الطب الاجتماعي". لحسن الحظ تقريبا كل رؤساء الولايات المتحدة الأمريكية في تلك الفترة الزمنية (1930-1990) بدلوا مجهودات جبارة لمحاولة تنفيذ نظام و إصلاحات وطنية في القطاع الصحي. حتى التيارات الفلسوفية العالمية قد تركت بصمة ثمينة في ذلك المجال لكون الوعي الأخلاقي قد لعب دورا هاما للغاية في تقوية منح ضمان صحي مع تحقيق إصلاح تاريخي لو اتخذ التأمين الصحي الوطني على عين الاعتبار من طرف المجتمع الأمريكي بأكمله منذ زمن بعيد.

الكلمات المفتاحية: الرعاية الصحية التأمين الصحي الوعي الأخلاقي النظريات الفلسوفية و السياسية برامج الرعاية الصحية الإصلاحات و الأنظمة في السلك الصحي.

A Case Study: American Health Care Insurance Philosophies, Systems, and Reforms from Herbert Clark Hoover to Ronald Wilson Regan (1930 to 1990)

Khinèche Soumèya. MAA (Maître Assistante A). Département d'Anglais. Faculté des Langues Etrangères. Université Abdelhamid Ibn Badis, Mostaganem, Algérie. Membre du Laboratoire d'Histoire d'Algérie, Oran 1. Postal Code: 27000. Mail: soumeyak2177@hotmail.com.Tel: 05 55 71 93 51.

Directrice de thèse de doctorat classique: Professeur Yacine Rachida, Université Oran 2.

Abstract

Historically speaking, the American private sector and employer-based system have run a whole nation for centuries, and seemingly, the United States private ideological obstinacy has forever been a noteworthy obstacle in the field of health care insurance. In brief, this article will basically debate, analyse, and review the issue of health care insurance in the United States. Furthermore, this paper will centrally argument how far it was still unachievable for the federal authorities to insure millions of American citizens, and implement U.S. health care insurance systems and reforms based on a universal network from 1930 to 1990. Furthermore, even international humanitarian organisations played a major task in spreading a United States' health care insurance system, along with local American organisations as AALL. Actually, a number of American private medical institutions as AMA, AHA, and a portion of the American citizens had vehemently opposed all universalisation of such federal action often named socialised medicine. Fortunately, all the American Presidents of that period disseminated loads of efforts in trying to implement a national health care insurance system and reform. Even worldwide philosophical trends had left a precious print on this domain, for the ethical conscience should have played a salient role in reinforcing the availability of the system, and achievement of historic reforms if a national health care insurance system would have been adopted a long time ago.

Key words: health care; health care insurance; ethical conscience; philosophical and political ideologies; American Presidents; health care programs; health care reforms and systems.

Introduction

Basically, the American states have been found on the emblem of sovereignty since 1776, and the fear of the citizens to get back to the single federal system in the field of health care insurance would not let them move freely. They were unchained to the supreme law of land, as to select a health care insurance policy of their choice, without being obliged to comply with the federal government instructions that often went in contradiction with their ethical values and financial resources. According to citizens, the system was based on the value of oneness, that is to say, gathering instead of scattering, which used to be during the colonial period.

This article embedded the most renowned authors, philosophical, and political advocates who scrutinised the issue of health care insurance in the U.S.A from 1930 to 1990. So, major social, political and economic procedures had been implemented in the field of health care insurance for the welfare of the American citizens. And the best historical achievement that had latter on successfully been carried out after the Social Security Act of 1935, and Medicare and Medicaid of 1965 was Obamacare which was a law enacted in 2010 named the Patient Protection and Affordable Care Act. Among the political advocates were the American Presidents, as: George Washington, John Adams, Thomas Jefferson, Franklin Delano Roosevelt, Lyndon. B. Johnson, Richard Nixon, Gerald Ford, Jimmy Carter, and Ronald Regan. Among the philosophers used to be: Aristotle, Emmanuel Kant, Thomas Hobbes, Hannah Arendt, John Rawls and Norman Daniels, Peter Mack along with John Stewart Mills, and Tom L. Beauchamp, as well as, James Franklin Childress. All of them sustained a single federal system which could have been able to provide a national health care insurance system and reform.

So, this study gave me the opportunity to explore and extend the issue of the U.S. health care insurance systems and reforms mainly from 1930 to 1990. It will be dealing with their philosophical angle, as well as, historical chronology. Moreover, the historical dimension played a key role in building a firm political attitude through numerous failures which further enhanced the policy makers' raison to implement national health care insurance systems and reforms.

