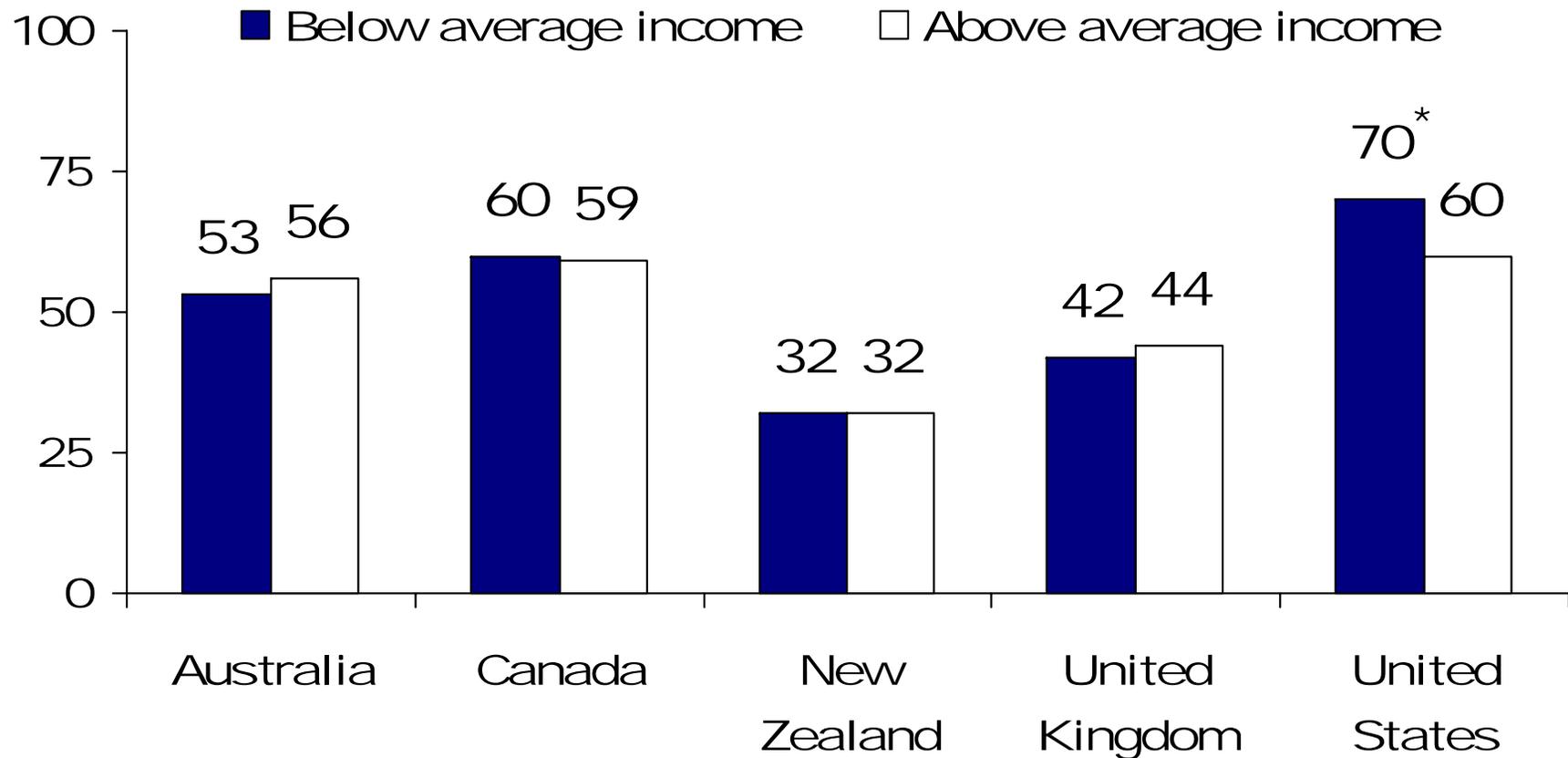


Figure ES-1. Difficulty Getting Care on Nights, Weekends, Holidays Without Going to ER

Percent saying "very" or "somewhat difficult"

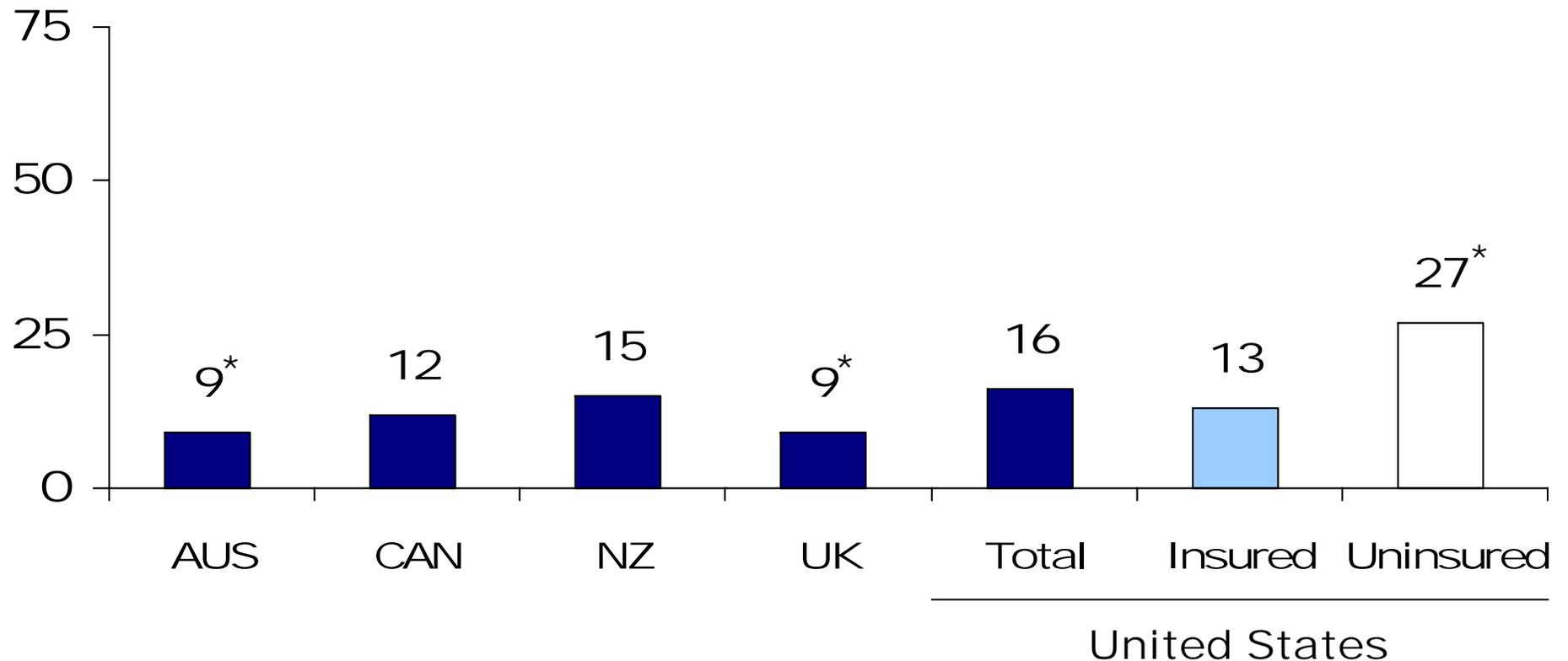


* Significant difference between below and above average income groups within country at $p < .05$.
Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure ES-2. Under 65: Lab Test Errors— Comparisons with U.S. Insured and Uninsured

Base: Under 65 who have had lab tests in past two years

Percent given wrong result or delay in receiving abnormal test result



* Significantly different from U.S. insured at $p < .05$.

Uninsured = uninsured at time of survey or any time during the year.

Source: Commonwealth Fund 2004 International Health Policy Survey.

