

Patient protection and affordable care act research paper

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Following the American Psychologist Association's Guidelines

The people of the United States suffer from several serious issues, all related to health care: millions go uninsured every year, health care is too expensive, and the quality of care is poor, especially for the price. The Patient Protection and Affordable Care Act, or Obamacare, as it commonly known as, began addressing these issues. While several of the act's promises have not come into effect yet, it has managed to extend healthcare to the repetitively uninsured. While many of the accomplishments that the act has already made, and aims to make, are no small feat, there are still issues within the policies and procedures. For example, Obamacare boasts that it is a universal healthcare system. However, it is unlike any other in the world, and is technically forced on citizens in a variety of ways. This is in violation of several human rights. Another significant issue with the Affordable Care Act regards a cap on citizen's out-of-pocket expenses, and the fact that the administration decided to delay making a definitive decision, potentially costing many American's unprecedented medical fees. In its conception, and as it was being pitches to the American public, Patient Protection and the Affordable Care Act was pitched as universal healthcare, according to John D. Goodson, author of " Patient Protection and Affordable Care Act: Promise and Peril for Primary Care (2010). The government promised Americans universal healthcare without ever revealing what universal healthcare technically is. In the government's meager defense, Americans evidently did not bother researching what universal healthcare means in other countries. Lance Gable explains in his article, published in

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The Journal of Law, Medicine, and Ethics, that universal healthcare systems already existing in other countries bear almost no resemblance to the structure of Obamacare. Traditional universal healthcare plans, simply put, increase the taxes of citizens in order to cover healthcare for all. Individuals are permitted to go outside of the network, paying independently if they wish. They are required to have insurance and they are required to pay a base level of taxes that does not change yearly based on their compliance (2011). As you can see, the only real similarities between traditional healthcare and Obamacare is that a government-designed network exists, and citizens have access to it. Rather than give citizens a flat tax rate and choice to go in and out of the network, Obamacare insists that individuals pick an insurance provider. Goodson also reveals in his article that there is not a flat tax rate for all citizens in order to cover the “universal healthcare,” but instead a fine that will be imposed at tax season for those who, as the government put it, refuse to get healthcare. The government has offered the people enforcement disguised as a choice and it is for this reason that I believe Obamacare, as a whole, will fail.

There are many intricate reasons to why I believe that Obamacare will not flourish. Personally, I am for universal healthcare, but true universal healthcare. I am also pro-not being lied to. The administration insists that the tax imposed on the uninsured is not a tax; it is a mandate that occurs during tax season, which needs to be filed with your taxes. President Obama's Justice Department also claimed the mandate was an official tax in court briefings. The Supreme Court haphazardly allowed it to progress, with Chief Justice John Roberts basically saying that though he may not have agreed

with the tax itself, sometimes sacrifices must be made for the greater good (2011). Not only were citizens lied to, and continue to be lied to, about this mandate/tax, but the tax in and of itself is illogical; if an individual cannot afford healthcare, even under what is supposed to be a more affordable universal healthcare system, it does not make sense to tax them because of that. If they do not have money for insurance, they do not have money to be taxed. Not only is there this tax for citizens to worry about, but there are other penalties and taxes that went unmentioned until the document came into law. For example, there is now a 40% tax on comprehensive health coverage costing more than the designated cap, and new taxes that apply to Health Savings Accounts. There is also a 2.3% tax on medical equipment, paid by the patient, according to Jonathan Oberlander, author of “The Future of Obamacare (2012). Many also argue, and I agree, that Obamacare is in violation of basic human rights. Expensive healthcare that ensure the sociological cycle of poverty and poor health will continue is a violation of the basic human right to live, be healthy, and thrive. Obamacare makes it nearly impossible for disadvantaged individuals to get the affordable healthcare they were promised, and when they cannot afford it, they will be taxed for being too poor. The ACA is a monster that needs to be stopped.