1. Historical Dimension and Philosophical Creed on the Issue of Health Care Insurance

Starting from colonial times till the present day, the vivid concern of the colonists and later on, for the American federal government was to crucially cover diverge American communities. The philosophy of the nation in general and the Founding Fathers in particular, was to treat people with dignity and respect. Moreover, the principle of conscience was the core ethical precept on which was founded the American colonists and later, the American Republic. Among the Founding Fathers who pledged social humanity and justice, imbued with a strong spirit of conscience and Judeo-Christian precepts used to be Thomas Jefferson (1743-1826)¹, the father/architect of the Declaration of Independence. John Adams (1735-1826)² was the second American nation President who opened up the insurance system by levying taxes from the American sailors to subsidise healthcare seamen charges within hospitals. George Washington (1732-1799)³ saw in the union and respect of the citizen and government an inextricable way for the provision of healthcare insurance. And, Thomas Paine (1737-1809)⁴ an American activist, philosopher and theorist believed in the liberty of conscience as being a right and duty saying: *my country is the world and my religion is to do good.*⁵

Still being in the same colonial and post-colonial span, both healthcare and healthcare insurance witnessed basic and elementary means of curing and even insuring people, mainly the working class as we have been discussing beforehand with President John Adams. Treatments

¹ Ellis Joseph J; "Thomas Jefferson: President of the United States." *Encyclopaedia Britannica*. 10-1-2014, p. 1.

² Sterner Doug. "Presidents of the United States." *Home of Heroes*, 2003, p. 2.

³ *Ibid.*, p. 1.

⁴ Papadimos Thomas J "Philosophy, Ethics and Humanities in Medicine." *Biomedical Central*, Vol; 2, Issue; 2, 28 March, 2002, p. 4.

⁵ Lewis Joseph, *Inspiration and Wisdom from the Writings of Thomas Paine: "Rights of Man"*. Thomas Paine, London, Printed for J.S Jordan, №.166, Fleet Street, 1791, p. 2.

used to be home made, and illnesses as: smallpox, influenza, malaria, pneumonia, tuberculosis, etc, were more often than not treated by mothers or housewives with herbal medicines like honey, flowers, wine, berries and liquorices, than by a doctor in a hospital. Concerning doctors, they used to get their trainings in England in the College of Physicians in London because the new land was a kind of a vast battlefield. And curing injured or ill people did not require from doctors high qualifications or credentials. Other crucial problems arose in the New World among them, sanitary, or hygienic matters which brought several diseases within the settlers. The major causes used to be the salient lack of sanitation due to the primitiveness of the colonists' way of life as the lack of bathrooms, running water, or descent toilets. With regard to medical tools, most if not the majority of them were not sterilised as bloodlettings, lancets, and sheets for patients. As a consequence, germs proliferated and diseases started to grow in a rapid way. So, there was an urgent need for the present authorities to set an economic system that would bring social comprehensiveness, and the name of that system has been *health care insurance*.

So, what is health care insurance? Health care insurance is an economic term which engages both insurers (private and government companies) and insured (American citizens, an employer or a community organisation) to set a contract often named Evidence of Coverage or insurance policy. It is a financial protection against illnesses that helps people to cover their medical costs including: doctors' visits, hospital stays, surgery, tests, home care, etc, or, through social welfare programs funded by the government. Actually, the roots of health care insurance dates back to pre-settlement in a kingdom named England where the provision of health care and health care insurance used to take a comprehensive dimension.

Thanks to Queen Elizabeth I, a great number of injured seamen could have the opportunity to take refuge in the Greenwich Palace and provided the Chatham Chest, a kind of charity fund to pay pensions for all disabled seamen.⁶ And the first US National hospital was named the Pennsylvania Hospital for the sick-poor founded by Dr. Benjamin Franklin in 1751.⁷ Moreover, from the period dating from 1776 to 1950, the American health care insurance witnessed a wide degree of comprehensiveness mainly from the 17th century going through the Civil War (1861-1865)⁸, where the United States split between the Industrial North and the Agrarian South, adopting a public health mission till the 20th century. However, authorities and citizens were not the only ones to carry out this mission, numerous western philosophers and thinkers had morally contributed into this humanitarian operation.

Philosophically speaking, western thinkers' philosophy and views on health care and health care insurance were unanimous. For them, the right to health care and health care insurance was unalienable; though, they did not live in the same period and were not from the same regions. They all sustained strong moral values and ethical precepts but focused only on one of them; namely, conscience as it is the core element in all international conventions concerning Human Rights since 1948. Aristotle (384 BC_322 BC)⁹, Emmanuel Kant (1724_1804)¹⁰, Thomas Hobbes (1558_1679)¹¹, Hannah Arendt (1906_1975)¹², John Rawls (1921_2002)¹³ and Norman Daniels

⁶ Vijayakoumar A. and Karthigai Priya M. *Indian Insurance Sector in 21st Century: An Outlook*. Calpaz Publications, Singhal Print Media, Delhi, India, 2009, p. 232.