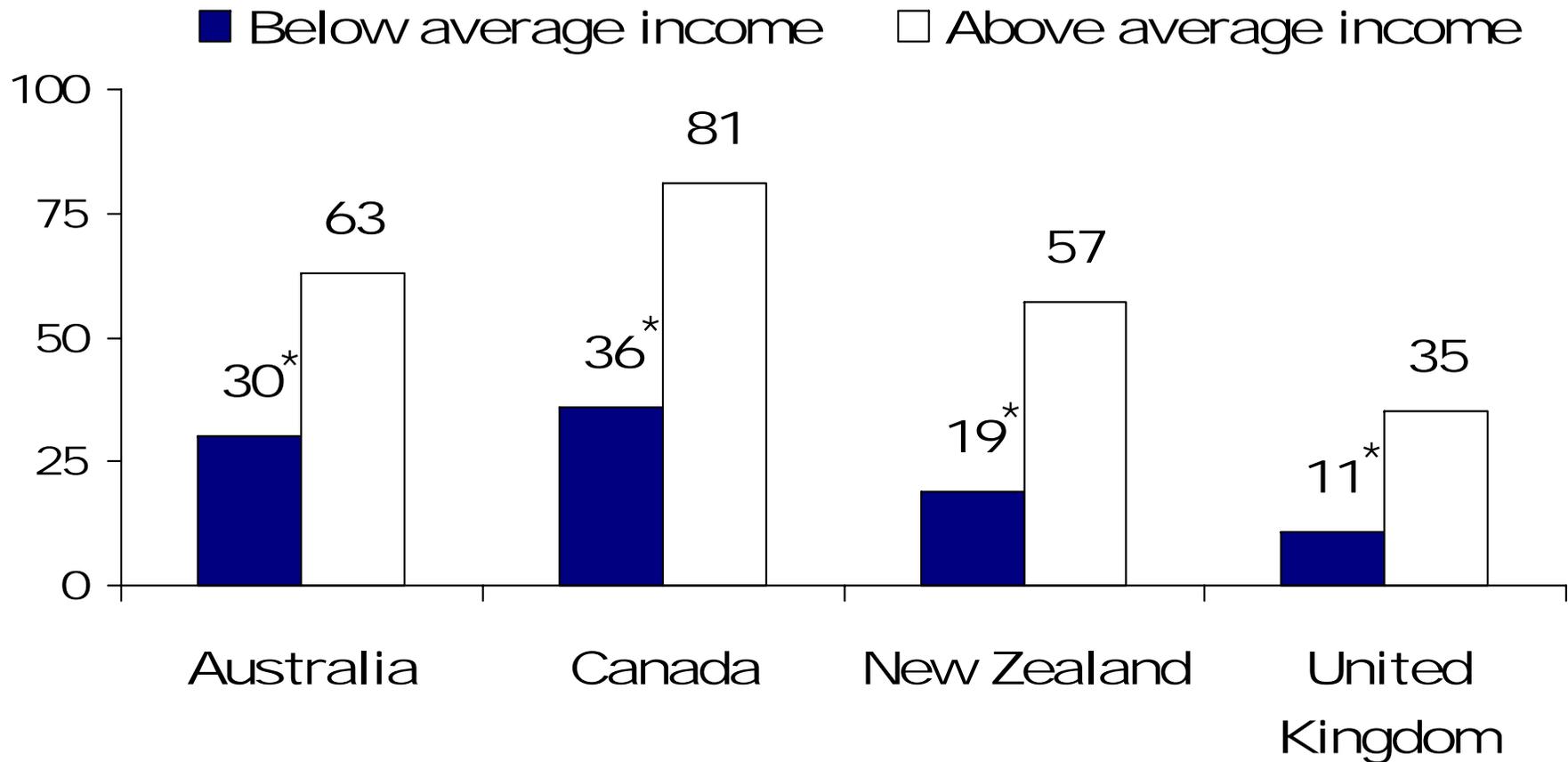
Figure 1. Insurance and Cost-Sharing Policies in Four Countries with Universal Public Coverage

	AUS	CAN	NZ	UK
Private insurance for services covered by public	Permitted only for hospital services	Prohibited for core services in most provinces	Permitted	Permitted
Percent with private coverage	49%	79.9% (to cover benefits excluded from 'free-of charge' public plan)	33%	12%
Public Plan Patient Cost-Sharing	Variable depending on service type and provider	None for core services	Copayments for many services	None for basic services (except Rx and optical)
Prescription Drugs	Covered	Publicly covered for social assistance beneficiaries and in most provinces for seniors	Covered	Covered

Source: B. K. Frogner and G. F. Anderson, *Multinational Comparisons of Health Systems Data, 2005* (New York: The Commonwealth Fund, Apr. 2006).

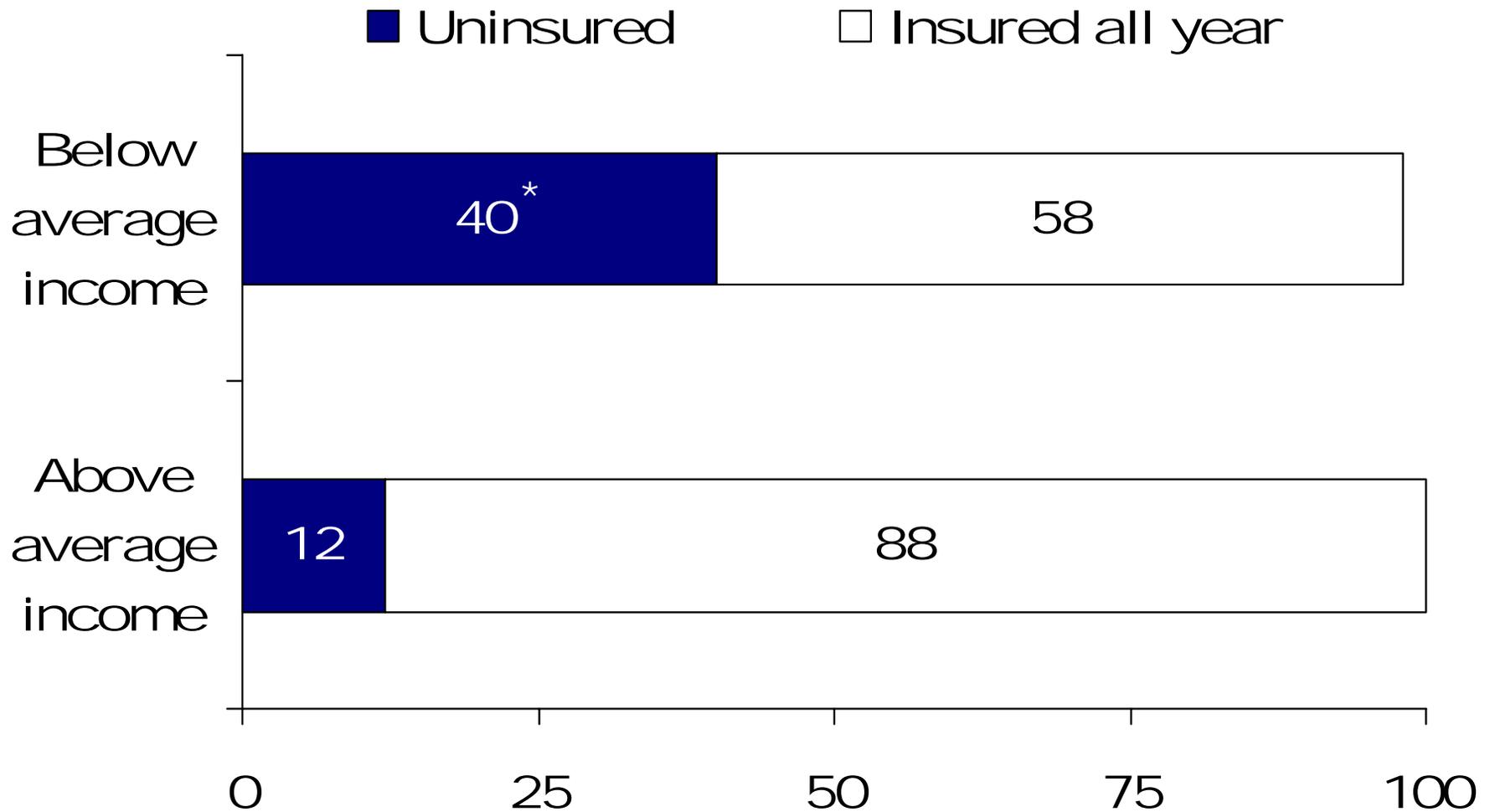
Figure 2. Private Insurance in Four Countries with Universal Coverage

Percent who have private insurance in addition to public



* Significant difference between below and above average income groups within country at $p < .05$.
Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 3. Insurance Profile of U.S. Adults by Income



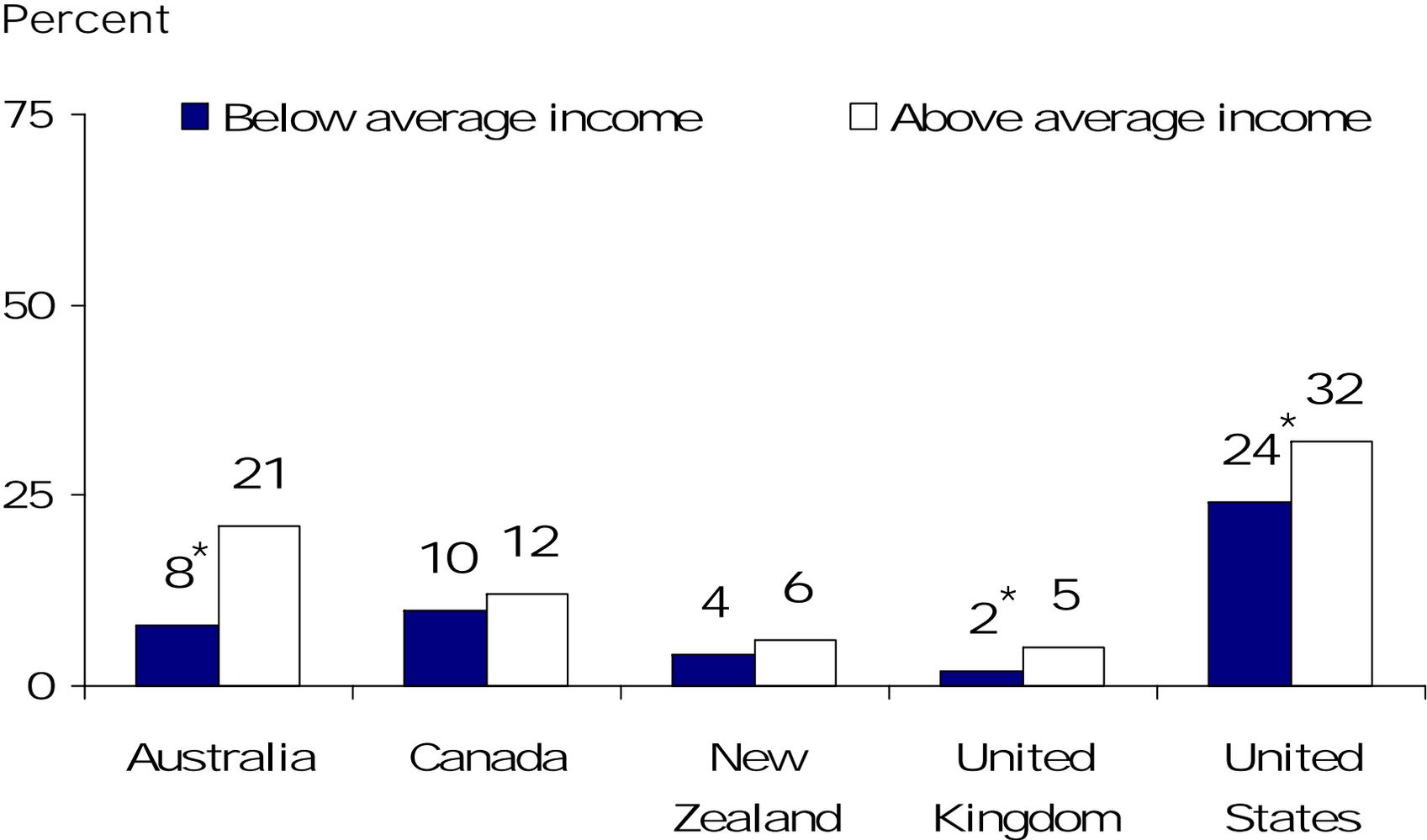
Uninsured = uninsured at time of survey or any time during the year.

