**Medicare's Role in Shaping US Healthcare and Insurance Systems**

Health care is basically the services offered by an organization or a group of qualified personnel, to ensure that their patients are free from physical illnesses, as well as the psychological ones. In 1965, the US made an amendment to the social security act to come up with two programs that offer health and medical services, Medicare and Medicaid (DPE, 2016). Medicaid is a program designed for people from poor backgrounds, the aged, pregnant mothers, those with disabilities among others. It is catered for by the state to the HMOs (Team, 2016). Medicare, on the other hand, is an insurance program designed specifically for the aged (above 65 years of age) and the disabled people. Medicare has two main parts for medical insurance and the other two for additional drugs. However, Medicare does not cater for supplement coverage. This service is paid for by taxes from FICA and self-employed companies (Team, 2016).

The first health insurance program in the US was the accident insurance. The founder was Franklin Health Assurance Company located in Massachusetts in 1850. This insurance covered road and steamboat accident injuries. The sickness coverage began in 1890. It was formed to cater for disabilities in 1911 but at first, the program was made to recover lost wages due to few laborers during the world wars (Ubel, 2018). Patients were forced to pay for their own medical expenses from their own pockets at that time. Later in the 20th century, modern health insurance programs were formed to cater for disabilities, age, emergencies, lab procedures and prescription of drugs among others (Ubel, 2018).

In 2011, WHO made a documentation of how citizens receive their medical treatment and how they pay for it. They came up with a conclusion that people who have very little need for health care services benefit greatly while those who are prone to health problems receive little or no health services. Those people, who often depend on out-of-pocket payment for health care and lack health services, are normally affected by catastrophes. Resource allocation of these drugs is often allocated to the rich while other outskirt clinics and hospitals, where these items are very necessary, receive little or no equipment and/or resources. Therefore, it can be concluded that the health services are readily available for the wealthy in proportion to the poor. Not all citizens receive health care attention wherever they are (NAP, 2018).

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