⁷ Pencak William A. *Historic Pennsylvania: An Illustrated History*. A Publication of the Pennsylvania Chamber of Business and Industry, Historical publishing Network, A Division of Lammert Incorporated, San Antonio, Texas, USA, 2008, p. 20.

⁸ **The American Civil War (1861-1865)** was the bloodiest war Americans had ever known. Some call it 'the Brother War', for the origins of the war were domestic as states' right, and the issue of union, territorial crisis as well as Abraham Lincoln (1809-1865) election, but the most prevailing cause was the secession of slavery.

⁹ Papadimos Thomas J. "Philosophy, Ethics and Humanities in Medicine." *Biomedical Central*, Vol; 2, Issue; 2, 28 March, 2002, p.

¹⁰ Kant Immanuel. *Ground Work for the Metaphysics of Moral*. Rethinking of the Western Tradition. Edited by Wood Allen W. Yale University Press. New Haven and London. 2002, p. 5.

¹¹ Arp Robert. *1001 Ideas That Changed the Way we Think*. Atria Books. Quintessence Editions, New York, United States. October 2013, p. 1651.

(1942_ present)¹⁴, all based their major ethical thoughts on conscience and humanism in the field of health care insurance. For Aristotle, the soul is the pillar that vehicles the body which must be in good health to face the series of emotions which come across man's life as pain and pleasure. Moreover, the soul must be maintained by the interaction of all societal segments since the soul is the source of physical and spiritual nourishment. For Kant, social classes are not meant to influence the provision of health care and health care insurance, because man is a rational agent of worth that ought to be regarded as an end and not as a means, as he said. For more details, the German philosopher numbered three formulations in his masterpiece "*Ground for the Metaphysics of Morals 1785*"¹⁵ to set the principle of the Categorical Imperative. The first one, *the Formula of the Universal Law*¹⁶ sets forth the coordination and rationality between the action and the motivation named universalisability wherein moral imperatives must yield to the universal order. And the best example is directed to the field of health care insurance since the action is the insurance provided by the state or the government to the citizens, and the motivation is to conscientiously and morally bring relief and financial support to them. The second and the third are respectively *the Formula of End Itself*¹⁷ and *the Formula of Autonomy*¹⁸, which both appeal to rationality, imperativeness, and autonomy of the federal government and citizen.

According to Hobbes, the relation between man and the government is a sort of imperative covenant based on the dichotomies of rights and duties. It is the base of commitment that includes a mutual aid between both sides. In the sense that being a member of a society, man has the right to be free to choose his own health care plan that the federal government, state government, or private companies is supposed to deliver. Hannah Arendt, a Judeo-German political theorist and philosopher, saw in the moral revolution a human way of putting government and citizen together for the social welfare, as she stated in her book "*On Revolution*"¹⁹ that the central power did not deprive the constituent bodies from their original power, as she was targeting the American revolutions' covenants. Moreover, in her other book "*Life of the Mind*",²⁰ she joined speech and action via conscience, as to say to offer health care insurance and not to apply it, which was certainly not the core of her perspective. Living free but united Norman Daniels and John Rawls treated the issue of health care insurance from a legal and just perspective. To summarise, their objective was to give all people the same opportunity to have access to a comprehensive health care insurance system. Both targeted the federal level that ought to bring justice among an ethical environment. In Daniel's book "*Just Health Care*" (1958),²¹ he _as the previous philosophers_ agreed on the concept of equality of comprehensiveness of the system. For Rawls, if justice was to be applied, people's rights would be secured under a unified social welfare conduct. Always from an ethical angle, Anders Schinkel (1979_ present)²², a German historian and philosopher, society imperatively requires a human conscience. For him, reason which is in great part the central component of the ego is to be the only moral guide to a sane socio-political environment. Still,

¹² Waithe Mary Ellen. *A History of Women Philosophers: Hannah Arendt*. Springer Netherlands, Kluwer Academic Publisher, Vol, 4. 1995, p. 243.

¹³ Keene Ann T. "Rawls, John". *American National Biography*, American Council of Learned Societies, Published by Oxford University Press. Feb. 2000, p. 1.

¹⁴ Daniels Norman. *Just Health: Meeting Health Needs Fairly*. Harvard School of Public Health. Cambridge University Press, New York, United States of America, 2008, p. 4.

¹⁵ Kant Immanuel. *Ground Work for the Metaphysics of Moral*. Rethinking of the Western Tradition. Edited by Wood Allen W. Yale University Press. New Haven and London. 2002, p.

¹⁶ Ibid., p. 19.

¹⁷ Ibid.,

¹⁸ Ibid.,

¹⁹ Arendt Hannah. *On Revolution*. Penguin Books LTD, England, 1963, p. 3.

²⁰ Arendt Hannah. *The Life of the Mind*. A Harvard Book, San Diego, New York, the United States of America, One Volume Edition, 1971, p. 6.