Below average income numbers do not add up to 100% because of not sure/decline to answer.

* Significant difference between below and above average income groups within country at $p < .05$.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 4. Spent More than US\$1,000 Out-of-Pocket for Medical Care in Past Year, by Income



* Significant difference between below and above average income groups within country at $p < .05$.
Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 5. Health Status by Income

Percent:	AUS	CAN	NZ	UK	US
Fair/Poor Health:					
Below Average	22*	19*	22*	24*	30*
Above Average	7	7	6	8	6
Any of 6 Chronic Illnesses: [^]					
Below Average	63*	58*	62*	64*	62*
Above Average	41	42	40	39	42

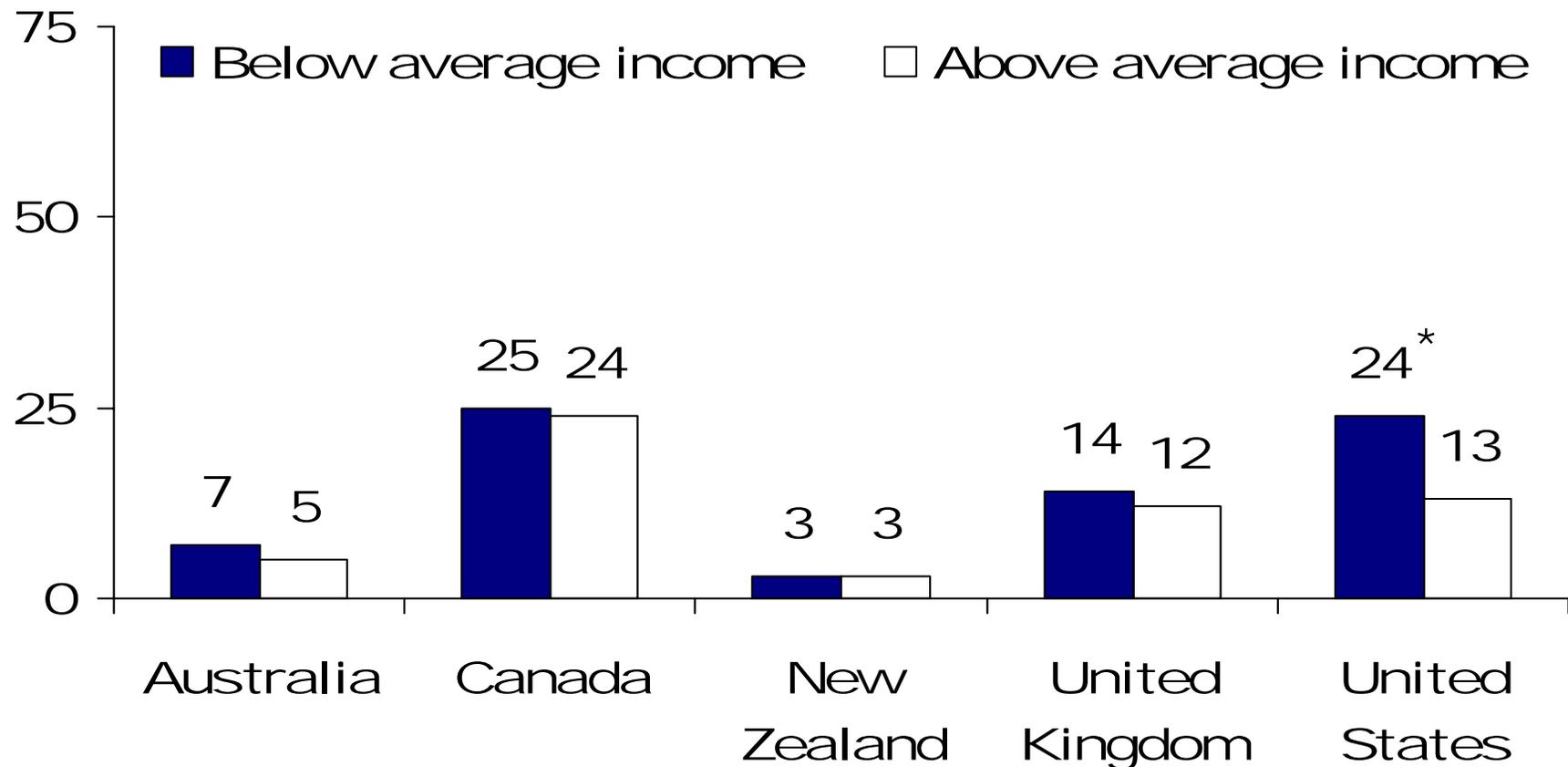
[^] Chronic illnesses include: hypertension, heart disease, diabetes, arthritis, lung problems, and depression.

* Significant difference between below and above average income groups within country at $p < .05$.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 6. Access to Doctor When Sick or Need Medical Attention, by Income

Percent waited six days or more for appointment when sick

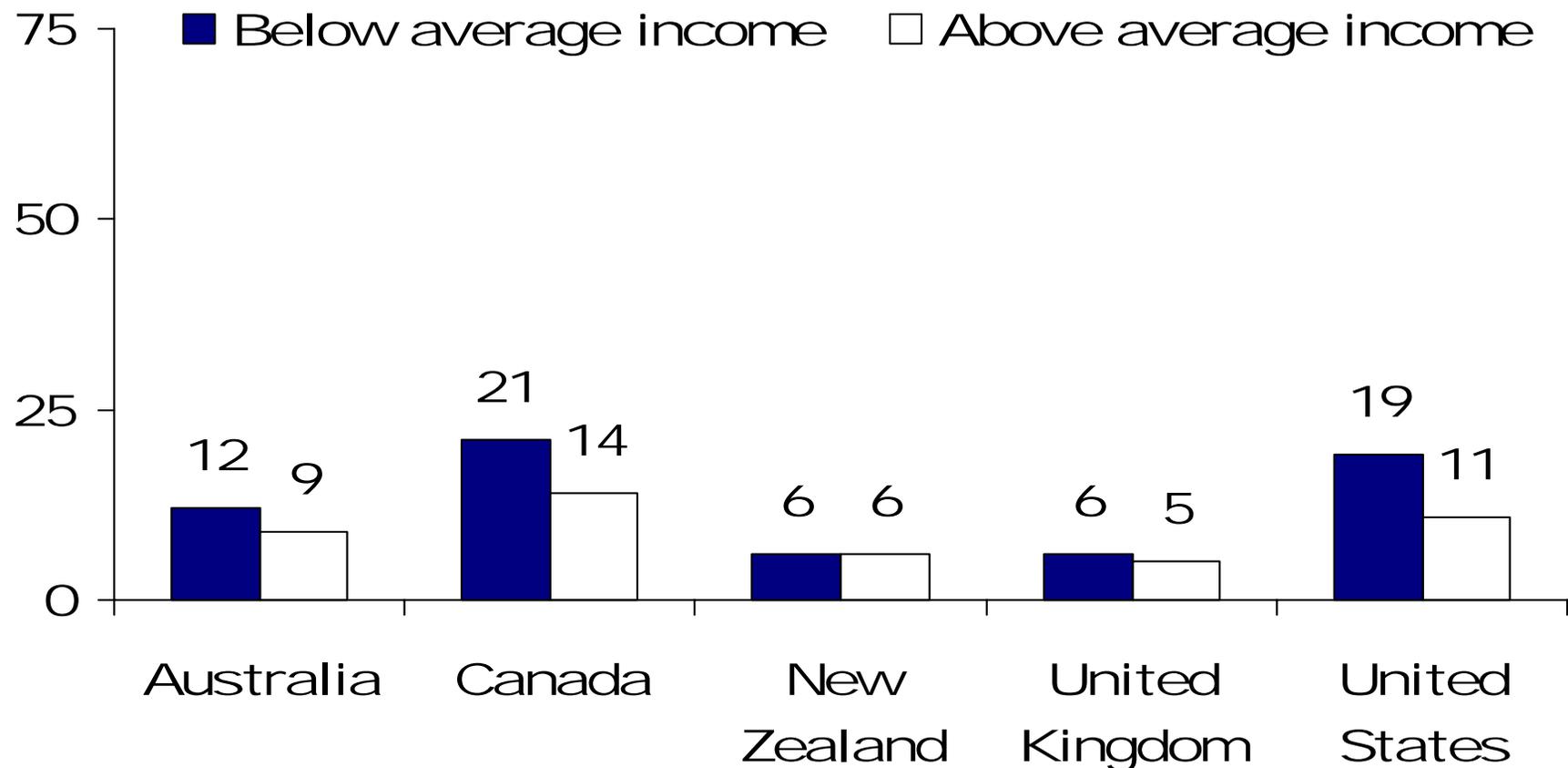


* Significant difference between below and above average income groups within country at $p < .05$.

