## Amended patient protection and affordable care act



APPACA: Massive Minority Conforms to Bare Majority While the advantages of the Amended Patient Protection and Affordable Care Act seem pretty straightforward and obvious, the disadvantages seem less straightforward and nearly invisible in public dialogue. Balanced against such advantages as increasing insurance coverage to 92% of residents by 2019; voiding of preexisting illness exclusionary clauses; strengthening of employment-based coverage; and incentives to States for prevention services (Rudowitz, 2011), are more hidden features. These features include being allegedly unconstitutional, according to some experts (Wikipedia, org, 2011); leaving 8% uninsured, even after full implementation (Rudowitz, 2011); and being apparently biased in favor of allopathic medicine, which is less cost-effective than alternative and complementary medicine for many conditions and which is not the medicine-of-choice for many Americans (Free Health Advice Center, n. d.). The New England Journal of Medicine published a survey study conducted by Dr. David Eisenberg, of Beth Israel Hospital and Harvard Medical School, which showed that 85 million Americans are using alternative methods for their health care needs, most of which is not covered by their insurance, and furthermore, the number of times they used alternative medicine practitioners was considerably more than the number of times they used allopathic doctors (Eisenberg, Kesler, Foster, Norlock, Calkins, & Delbanco, 1993). Why isn't the new health reform program taking this preference into account? Exploring who the 8% uninsured will be, I am led to understand that Native Americans, people with financial hardship, and those with religious objections make up at least part of this group, and that everyone else will be required to have insurance or they will be fined, and the fines are fairly high (Galwitz, 2010). It seems, then, that people with https://assignbuster.com/amended-patient-protection-and-affordable-careact/

alternative lifestyles and alternative healing preferences are the most discriminated against, under the new health reform laws, because they will be fined and have no exemption category (unless they are unduly poor, Native American or can claim a religious exemption), or else they will have to obtain insurance for which they have no use, in order to conform with the US Government's AMA bias. It is not only people with alternative lifestyles and health beliefs/practices who are forced to conform. A June Kaiser Health Tracking Poll showed that 42% hold a favorable view of the law and 46% hold an unfavorable view. A majority think their own families, especially seniors, will be worse off, with this law. About 40% want to see the law repealed and replaced (19%) or repealed and not replaced (19%) (Henry J. Kaiser Family Foundation, 2011). The majority, to which everyone is being forced to conform, is actually not much of a majority at all. Unfortunately, that bare majority, to which everyone will be held, will likely impact the American health care practices in a negative way. Since ACO providers would share in the financial savings for enforcing efficient care, being judicious about referrals, and cutting back to what is most essential, and since ACO management will be watching with an eye toward efficiency (Cohen, 2011; Healthcare Economist, 2010), I anticipate increased corruption and decreased quality in patient care. I am not sure how well these concerns weigh against increased coverage, which is, of course, a noble goal. References Cohen, J. T. (2011, April 4). Summary of CMS proposed rule on accountable care organizations. Retrieved Ju; Jy 11, 2011, from Seton Hall Health Reform Watch: http://www. healthreformwatch.

com/2011/04/04/summary-of-cms-proposed-rule-on- accountable-careorganizations/ Eisenberg, D. M., Kesler, R. C., Foster, C., Norlock, F. E., https://assignbuster.com/amended-patient-protection-and-affordable-careact/

Calkins, D. R., & Delbanco, T. L. (1993). Unconventional medicine in the United States - Prevalence, costs and patterns of use. The New England Journal of Medicine, 328: 246-252. Free Health Advice Center. (n. d.). Alternative Medicine. Retrieved July 11, 2011, from The Free Health Advice Center: http://www.freehealthadvice.net/page%2010.htm Galwitz, P. (2010, April 13). Consumer's Guide to Health Reform. Retrieved July 11, 2011, from Kaiser Health News: http://www. kaiserhealthnews. org/Stories/2010/March/22/consumers- guide-health-reform. aspx) Healthcare Economist. (2010, January 26). What are accountable care organizations? Retrieved July 11, 2011, from Healthcare Economist: http://healthcare-economist.com/2010/01/26/what-are-accountable-careorganizations/ Henry J. Kaiser Family Foundation. (2011, June 30). The Scan -Public Opinion. Retrieved July 11, 2011, from Health Reform Source: http://healthreform. kff. org/Scan. aspx? tag= Public+Opinion Rudowitz, R. (2011). Health reform: Howe will Medicaid change? Retrieved July 11, 2011, from KaiserEDU. org: http://www. kaiseredu. org/tutorials/medicaid-andhealth-reform/player. html Wikipedia, org. (2011, July 9). Patient Protection and Affordable Care Act. Retrieved July 11, 2011, from Wikipedia: http://www.en.wikipedia.