²¹ Rid Annette. "Just Health : "Meeting Health Needs Fairly." Bull World Health Organ." World Health Organization, Vol, 86, Issue, 8, August, 2008, p. 1.

²² Stone Dan. *The Oxford Handbook of Postwar European History*. Great Clarendon Street, Oxford University Press, Oxford, United Kingdom, 2012, p. 100.

man has to control his instinctual drives that often ban others from their rights. As the fact of being poor let some U.S. private health care insurance companies not to assist them because of their social status. Peter Mack along with John Stewart Mills focused on the three maxims: *welfarism*²³, *utilitarianism*²⁴, and *consequentialism*²⁵ which common objective was to bring the greatest happiness to the greatest number of people.

2. The United States' Healthcare Insurance: Domestic Divergences on Ethical Ideologies

Ideologically speaking, the United States of America has always adopted a liberal philosophy, in all fields. The most powerful nation is among a wide array of nations worldwide that has been offering a wide range of health care coverage opportunities to its communities. When comparing both poles (the U.S. and the majority of the world's nations), one may notice that in those countries comprehensive medical and financial systems are till the present day widely expanded within their communities. However, the nascent nation has never believed in a centralised federal government authority. The interference of the federal government in their central affairs meant violation of their freedom and sovereignty. And despite the fact that the American authorities have spent much more on their health care insurance system than on any other field, they still remain far from the comprehensive Canadian health care one, for example. The federal government could not trust on a fragmented private health care insurance system that was supposed to be more costly than one central and national system.

For Professor Robert Sade, an ideal health care insurance system would have been the achievement of a liberal free-market under a central federal planning, but it seemed impossible. And trying to create a connection between both of them (private and public) has been impossible. The professor claimed a real distortion of the U.S. health care insurance system which has lacked administrative, financial and mostly, medical coordination. That is why, *90% of the American population, according to Sade, believes that the system needs a fundamental change or complete rebuilding.*²⁶

So, though the nascent nation tried to build a fair, autonomous and democratic Republic and system, it has unintentionally came to deceive a great deal of their population that strongly believed in their ethical convictions based on conscience and the spirit of humanity. Their chief ideal of the society was to reach a stage of total social security, moral autonomy, and economic integration.

Actually, there was a constant conflicting ethical spirit between the patient, the doctor, and the third party payers, as the case of abortion in the United States that has always raised a moral revolutionary issue. Religious fundamentalists and Republicans for instance, have shown a firm

²³ **Welfarism** is the proposition that the goodness of the source allocation be judged solely on the welfare or utility levels in that situation...The welfarist theory is based on four tenets..., among them: consequentialism and welfarism...Consequentialism holds that any action or choice must be judged exclusively in terms of outcomes.

___ Mack Peter. "Utilitarianism Ethics in Healthcare." *International Journal of the Computer, the Internet and Management* Vol.12 № 3, September-December, 2004, p. 63.

²⁴ **Utilitarianism** is a belief based on the philosophy of "Bentham" that actions are good if they are useful of benefit the greatest number of people.

___ Crowther Jonathan. *Oxford Advanced Learner's Encyclopedic Dictionary*. Oxford University Press, Walton Street, Oxford, England, 1989, 1992, p. 998.

___ From another source, **utilitarianism** is fundamentally welfarist in its philosophy. For example, application of the principle of healthcare requires a prior understanding of the welfarist theory... utilitarianism... gauges the worth of actions by their ends and consequences...It believes that the right thing to do is to maximize some measure of overall or collective welfare...be it in health, pleasure or knowledge...we ought to promote the greatest good of the greatest number.

___ Mack Peter, op. cit., pp. 67-8.

²⁵ **Consequentialism** holds that any action or choice must be judged exclusively in terms of outcomes.

___ Ibid., p. 63.

²⁶ Sade Robert M. "Foundational Ethics of the health Care System: The Moral and Practical Superiority of Free Market Reforms." *Journal of medicine and Philosophy*, 33: 461-497. Medical University of South Carolina, Charleston, South Carolina, USA, 2008, p. 462.

opposition to *the Roe v. Wade decision issued in 1973*²⁷ by the United States Supreme Court that legally allowed abortion. Major medical guidelines had been set up by the two philosophers *Tom L. Beauchamp, as well as, James Franklin Childress*²⁸ for the majority of the three poles – patient, doctors and the third party payers. And the major element that was called upon to be discussed was fundamentally conscience. The two philosophers regarded freedom of moral conscience as a matter of medical commitment and financial affordability. The guidelines now were as following: autonomy, beneficence, non-maleficence, and justice. They set up those guidelines because of the conflicting values and ideologies that arose between health care providers and the U.S. society. Some may say on which basis those conflicting situations were based? The answer is ideological because some wanted a centralised health care insurance system and others desired a decentralised one. The difference between both approaches lies in the fact that the first approach aims at sticking the whole health care insurance responsibility to the American federal government that has got the duty to cover all members of the American society, including: children, young, adults, the elderly, the poor, and the disabled, no matter their financial affordability and ethical principles. The second one, targets a total division and independence of the health care insurance system from the federal government. In the same line of thought, the American patients’ desire has been to be free to choose their doctors, health care policy, and health care insurance firm, according to their ethical belonging. Concerning the issue of abortion for instance,