Source: Commonwealth Fund 2004 International Health Policy Survey

Figure 7. ER Visit for Condition a Primary Care Doctor Could Have Treated if Available, by Income

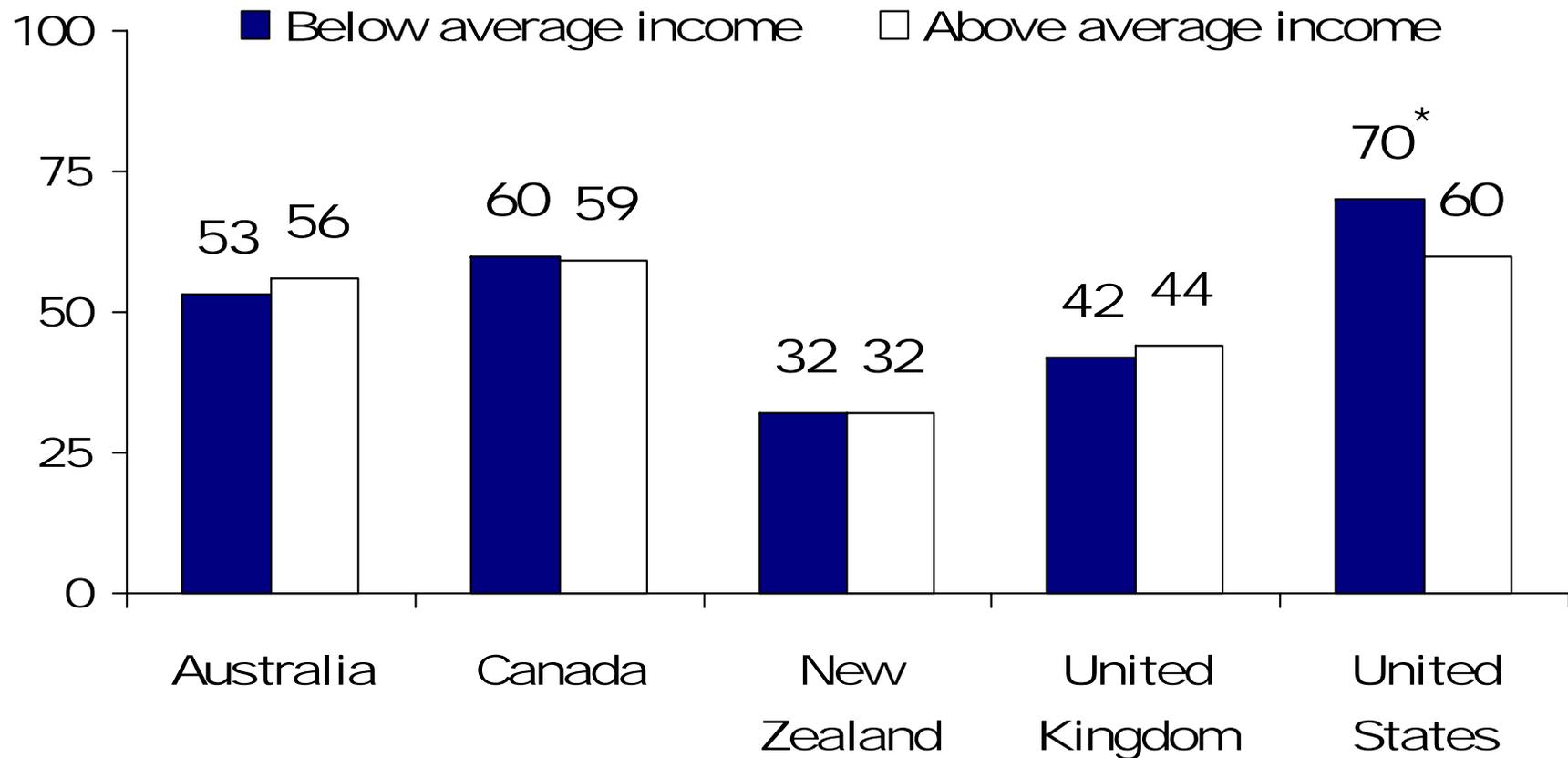
Percent



Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 8. Difficulty Getting Care on Nights, Weekends, Holidays Without Going to ER

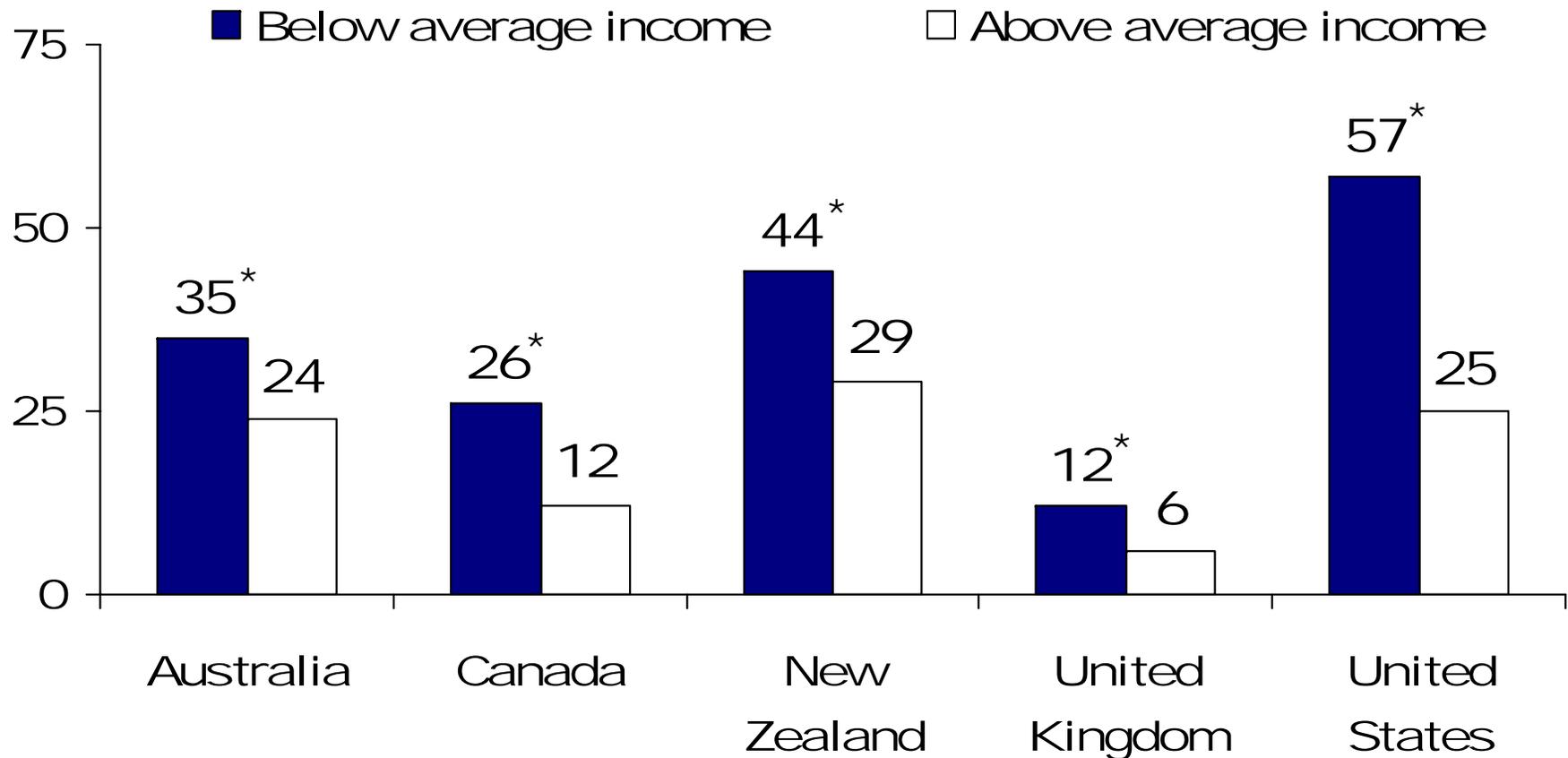
Percent saying "very" or "somewhat difficult"



* Significant difference between below and above average income groups within country at $p < .05$.
Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 9. Cost-Related Access Problems, by Income

Percent reporting any of three access problems because of costs[^]



[^] Access problems include: Had a medical problem but did not visit a doctor; skipped a medical test, treatment, or follow-up recommended by a doctor; or did not fill a prescription because of cost.

