

Us health care reform

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US health care reform dates back in the medieval ages, with the most recent changes being enactment of the Patient Protection and Affordable Care Act (PPACA) that was signed in March 2010 and the Health Care and Education Reconciliation Act of 2010. In 1965, Lyndon Johnson the then president of US introduced Medicare legislation that covered both hospital and general medical insurance for the senior citizens paid for by the federal employment tax. It also stipulated that a partial fund program for the poor be set up which would be financed by the different states where it would be established. Other reforms were instituted in the year 1985, 1997 reaching a climax in the year 2010.

This year saw the enactment of Patient Protection and Affordable Care Act that provided for introduction of a four year phased comprehensive health care insurance reforms that are designed to eradicate the worst practices of insurance firms. These practices include pre-condition screening and premium loadings, annual and lifetime caps and policy rescinds on technicalities when sickness seems impending. This statute also sets a minimum percentage of spending in health care to the average income per person, and creates different levels of insurance policy that suits the different income levels, tastes and preferences of consumers. It also provides a web based health insurance exchange program that allows consumers compare prices and purchase plan. The 2010 federal reform legislation was spearheaded by president Obama where he called on the congress to vote for the reform. The reform provides for expansion of Medicaid and subsidizing in insurance, guaranteed issue, community rating and individual mandate.

The 2010 acts call upon health insurance providers to cover more costs and that at least 80% of the premiums are spent on quality improvement. They also call for full coverage for immunizations and screening, and restricting lifetime and annual caps. The health care reform also aimed at reducing the deficit by \$143billion within the next decade. The reform also sought to eliminate overpayment in Medicare advantage by \$177billion in the next decade. The health care legislation passed in March 2010 provides for a seven phased implementation program. Within one year of enactment (2010-2011), the insurance companies would not be allowed to drop patients, it also provided for the fact that children under the age of 26 years would remain under their parents' health plan, that the uninsured adults who have pre-existing conditions will access health coverage under a new program for high risk pools.

In the year 2011, the legislation provides that Medicare will provide a 10% bonus payment to both primary care physicians and general surgeons, the entire costs of wellness visits will be covered by Medicare, that a new program for the poor shall take effect in October 2011, that payments to health insurers providing Medicare advantage services shall be frozen at 2010 levels and that all employers will be required to disclose in their W-2 tax forms the value of health benefits to their employees In the year 2012, payment to doctors and physicians will be enhanced to motivate them to be more accountable in improving the quality and efficiency of health care and that an incentive program is set up in Medicare for acute care providing hospitals in a bid to improve their quality. In the year 2013, a national pilot program will be conducted aiming to encourage doctors and hospitals to

better coordinate patient care, it also provides that claiming medical expenses threshold on itemized tax returns be revised to 10%, and that sale of medical devices to have an excise tax of 2.9% (NY-Times 2010). This legislation also provides for provisions to be effected in 2014, 2015 with last phase in 2018. These proposed reforms have suffered a number of setbacks. These range from political to legal challenges.