“46 percent of workers enjoyed an employed-based health insurance subsidizing abortion.²⁹ And Twenty-nine states required coverage for contraceptives, and 15 states mandated expensive in-vitro fertilization (IVF).”³⁰

This means that, some were for financing and covering abortion cases, whereas others; were fervently opposing the decision. Now, to provide medical treatments and affordable financial means to all the Americans, both authorities and population would have better aimed at following a solid interactivity named Human Rights, as well as, freedom of conscience. Those rights used to be and are inalienably major ethical and political codes that ought to be drafted and adopted through a series of legislative procedures for patients, doctors, and health care insurance companies whether private or public.

3. International Health Care Humanitarian Organisations

Historically speaking, Human Right has been a movement that broke up in 1948 in France to strengthen and ensure comprehensive Human Rights throughout the world in general and the USA in particular. The Second World War (1939-1945) more often than not called the Holocaust had outstandingly collapsed due to the blind criminality of the unethical and inhuman behaviour of the German Nazi *Adolf Hitler*³¹ aiming at exterminating the Jewish population. However, the Declaration of Human Rights was a set of contracts and treaties that bound several countries acting with their conscience and ethical duty to serve the whole humanity. Alas, the United States did not comply with the declarations’ directives. Even though, the nascent nation has always

²⁷ Von Bergen C. W and Bressler Martin S. “A Matter of Conscience: do conflicting beliefs and workplace demands constitute religious discrimination.” *Journal of Behavioral Studies in Business*, Jan 19, 2015, p. 4.

²⁸ Beauchamp Tom L. And Childress Franklin James. *Principles of Biomedical Ethics* New York: Oxford University Press, 1979, p. 1.

²⁹ Marshner Connie. “The Health Insurance Exchange: Enabling Freedom of Conscience in Health Care.” Published by the Heritage Foundation, Washington, DC. U.S.A. No. 1377, March 1, 2007, p. 1.

³⁰ *Ibid.*, p. 2.

³¹ **Hitler Adolf (1889-1945)**, is a German dictator, born in, Austria. He served in the German Army in the First World War and in the 1920’s became involved in right wing politics. His Nazi party was named the German National Socialist Party founded by him.

__Crowther Jonathan, op. cit., p .600.

__**Hitler** won increasing support and in 1933 he became Chancellor of Germany...He was starting a series of invasions of neighbouring countries which led in 1939 to the Second World War...He developed his racists ideas by attempting to exterminate the Jews.

__ *Ibid.*, p .428.

claimed freedom of conscience in theory, but in practice the game was a non-cooperative human mission.

In theory, the U.S. has always been in favour of a national health care insurance system but under both government and citizens' own ideological conditions. For instance, the private sector has forever been the hallmark of their political alienation that is why there are still around 45% of the American population that is till 2018 not yet insured. The capitalist foundation on which the nation had been built upon, restricted any kind of medical and financial accesses as health care facilities, and services that should have been provided via the set of rules *the Universal Declaration of Human Rights*³² had already set and approved beforehand. Unfortunately, the whole American system has been based on money. The public sector was less fortunate, but it saved and still saves millions of middle and poor class American citizens. For that specific reason, there used to be a historical friction between the free market and the centralised American federal government on the issue of health care insurance. On the one hand, the American federal government yielded to a national system, while the free market which is an economic system often named laissez-faire capitalism based on an unobstructed privately competition between buyers and sellers. In the same line of thought, it is an ideal system wherein prices of goods are being set by the consumers and where the laws and forces of supply and demand are free from any intervention by a government.

Now, the role of *the World Health Organization*³³ has forever been to provide worldwide people with the foremost range of healthcare and healthcare insurance, for example, *in 1978 it announced "health for all"*.³⁴ Its purpose has definitely been to serve the patients poor or rich, young or old, workers or jobless supplying them with a high quality of health care with affordable prices and maximum of dignity and respect. Besides, the international organisation considered the financial means as a prime social option either via the third party payer or people's income. Indeed, though all the efforts making by the WHO, several communities and countries have carried on being unbalanced in managing a health care insurance system still based on social classes' disparities. So, their second option was to set up a comprehensive health care system under form of pre-payment, or social security which the United States, as the most industrial nation in the world has imperatively opposed, and which the WHO placed it in the 37 rank in the world.³⁵

4. Public Health Care Achievements

Now, concerning public health achievements in the United States, things appeared to have evolved positively in the sense that new technological medical ways started to emerge, like preventive vaccination, mastering of almost all cancer types, healthy foods, preventing infections by setting up sophisticated methods of sanitation as sewage and chlorination. Those new medical methods aimed at improving the issue of health care insurance, besides; private and public association had been created for the general social welfare. In this segment of the article, multiple proposals are to be suggested by anyone who wants to investigate in the field of health care

³² Richard Pierre Claude and Bernardo W. Issel. "Health, Medicine and Science in the Universal Declaration of Human Rights." *Health and Human Rights, Fiftieth Anniversary of the Universal Declaration of Human Rights*, Vol.3, № 2. 1998, p. 128.