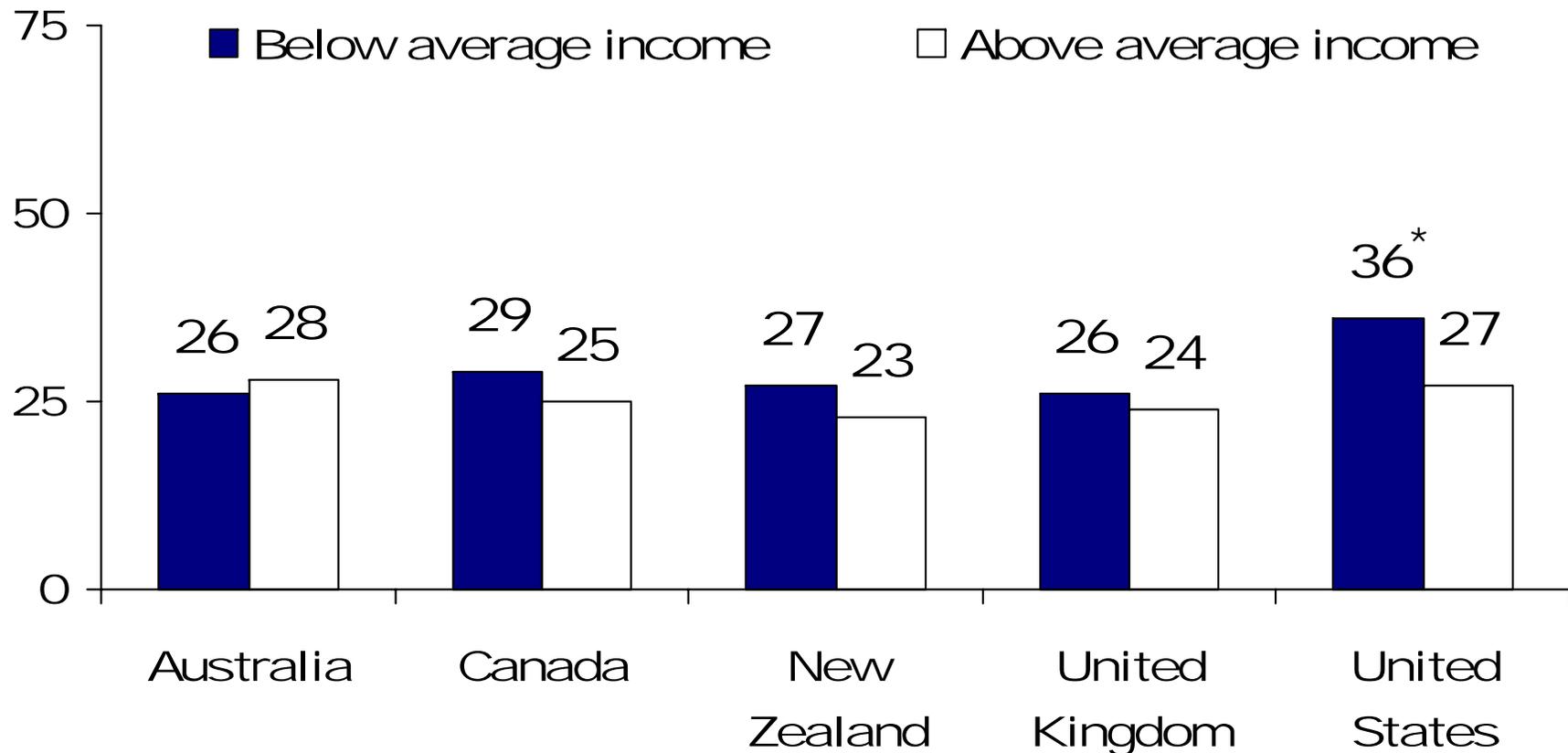
* Significant difference between below and above average income groups within country at $p < .05$.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 10. Care Coordination, by Income

Base: Have seen a doctor in past two years

Percent reporting any of three care coordination problems[^]



[^] Coordination problems include: Test results or medical records not available at time of appointment, received conflicting information from different doctors, or doctor ordered duplicate medical test.

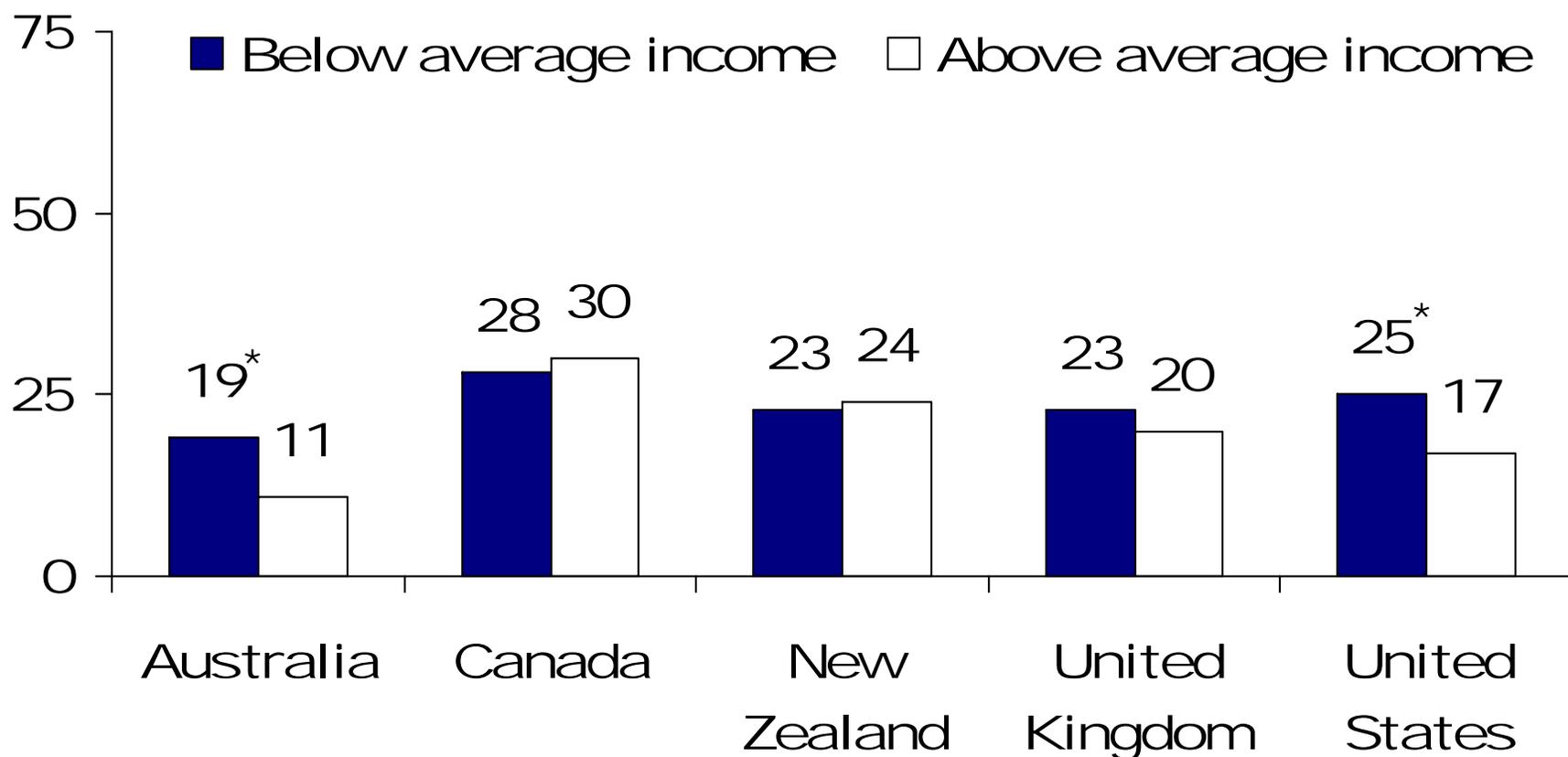
* Significant difference between below and above average income groups within country at $p < .05$.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 11. Did Not Receive Test Results or Results Not Clearly Explained, by Income

Base: Adults with test in past two years

Percent



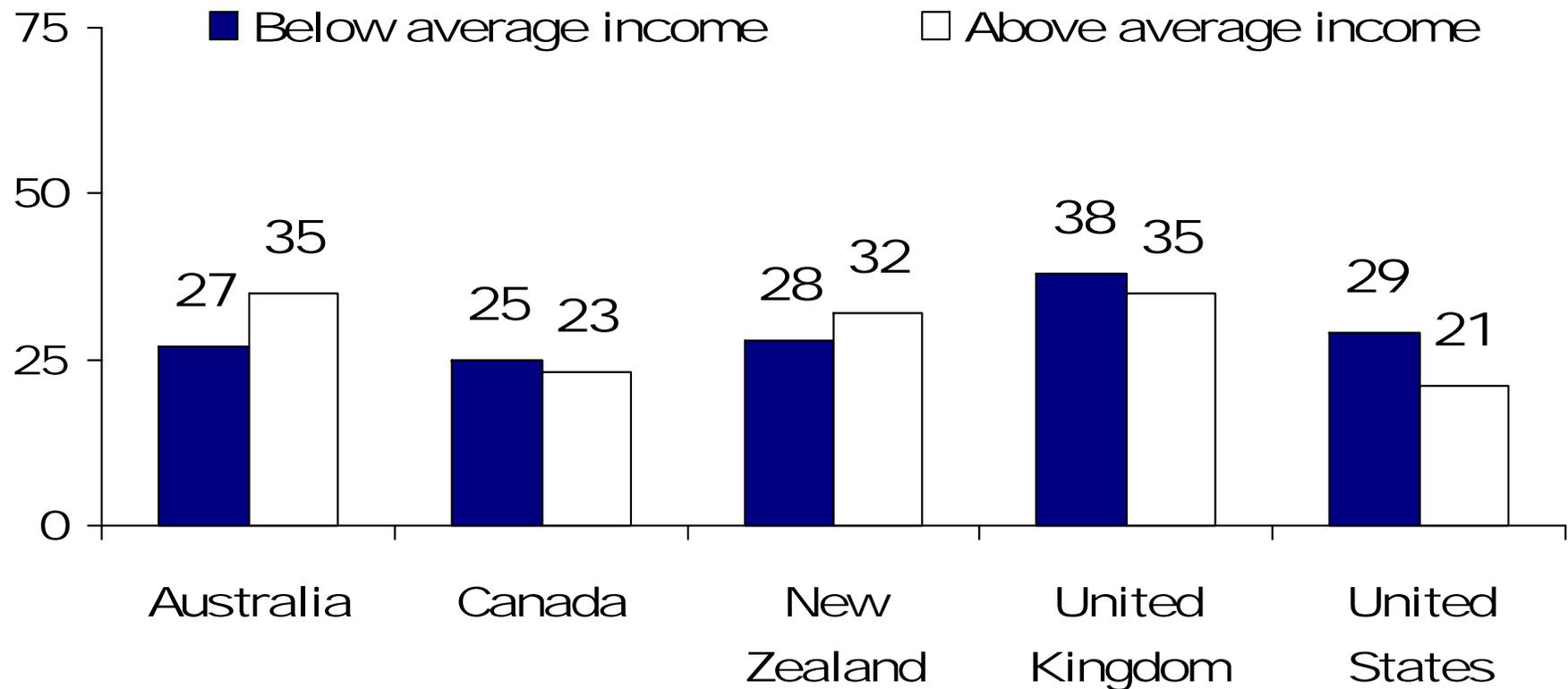
* Significant difference between below and above average income groups within country at $p < .05$.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 12. Percent of Patients Whose Doctor Has Not Reviewed All Medications, by Income

