

# Free essay about patient protection and affordable care act (ppaca)

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## I. Statement of the Problem

During the passage into law of the Patient Protection and Affordable Care Act (Obamacare) in 2010, many of the Americans even the poorest citizens were given chances to avail of better health care services. As such, there was an uncontrolled budget on the federal health care provisions that has given them a dent in the budget. Although the policy can be credited for its coverage; that of which covering almost 80% of all Americans, the fact that the government is slowly delving into debt cannot be discredited. As such, this paper will examine the facts surrounding the Patient Protection and Affordable Care Act (Obamacare) and will suggest alternatives that can help alleviate the budget problem of the government.

## II. Background of the problem

Patient Protection and Affordable Care Act (PPACA) HR3590 or the Affordable Care Act (ACA) was signed and made effective by the President on the day of March 23, 2010. On June 28, 2012, the Supreme Court subsequently held the decision to justify the new health care act. By the time of the decision, the law was changed to allow the states to make their preferences in widening the access to Medicaid. The purpose of which is to provide health insurance to each and every American, including the country's poorest citizens. It will lessen premium costs paid for by the different families for health care services. Also, the costs that families will provide for in their health care insurances will be lessened. This cost will be reduced by restraining their expenses and will require precautionary care that will completely cover without any personal expense (United States Department of Health, n. d). There will also be a tax cut of 35% for the year 2013 and an additional 50%

for 2014 if businesses will give its employees health care. The said provision is offered for small businesses that employ less than 25 full-time workers. Truly, such an act can strengthen the national capability to help those who need assistance with their health concerns. However, because of the open-ended policies that the act is equipped with, the policy has allowed for an uncontrolled number of expenses that has increased its spending and the many limitations for the patients.

### III. Context of the Problem

The said policy has opened itself to face many problems that affect much of the stakeholders. The government being the major financier of this provision has carried much of the problems. Budget constraints for one challenge the government from providing the people with better options for health care. Because of the open-ended policies and the uncontrolled expenses for the different patients, the government has acquired an unexpected turn of events in their expenses. The greater part of the burden and the problem has been given to the government; that of which has increased the country's debt (Capretta & Moffit, 2012). Also, as stated by the Congressional Budget Office, between the years 1975 and 2005, the annual health expense per person rose by an average two percentage points faster than the person economic growth. To put it into context the heightening health care costs rose faster than the rise in the national income (Capretta & Moffit, 2012). Another stakeholder affected by the said problem is the patient. Because of the expense growth shouldered by the federal government, many of the Americans are having problems because of the limited coverage that is made available to them. The rising costs on the government's part have

limited the health care services that are available to the typical hardworking American. Although there are some who can afford to choose, their preference can no longer be possible because not all medical practitioners are open to having smaller pays if accredited by the said act. Those who opt for the privilege can no longer avail the premium services because of the budget problems faced by the government; thus closing the doors for those who opt for the premium services.

#### IV. Alternatives to the Patient Protection and Affordable Care Act (PPACA)

One alternative to the health care problem imposed by the PPACA would be to create conservative approaches that would consider a patient's age and not their income. As suggested by the Republicans, such a strategy would delimit the uncontrolled expense faced by the government (Flores, Roe & Scott, 2015). Second, a tax incentive policy would be a better option as this would enable the people to acquire health care policies that do not require an employer for insurance. Through tax incentives, people would have better options as they would be able to fund for premium health care services even with the scare of layoffs. Lastly, a policy that can increase the competition between different providers can allow the people to purchase health care insurance across state lines. Through such a policy, people would have better options in availing of insurance policies that better suit their needs. Also, businesses would have better chances of negotiations with the different providers by choosing the best company that can best fit their budget.

#### V. Recommendations

As part of my recommendation, I think it best if the policy could give provisions that would require a concerted effort from the patients and the

government. Those who would avail of the services would need to have a fixed contribution so as not to focus much of the expense of the government. Also, this contribution would act as a health care savings policy that would enable the patient to have the option of purchasing insurance or direct health care services. By doing such, patients would have better awareness on the budget that they are allowed to use, and patients would have open chances for availing premium services if they would have the fund. This suggestion and the option to have tax incentives mentioned above would help the Americans help themselves. One problem with this alternative would be the limitations of availing the program since not all Americans have jobs. Also, many of the believers of free health care would disagree with a suggestion since part of the expenses would be shared by the consumers and not only by the government.

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