³³ **The World Health Organization (WHO)** was founded in 1948 with an ambitious objective – 'the attainment by all peoples of the highest possible level of health'. Its constitution defined 22 wide-ranging functions, of which the first was 'to act as the directing and co-coordinating authority on international health work'.

___Clift Charles. "The Role of the World Health Organization in the International System" Working Group on Governance, Centre on Global Health Security Working Group Papers, Chatham House © The Royal Institute of International Affairs, Great Britain, England, February, 2013, p. 6.

³⁴ Forsythe David P. *Encyclopedia of Human Rights: Afghanistan _ and the Right to Participation*. Volume 1, Oxford University Press, New York, USA, 2009, p. 390.

___ Welch Jr. Claude E. "World Council of Churches." *World Health Organization*, p. 390.

³⁵ Dutton Paul. V. "Health Care in France and the United States: Learning From Each Other." *Brookings Institution Policy Brief*, August 2002, p. 1.

insurance. Those inquiries are chiefly connected with a number of constituents of the social order that are: the American citizens, health care programs and plans, institutions and companies, and the federal government including Presidential administrations. First, any American citizen has always had a major concern with the field of health care insurance, since life is health and vice versa. Furthermore, either treated at home or in a hospital, via advanced medical technologies, physicians and medical institutions has always been dutiful to their mission, and let the patient have constantly the health care and health care insurance of their choice. Second, the bases of a solid health care insurance throughout the American history have forever been the private and public influential associations as: AMA (American Medical Association), AHA (American Hospital Association), AALL (the American Association for Labour Legislation).

The prime mission of those associations was to serve the American citizen in the educational, ethical, and medical fields. And their objective was to provide autonomy to both parts _ patient and doctor. They proposed a set of solutions as the prepaid health insurance/ policies. With regard to physicians, they had to possess ethical values including an upright conscience that would shape their medical behaviourism in the medical area. New medical and technological means helped citizens move from rural areas to urban ones which increased occupational/working hazards and boosted their incomes allowing them to be treated at hospitals instead of home. However, the real disadvantage lied in the field of social classes and genders as, the rich and poor, the jobless and the working class, old, adults, young people, and children, men and women, etc. In other words, there used to be no equity in the delivery of health care insurance. Rich people could easily benefit from a solid health care insurance policy, contrary to the poor whose chances to get one were much rarer, and the same thing with the genders.

Yet, health care insurance system should have been based on well-grounded bases as education. For instance, physicians came out without a real competence, but as technology arose, demand for health care insurance arose too, and medical costs increased, that is why, accredited physicians were highly required to save both a number of lives and professional ethics as well. Unfortunately, Industrialisation, World War One, *the Great Depression*³⁶, and World War Two slowed down the flow of the American health care insurance system, but did not stop it. Associations as the AALL, the Blue Cross and the Blue Shield had also thrived, as we had been saying beforehand, by insuring working families and attributing pre-paid policies to all via radio. The Blues operated everywhere throughout the USA, and their principle was that hospitals would have brought medical services regardless of any remuneration. According to Scott Serota, “the President and chief executive officer of the Blue Cross Blue Shield Association, the 37 Blue Cross and Blue Shield companies covered nearly 105 million Americans, and nationwide, more than 96% of hospitals and 92% of professional provides contract with Blue Cross and Blue Shield companies.”³⁷

Now, the beneficiaries from that giant insurance industry used to be mostly the working middle class and rarely the working poor or poor and disabled people including children, adults and the elderly. However, it was not until the emergence of Medicaid and Medicare in 1965, that most Americans got a comprehensive health care insurance. There also used to be health care institutions, programs, and laws as the one stated beforehand: the Blues, the *Emergency Department*,³⁸ *Department of Health and Human Services*,³⁹ the AALL, etc.

³⁶ **The Great Depression** is the American biggest social, economic and political crisis Americans have faced in the 20th C.

__Mc Elvaine Robert S. *The Great Depression: America, 1929_1941*.Times Books, the United States of America, 1984, p. 13.

³⁷ Serota Scott P. “About Blue Cross Blue Shield Association”. 2016, p. 2.

³⁸ U.S. Government Printing Office. “Health, the Unites States, 2010: With Special Features on Death and Dying.” Hyattsville, MD., Washington, DC 20402, 2011, p .492.