Base: Adults taking prescriptions regularly

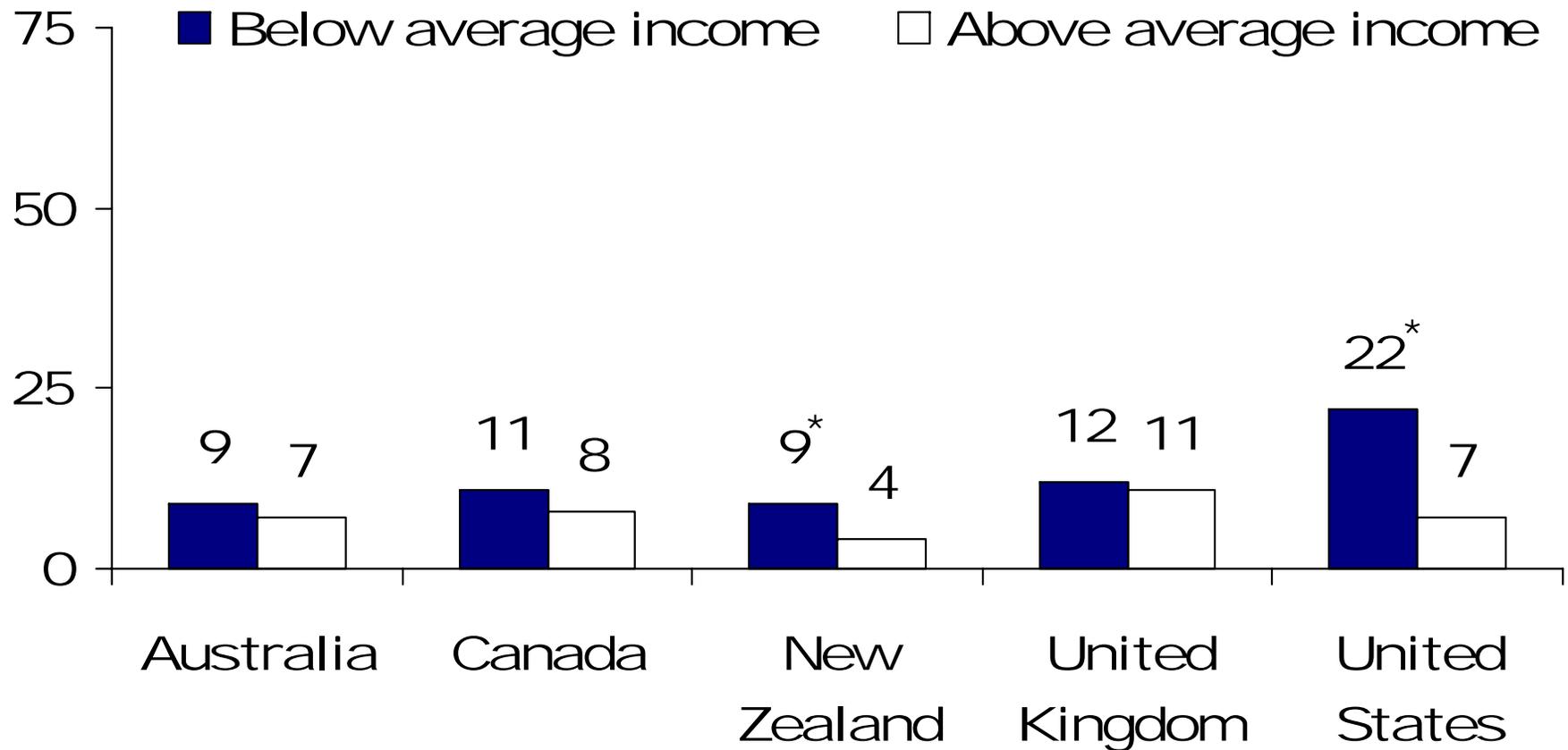
Percent



Source: Commonwealth Fund 2004 International Health Policy Survey.

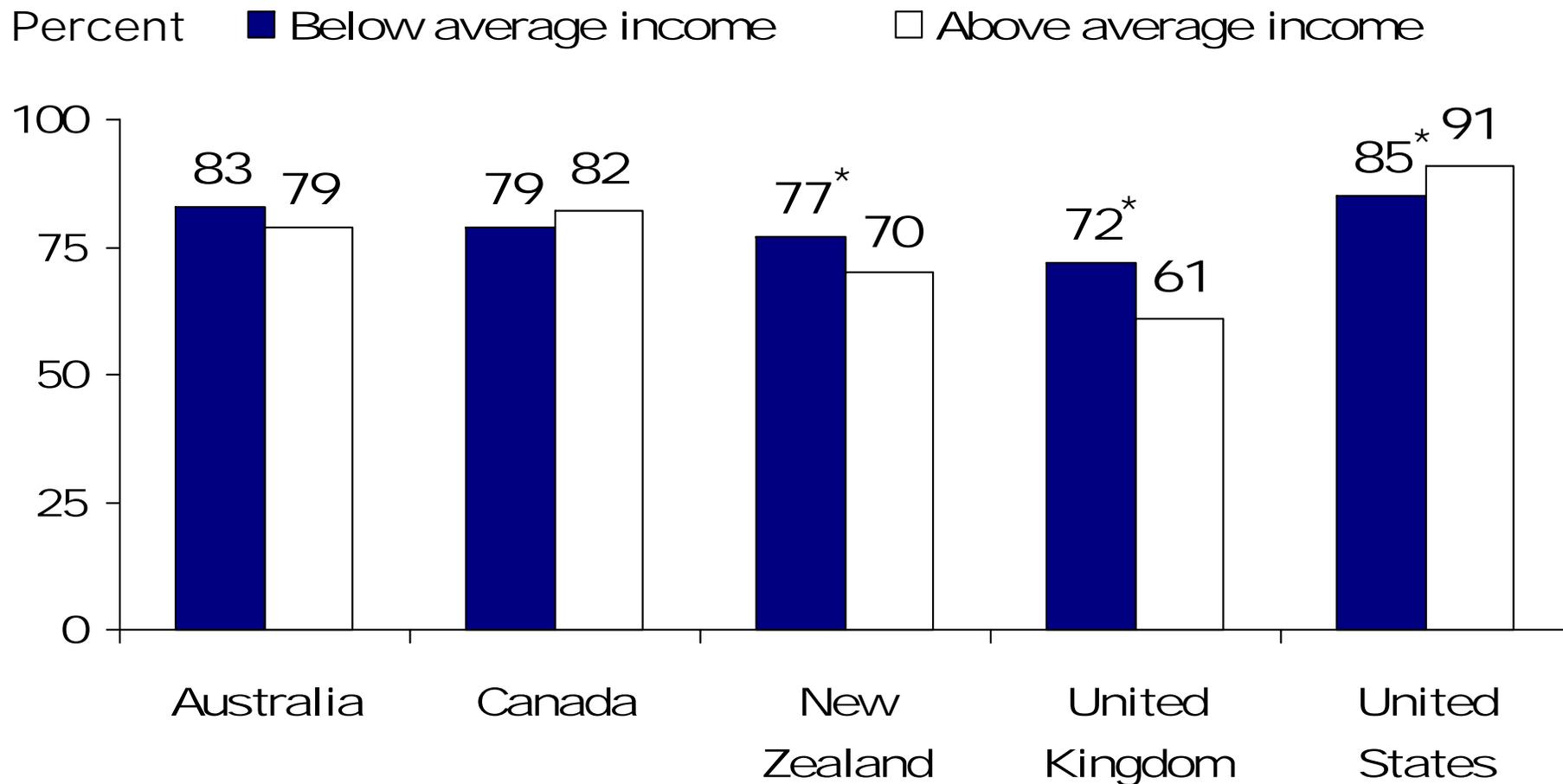
Figure 13. Rated Doctor Fair or Poor, by Income

Percent



* Significant difference between below and above average income groups within country at $p < .05$.
Source: Commonwealth Fund 2004 International Health Policy Survey.

