

**Kotegova Yaroslava Gennadievna**

Student

Ural State University of Economics

Russia, Yekaterinburg

**Scientific adviser: Salimgireeva Ekaterina Aleksandrovna**

## **INSURANCE IN THE USA AND RUSSIA**

***Abstract:** The article addresses the issues of insurance in the USA and Russia. Insurance business in each country is studied and some indicators are analyzed. Among them are the number of insurance companies, the services offered, profits of the company, popularity among the people and others*

***Keywords:** healthcare, insurance, profits, comparative characteristics.*

**Котегова Ярослава Геннадьевна**

Студент

Уральский Государственный Экономический Университет

Россия, г. Екатеринбург

**Научный руководитель: Салимгиреева Екатерина Александровна**

## **СТРАХОВАНИЕ В США И РОССИИ**

***Аннотация:** В данной статье рассматривается проблема страхования в сфере здравоохранения в США и России. Приводятся сравнительные характеристики страхового бизнеса по следующим показателям: количество страховых компаний, доходы компаний, цены на страховку, разнообразие услуг, популярность среди людей.*

***Ключевые слова:** здравоохранение, страхование, доход, сравнительная характеристика.*

US health care is one of the largest sectors of the American economy, in which huge resources are concentrated. The medical industry makes up one seventh of the entire national economy, which employs over 10 million people. Government health care has a multilateral impact on American society. Health policy affects the essential interests of almost all sectors, groups and classes of society, is in the center of the political life of the country.

The United States spend 2-3 times more on health care (per capita) compared with other industrialized countries of the West. But still millions of Americans do not have health insurance, which means guaranteed access to medical services.

However, there are quite acute problems in healthcare that determine a certain instability of this area. One of the most important reasons for the social insufficiency of American medical care (lack of universal access to medical services) lies in the presence of many sources of payment for medical services that create chaos and duplicate each other. Of course, in other Western countries, a «third party» (mainly the government) also pays for medical services, but these countries do not lay claim to the market nature of this sphere. Most developed countries have a universal («global») health budget and a clearly coordinated health care system funded through a single payer. In the USA there is no «global» budget and there is not enough coordination among parts of the system. Instead, there is a chaotic system of payers - insurers and providers of medical services, which operate independently of each other and usually strive for different goals, which, in general, contributes to an increase in the cost of medical services and, as a result, their inaccessibility.

There are about 6,000 insurance companies in the United States, with a significant portion of life and liability insurance policies issued by 900 companies with offices in all states. Assets of insurance companies amount to \$ 2.9 trillion. Americans interact mainly with small companies, which make up 90 - 95% of the US insurance system. They strive to please the client, take into account the specifics of the place, form offers more flexibly than large structures. Large insurers insure the risks of large corporations, especially at the international level. American insurers believe that it is impossible to work profitably, scattering in different directions. Often, paradoxical as

it sounds, some companies have to curtail their activity to increase profits. In the event of a bankruptcy of any insurance company, other state insurers will be required to divide the assets of the bankrupt company in accordance with their market share in that state. To do this, there is a mechanism for issuing a license to work in the state, according to which insurers are forced to join the association for the liquidation and division of assets of bankrupt companies. The status of the insurer and its insurance agent in the United States is quite high, and the attitude to insurance agents is trusting. Each insurance company defines its own system of sales of insurance products. Americans do not need to be forced to insure themselves; they themselves are active in obtaining the necessary insurance products.

And in Russia there are about 2700 (including 800 in Moscow) insurance companies, and the 50 largest companies (including 31 in Moscow) concentrated 57% of revenues from voluntary types of insurance services in their hands, and 200 largest companies account for about 90% of voluntary insurance. The total amount of collected insurance premiums reached 27.4 trillion rubles. (\$ 4.7 billion) with a 1.5-fold increase in the share of liability insurance 37.7%. Russian clients place more trust in large insurance companies based in Moscow and often associated with the government. This situation is largely due to the instability of financial structures in our market due to the instability of the economic situation, the cases of financial adventurism that took place no more than 2-3 years ago.

Due to the weak development of the insurance market and the extremely poor demand for insurance services, Russian insurers are forced to be universal. The range of insurance services offered today is turned to face the client and is very diverse. For legal entities, offers of insurance companies established by legal entities will be most interesting. Such insurers know and consider the needs of the founders and are ready to insure what is needed urgently.

A number of legislative measures are being taken to strengthen customer confidence in insurance companies. State control over the activities of insurance companies is being tightened. Serious insurance companies actively use reinsurance, which makes it possible to practically guarantee the client receiving insurance

compensation. 4 years ago, voluntary insurance was popular in Russia. Inflation, fraud, legislative practice, etc. have undermined this belief. Today, a company engaged in voluntary insurance should do a very good job: it is necessary to provoke a potential insurer, to conduct a serious advertising campaign, convincing the client of the need for insurance, that the insurance policy will protect him. Today in Russia you can insure everything. A car, an apartment, a picture, a little dog - it all depends on the desire and capabilities of the client. At the same time, insurance terms offered for the client are quite favorable.

Table1. Comparative characteristics of the insurance business in the USA and Russia

<b>Indicators</b>	<b>The USA</b>	<b>Russia</b>
Number of insurance companies	6000, spread all over the states	2700 (800 in Moscow)
Services Offered	Insurance companies specialize in a particular range of services	A company offers a wide range of services
Profit	\$ 2.9 trillion In 2017	27.4 trillion rubles (\$4.7 billion) in 2017
Insurance premiums	In 2017, average insurance premiums were about \$ 2,713 per person and \$ 8,167 for the whole family. In 2019, they grew to \$ 6,251 and \$ 17,545.	The maximum base for calculating insurance premiums in 2019 is 1,150,000 rubles.
The popularity of insurance among citizens	Very high	Not very high
The price of the insurance	Expensive	Not very expensive

## REFERENCES

1. Вялков, А.И. Современные проблемы состояния здоровья населения Российской Федерации/ А.И. Вялков// Пробл. Управления здравоохранения. – 2002. - №1.
2. Википедия. [Электронный ресурс]. – URL: <https://ru.wikipedia.org/wiki/%D0%97%D0%B4%D1%80%D0%B0%D0%B2%D0%BE%D0%BE%D1%85%D1%80%D0%B0%D0%BD%D0%B5%D0%BD%D0%B8%D0%B5>
3. Система здравоохранения [Электронный ресурс]. – [https://knowledge.allbest.ru/law/2c0b65625a2bd79b4c53b88521316d37\\_0.html](https://knowledge.allbest.ru/law/2c0b65625a2bd79b4c53b88521316d37_0.html)