³⁹ Steneck Nicholas H. and illustrationd by David Zinn. *ORI: Introduction to the Responsible Conduct of Research*. Department of Health and Human Services. Revised Edition, August, 2007, p. III.

5. What Distinguishes the American Health Care Insurance System from the British One

Contrary to the American health care insurance system which was based on pluralism, the British one for instance, relied on a homogeneous planning. This latter, notably called National Health Service (NHS)⁴⁰ has always provided people with medical services that the British government has been the only financial remunerator. Now, the American one has been relying on the private insurers who have restricted patients both to medical and financial choices, though possessing a well-trained health workforce, a wide range of high-quality medical specialists, and a wide research program. The perpetual conflicts between the states and the federal government have been the fruits of the states' fear of a reiterate past royal tyranny which principles were government control and central planning. In this respect, the United States have always wished to be autonomous in all fields far from any government intrusions in their domestic affairs since it was perceived as a violation of their civic rights. The states kept on being engaged in running their own lives by distributing fair medical knowledge, offering fixed prizes, and guaranteeing multiple health care insurance systems for the American citizens. So, the foundation of a universal American health care insurance system _though many efforts making_ has been and will be of a magic achievement in a cosmopolitan nation in which a decentralised government and antistatist ideologies are still welcome options.

6. The 20th Century American Presidents' Efforts in the Field of Health Care Insurance and Reform

Indeed, Americans from settlement to now have forever lacked faith in their federal government, mainly in the financial means as in social security. As a consequence, the entire 20th century U.S. Presidents have made massive efforts in trying to integrate a universal health care insurance system, but in vain, till the coming up of President Obama with his historical Obamacare. Yet, well before the coming up of that philosophical document, renowned American Presidents thrived by implementing a set of measures concerning health care insurance, as used to do President John Adams on the onset of the 18th century. With his Marine Hospital Service, he provided medical treatments and insurance to sick and disabled American merchant seamen by monthly withdrawing one dollar from each merchant salary. Then other efforts were made by 20th century Presidents as Franklin Delano Roosevelt (1882-1945)⁴¹ who worked out unemployment insurance, workmen's compensation and Social Security plans in an era called the Great Depression. He signed *the first Social Security Act of 1935*,⁴² and *the second one in 1939*⁴³ wherein he provided health care coverage for all destitute American citizens. Moreover, he endeavored to support a comprehensive health care program financed by federal subventions provided to localities and states via his *National Health Act of 1939*⁴⁴, and under *the FSA (Federal Security Agency 1939)*,⁴⁵ which mission was to unite all the federal programs under one central order.

⁴⁰ Dutton Paul. V, op. cit., p. 2.

⁴¹ Mann Thomas. *Letters of Heinrich and Thomas Mann, 1900_1949*. University of California Press, U.S.A, 1998, p. 413.

⁴² Quadagno Jill S. "Welfare Capitalism and the Social Security Act of 1935." *American Sociological Review*, Vol. 45, No. 5, Octobre, 1984, p. 632.

⁴³ Norton Mary Beth, et al. *A People & A Nation: A History of the United States, Volume II: Since 1865*. Ninth Edition, Advantage Edition, Cengage Advantage Books. *The Great Depression and the New Deal*. Chapter 25, Wadsworth, Boston U.S.A. 2008-2012, p. 762.

⁴⁴ Palmer Karen. S. *A Brief History; Universal Health Care Efforts in the US*. Physicians for a National Health Program, Chicago, 1999, p. 9.

⁴⁵ Cuéllar, Mariano-Florentino, 'Securing' the Nation: Law, Politics, and Organization at the Federal Security Agency, 1939-1953. Stanford Public Law Research Paper No. 942447; *University of Chicago Law Review*, Vol. 76, 2009, p. 3.

Always during the 20th century era, and more precisely, during the first half of the century, Presidents like Herbert Hoover (1929-1933)⁴⁶, Harry S. Truman (1884-1972)⁴⁷, or Dwight David Eisenhower (1890-1969)⁴⁸ had firmly supported a national health care insurance modal by enacting federal laws giving all American social classes and genders the right to beneficiate from medical services and insurance. Yet, the everlasting antagonist to the central American government system used to be the AMA (American Medical Association), a public organisation that fervently opposed any universal health care system⁴⁹ that would let the doctors be dependent on a unionist American government system far from the ethical doctor-to-patient doctrine. It was a significant obstacle to every federal national health care policy. The liberal spirit of the organisation rooted in their conscience dominated the American public opinion, for the fact of being a community subject to a government-based health care insurance system was a utopian idea for the Americans. President Dwight David Eisenhower came during the onset of the second half of the 20th century with his Reorganization Acts appealing to enroll millions of working Americans in the program, and one of the famous acts used to be the Department of Health, Education, and Welfare of 1953.⁵⁰