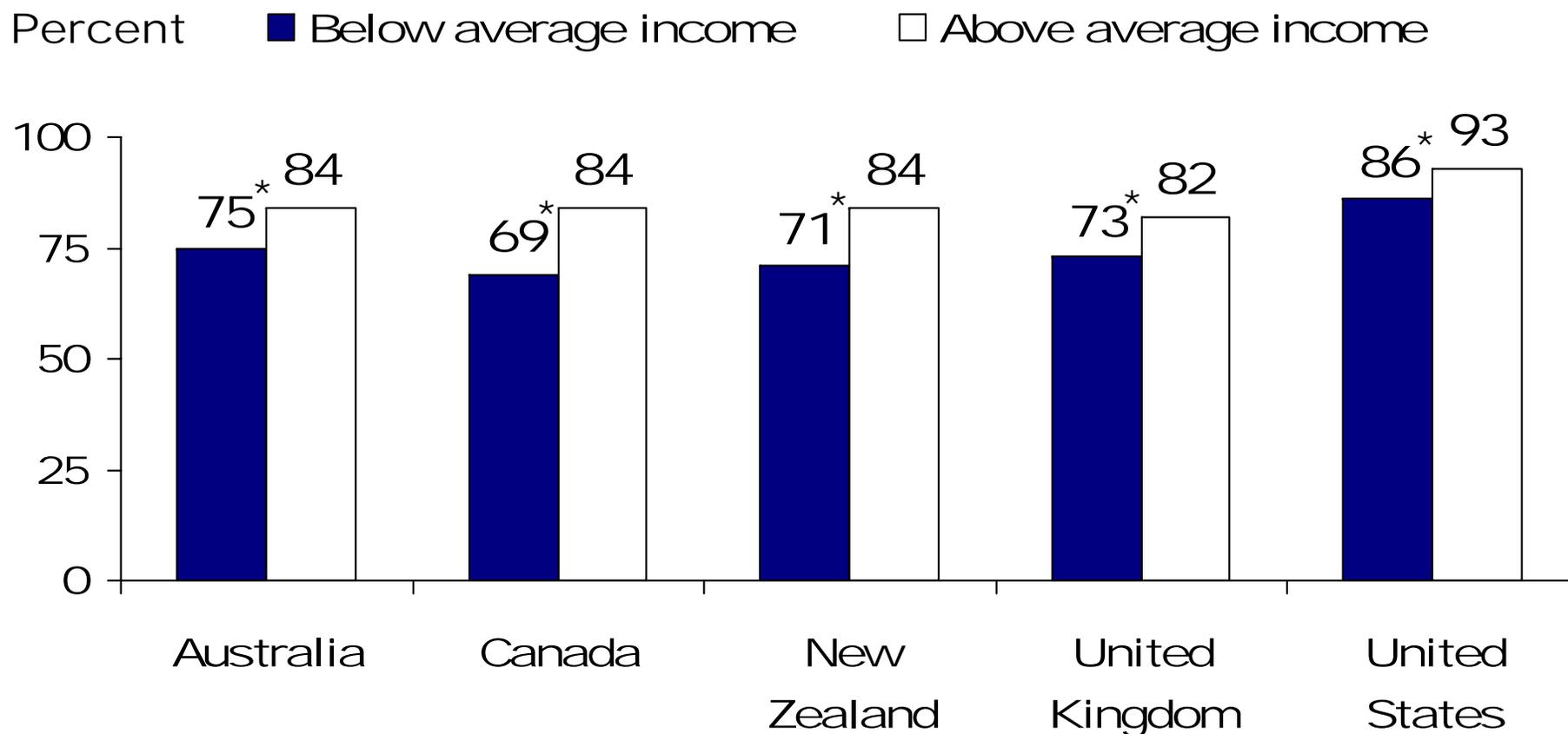
Figure 14. Had Blood Pressure Check in Past Year, by Income



* Significant difference between below and above average income groups within country at $p < .05$.
Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 15. Had Pap Test in Past Three Years, by Income

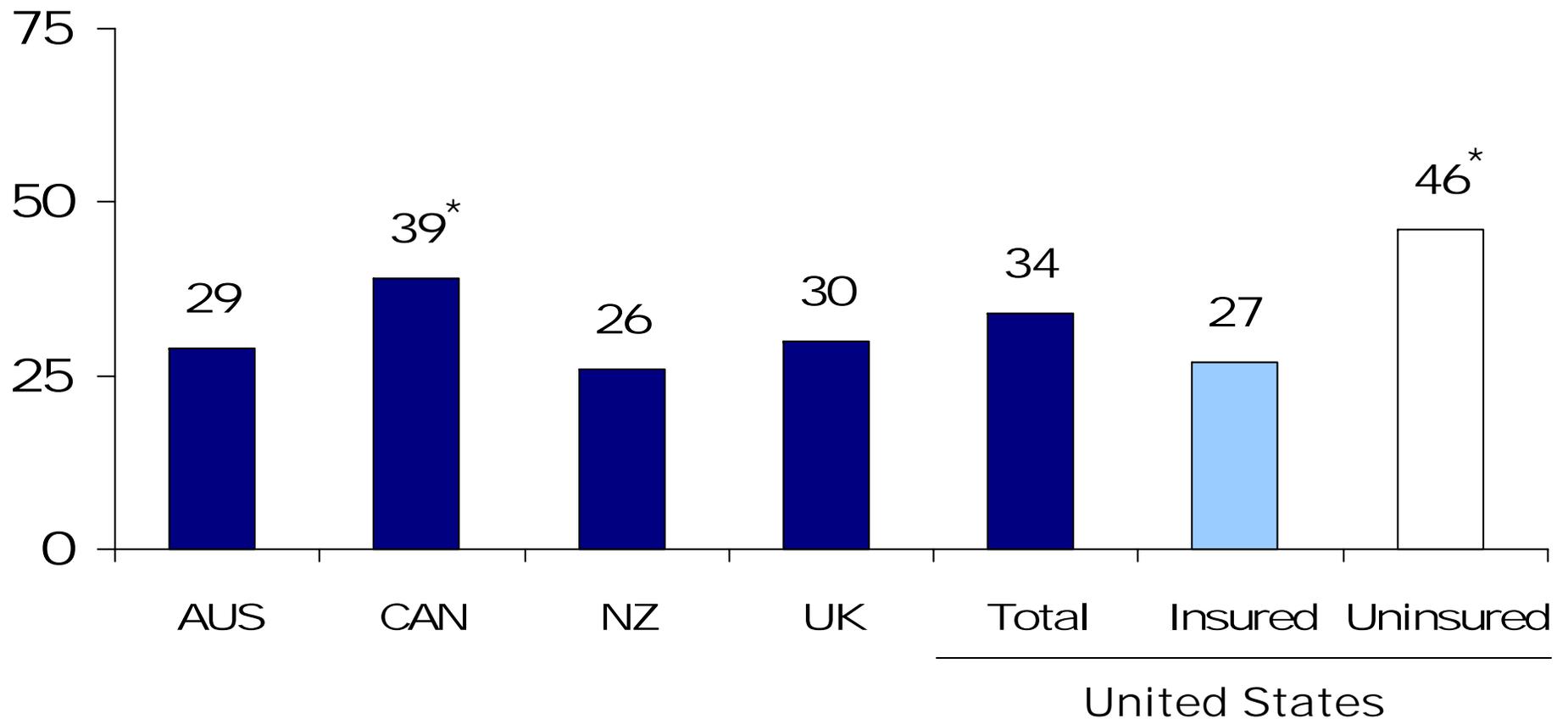
Base: Women ages 25-64



* Significant difference between below and above average income groups within country at $p < .05$.
Source: Commonwealth Fund 2004 International Health Policy Survey

Figure 16. Under 65: ER Use—
Comparisons with U.S. Insured and Uninsured

Percent under 65 with ER visit in past two years



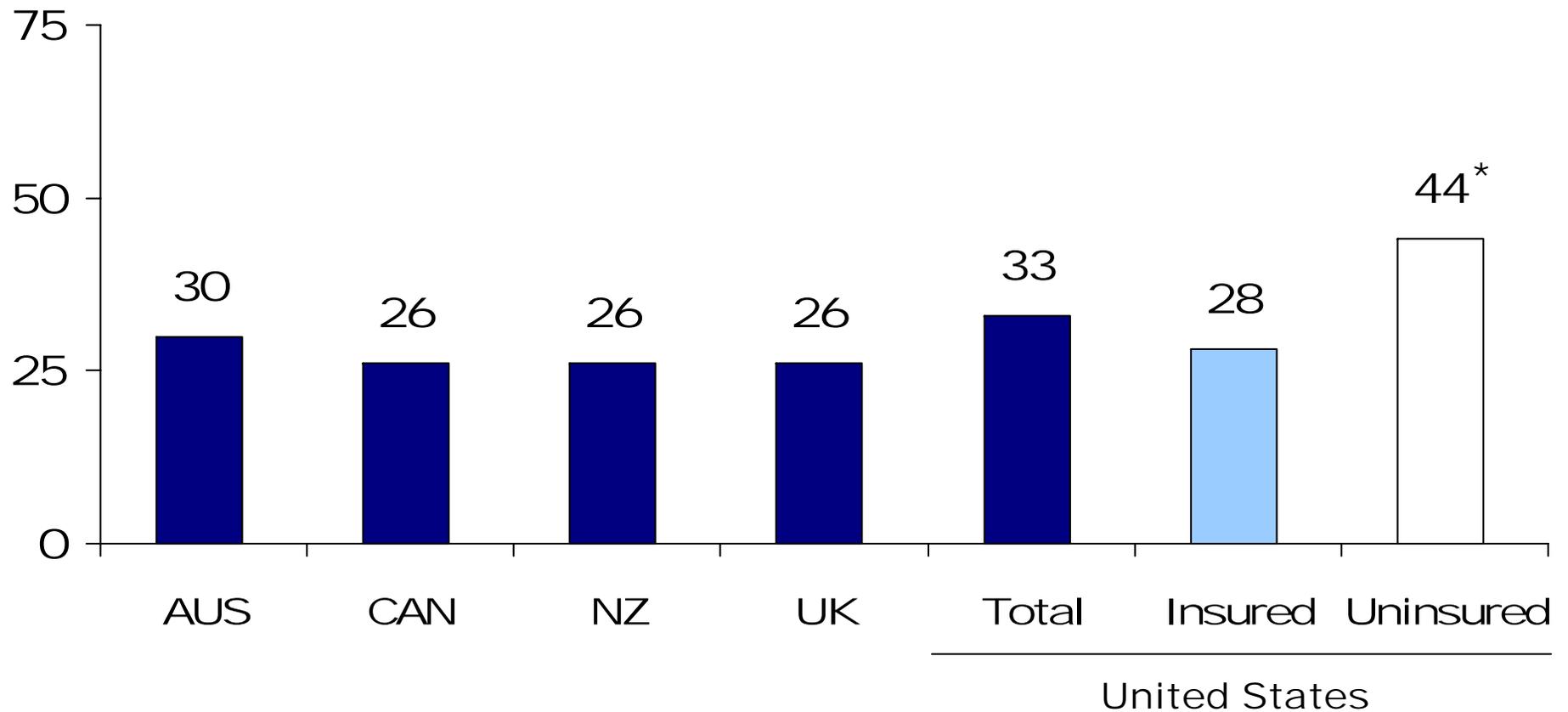
* Significantly different from U.S. insured at $p < .05$.