In the event that the ACA does succeed, citizens still need to address individual flaws within the act's plan. For instance, the primary basis of the Affordable Care Act is right in its name: it was supposed to provide affordable healthcare for those who once could not afford it. Tom Baker states in his report, published by the University of Pennsylvania Law Review, that ACA claimed to have the potential to insure up to 30 million uninsured

Americans by making healthcare more affordable (2011). The act was supposed to make adjustments such as allowing students to use parental insurance plans until they were 26 and lower insurance rates for independent college students, families, and individuals with a low income. The act insisted that many of the plans would come with out-of-pocket expenses, just like any other insurance plan, but that there would be cap on those expenses based on the insurance holder's income . This created a high incentive for many Americans to drop their insurance policies when they could and await the open marketplace that the Affordable Care Act would offer. Many citizens grew tired of paying high out-of-pocket fees. They were anticipating lower costs with an insurance plan under the ACA, according to Gail R. Wilensky, author of, " The Shortfalls of ' Obamacare (2012)."

Unfortunately, that time never came. Citizens dropped their insurance providers, waited for the marketplace to open up, and officials voted to delay the cap on out-of-pocket expenses. Many Americans were left without insurance, or with insurance that exceeded the out-of-pocket expenses than they had previously experienced.

The Patient Protection and Affordable Care Act appears more like fraud with each shortfall I discover. That the administration deliberately ignored capping out-of-pocket expenses for citizens who desperately needed affordable healthcare is unsettling. Essentially, I believe this will be something that leads to the repeal of the ACA. It is rather insulting that it even has the word " affordable" in the name when Baker cites in his article that the projected number of enrollees in the program on opening day fell short by 85% (2011). Why? Because Obamacare is more expensive than the

government led the citizens to believe. Wilensky's calculations show a single mother of four, attempting to insure her family of five, on a salary of \$1400 each month, would have to pay nearly all of her monthly wages in order to do so (2012). I would be surprised if the ACA managed to stay afloat under those circumstances. However, if it does manage to succeed, I do believe that the administration will eventually have to put a cap on out-of-pocket expenses. The game that lawmakers are playing with the citizens cannot last; the citizens may not have experienced an outright lie, but even the most simple of individuals can see that policymakers did not quickly intend to save the poorer citizens any money in terms of out-of-pocket expenses. If Obamacare continues, lawmakers may enforce another tax on individuals who cannot afford out-of-pocket expenses. This notion would be just as preposterous as taxing people who cannot afford healthcare in the first place, but it may be enough fuel to light the fire needed for citizens to get their point across. We need to let policymakers know that we are done being lied to, and that they may not take advantage of us. It is not okay to tax the poor for being poor, nor is it okay to deny medical services to those who need it.

In sum, there are many flaws within the Patient Protection and Affordable Care Act. The structure of the act itself is flawed and needs to be completely removed or erased. The government cannot tax the poor for being too poor to afford health insurance. This is especially true when the health insurance is unaffordable, even to many in the middle class, let alone those below the poverty line. It is also wrong to lie to the nation's citizens, stating that obvious taxes are only mandates. The government also cannot deny medical

treatment to those who need it, or pass off Obamacare as universal healthcare when it clearly is not. Denying medical treatment or making medical treatment obscenely unaffordable is a violation against the basic human right to live. Beyond that, if the ACA does manage to avoid repeal, the administration needs to put a definitive and reasonable cap on out-of-pocket spending for insurance holders. This may seem like a small alteration, but it is simply the administration keeping their word. The ACA was supposed to be affordable and thus far, it is very expensive for everybody, even those who are making minimum wage. Adjusting the out-of-pocket spending cap is a small change but it may help restore faith in the act and increase enrollment, which has been dismally low since the market opened. Until these changes occur, most citizens will generally consider the Patient Protection and Affordable Care Act a failure. It is up to the administration to revise the act, and gain back the trust of the country.

References

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