Nevertheless, the most prominent American President of the century, who succeeded in covering old and disabled American citizens working or jobless, men or women, and even children, was Lyndon Johnson Baines (1963-1969)⁵¹ with his Social Security Amendments of 1965⁵² including Medicare and Medicaid. Richard Milhous Nixon, the thirty seventh American President was less collaborative in the field of health care insurance than the previous ones; nevertheless, he brought some governmental proposals with regard to health care reforms. And as an upright President, he suggested significant medical assistance via a subvention of thousand dollars for all kinds of cancers and to all Americans, less expensive and under an employer-based insurance program. President Gerald Rudolf Ford (1974-1977)⁵³, along with Presidents James Jimmy Carter (1977-1981)⁵⁴, and Ronald Wilson Regan (1981-1989)⁵⁵ addressed different proposals. The first one suggested the catastrophic health insurance for everyone covered by Medicare. The second one favoured hospital assistance through health care insurance programs for all. And the last one aimed at reducing health care coverage in his annual message addressed to Congress in 1983.⁵⁶ In brief, their mission was common, in the sense that the American federal

⁴⁶ Daugherty LeoJ. III. *Counterinsurgency and the United States Marine Corps: Volume 1, the First Counterinsurgency Herbert Hoover and Franklin D. Roosevelt_ The "Good Neighbors"*. North Carolina, U.S.A. 2015, p. 16.

⁴⁷ Del Testa David W, Strickland John and Lemoine Florence. *Government Leaders, Military Rulers, and Political Activists*. Livres and Legacies, An Encyclopedia of People Who Changed the World, New York, U.S.A. ORYX Press, 2001, p. 188.

⁴⁸ Ernst Nan Thompson. "Dwight D. Eisenhower Papers: A Finding Aid to the Collection in the Library of Congress." Library of Congress, Manuscript Division, Library of Congress, Washington, D.C. U.S.A. 1997, p. 2.

⁴⁹ Marmor Ted, Freeman Richard and Okma Kieke. "Comparative Perspectives and Policy: Learning in the World of Health Care." *Journal of Comparative Policy Analysis*, Vol. 7, No. 4, 331–448, December 2005, p. 54.

⁵⁰ Cuéllar, Mariano-Florentino, op. cit., p. 5.

⁵¹ **Lyndon Baines Johnson (1908-1973)**, 36th President of the USA 1963-1969... At home he introduced a series of reforms known as the "Great Society".

___ Crowther Jonathan, op. cit., p. 488.

⁵² Taylor Jerry W., Burr JD, & Forman LLP. "A Brief History on the Road to Healthcare Reform: From Truman to Obama." *Hospital Review*, February 11, 2014, p. 2.

⁵³ **Gerald Rudolph Ford, Jr.**, original name Leslie Lynch King, Jr. (born July 14, 1913, Omaha, Nebraska, U.S.—died December 26, 2006, Rancho Mirage, California), 38th President of the United States (1974-77).

___ The Editors of Encyclopædia Britannica. "Gerald Ford." *Encyclopædia Britannica, Inc.* 4-28-2014, p. 1.

⁵⁴ **James Earl Jimmy Carter (1977-1981)** is the 39th United States American President.

___ Crowther Jonathan, Appendix 2, p. 1064.

⁵⁵ **Ronald Wilson Reagan (1981-1998)** is the 40th United States American President.

___ Ronald Regan, "The State of the Union Annual Message to the Congress," Online by Gerhard Peters and John T. Woolley, *The American Presidency Project*. January 16, 1981, p. 11.

⁵⁶ Ronald Reagan: "Address Before a Joint Session of the Congress on the State of the Union," January 25, 1983. Online by Gerhard Peters and John T. Woolley, *The American Presidency Project*, p. 5.

government was committed to deliver health care and health care insurance to all American classes and genders, reducing medical costs and making Americans have access to medical treatments, as well as, coverage.

Conclusion

Historically speaking, the issue of health care insurance in the United States was the concern of a whole nation be it government or citizens. Unfortunately, instead of being united under one central order, Americans preferred to be disunited and segmented because of a previous traumatising autocratic authority that used to be in the pre-colonial period. The antagonists to the central system as AMA, and AHA also blocked the empowerment of the system and its reforms. Fortunately, thanks to local medical institutions as AALL, Blue Shield, and Blue Cross, massive Presidential efforts, as well as, international humanitarian organisations as, WHO (World Health Organization), and Human Rights, they all came to bring a huge helping hand in reinforcing the system and reform. Even multiple worldwide philosophical trends _from different ages_ came to operate positively on the conscience of various American scholars, political activists, and even people. Indeed by doing so, Americans were and are still fervently attempting to achieve a universal health care insurance system and reform, thanks to a well-structured socio-economic comprehensive strategy.

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