Uninsured = uninsured at time of survey or any time during the year.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 17. Under 65: Coordination Problem— Comparisons with U.S. Insured and Uninsured

Percent under 65 with at least one of three coordination problems[^]



[^] Coordination problems include: Test results or medical records not available at time of appointment, received conflicting information from different doctors, or doctor ordered duplicate medical test.

* Significantly different from U.S. insured at $p < .05$.

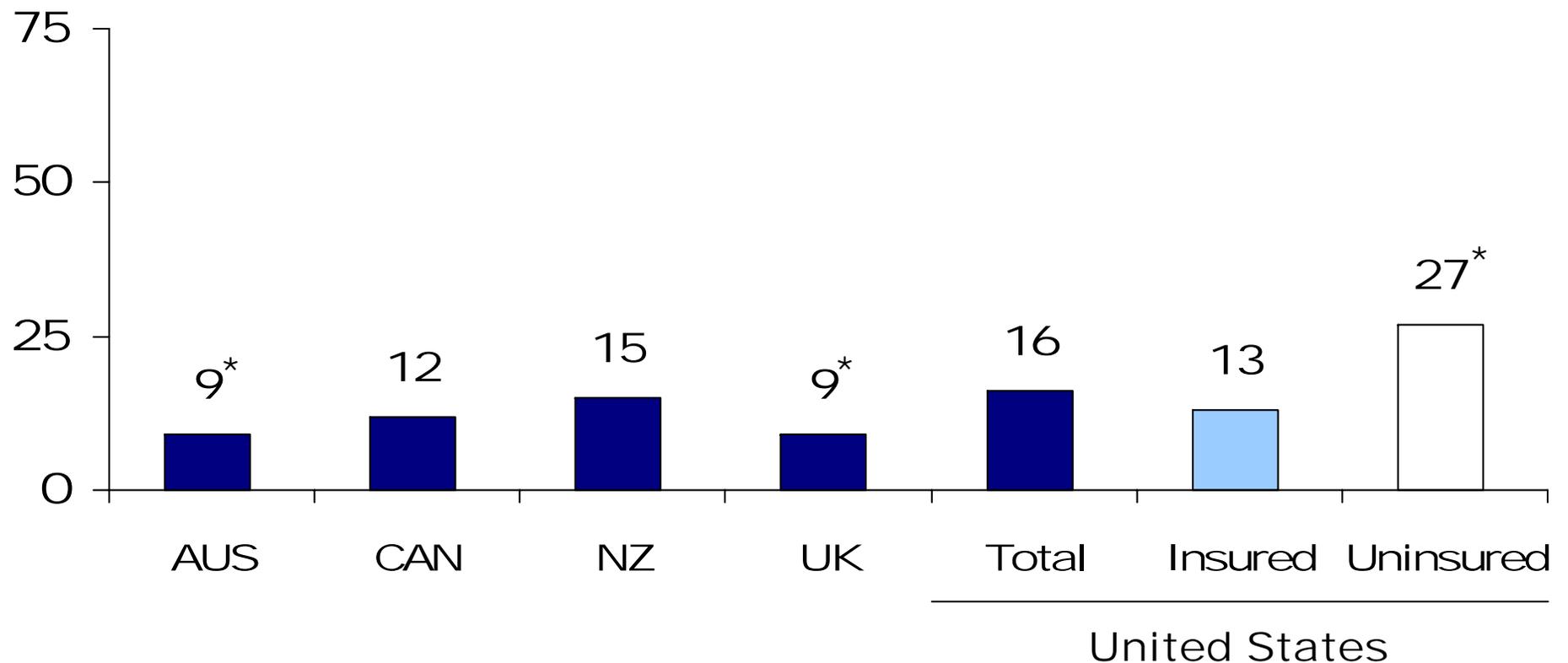
Uninsured = uninsured at time of survey or any time during the year.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 18. Under 65: Lab Test Errors— Comparisons with U.S. Insured and Uninsured

Base: Under 65 who have had lab tests in past two years

Percent given wrong result or delay in receiving abnormal test result

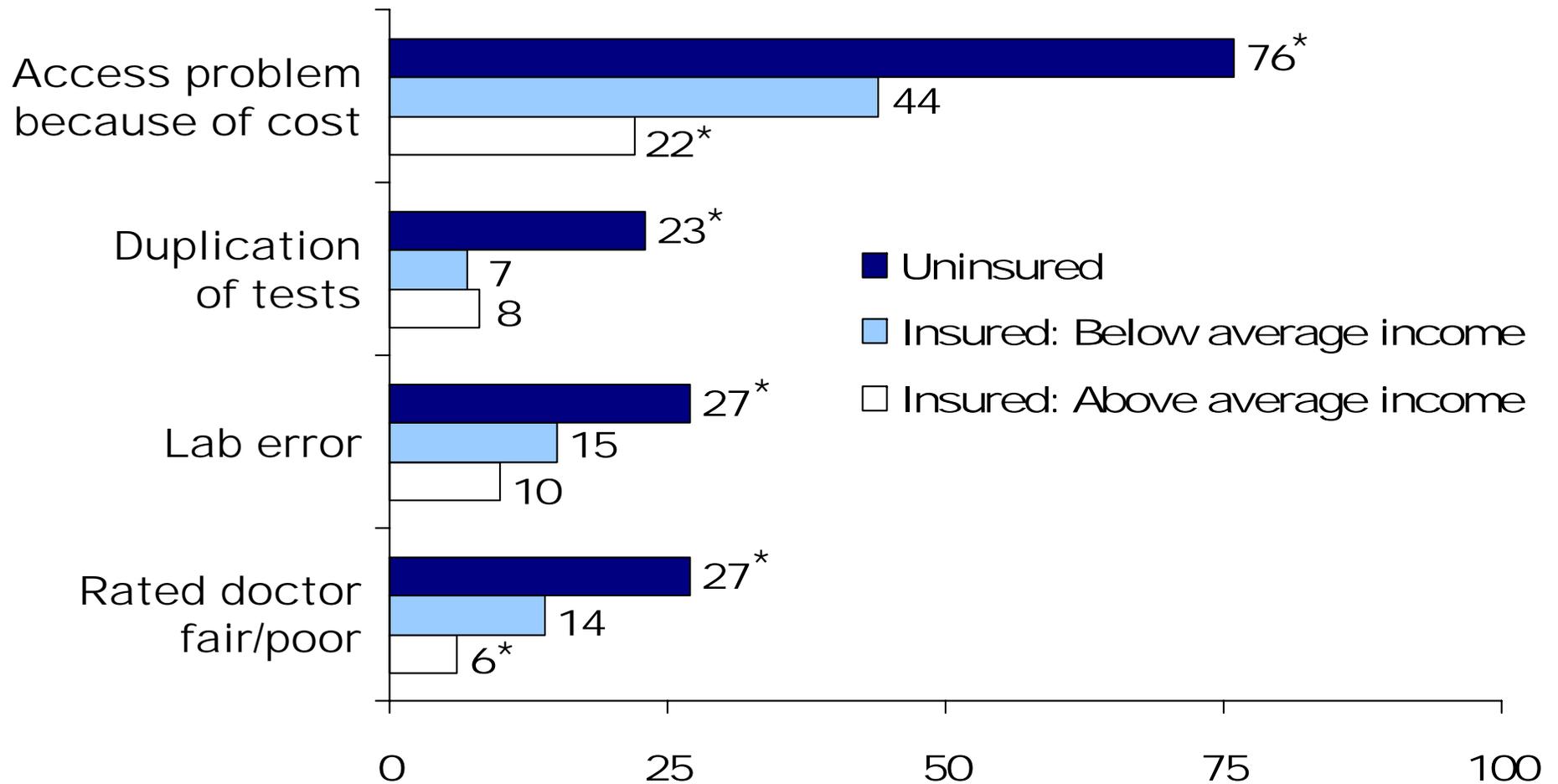


* Significantly different from U.S. insured at $p < .05$.

Uninsured = uninsured at time of survey or any time during the year.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 19. Health Care Experiences by Income and Insurance: U.S. Adults Ages 19-64



* Significantly different from insured below average income group at $p < .05$.

Uninsured = uninsured at time of survey or any time during the year.

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 20. Ranking of Below Average Income Adults' Experiences by Country

Number of Measures Where Below Average Income Adults' Experiences in Country Was the Worst Compared with Below Average Income Adults in the Other Four Countries

	General access (4)	Access because of cost (4)	Coordination (9)	Doctor-Patient (8)	Prevention (5)	Total (30)
AUS	0	0	0	0	1	1
CAN	2	0	3	0	1	6
NZ	0	0	1	1	0	2
UK	0	0	2	1	3	6
US	2	4	3	7	0	16

Source: Commonwealth Fund 2004 International Health Policy Survey.

Figure 21. Inequity Summary: Number of Measures Where Below Average Income Adults Have More Negative Experiences

	General access (4)	Access because of cost (4)	Coordination (9)	Doctor- Patient (8)	Prevention (5)	Total (30)
AUS	0	3	1	0	0	4
CAN	0	4	1	0	0	5
NZ	0	4	1	3	0	8
UK	0	1	0	0	0	1
US	3	4	5	7	2	21

* Inequity counted when significant difference between income groups where $p \leq .05$ and gap of $\geq 5\%$; for U.S. $p \leq .05$ and gap $> 5\%$, or gap $> 5\%$.

Source: Commonwealth Fund 2004 International Health Policy Survey.