

The Patient Protection and Affordable Care Act A Primer for Hand Surgeons

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KEYWORDS

• Patient Protection and Affordable Care Act • Affordable Care Act • Obamacare • Health care reform

• Hand surgery

KEY POINTS

- The Affordable Care Act has 3 goals: provide health care for all Americans, control costs of health care, and improve the quality of health care.
- To achieve these goals, the government has instituted (1) an individual and business mandate, (2) federal subsidies for health care, (3) new requirements on the health insurance industry, and (4) changes in the practice of medicine.
- The Affordable Care Act also provides new funding for comparative effectiveness research, ties quality measures to reimbursement, and increases taxes on high-income wage earners and medical device manufacturers.

INTRODUCTION

Health care reform in the United States has been a matter of substantial debate in presidential elections since the early 1900s.¹ This evolved from an increasing awareness of patient populations without health insurance. After 8 years of deliberation, the administration of former President Lyndon B. Johnson introduced the Social Security Act in 1965. This bill established the first comprehensive national social insurance program with the creation of the Medicare (for patients over the age of 65) and Medicaid (for individuals or families with low incomes) systems.² Despite these landmark efforts, large portions of the population remain without health insurance coverage, and costs of delivering health care are increasing at an unsustainable rate (Fig. 1). Proposed solutions to these problems have been either limited or sweeping, but almost always divisive.

On March 23, 2010, President Barack Obama signed into law the Patient Protection and Affordable Care Act (more commonly known as the Affordable Care Act, or ACA).³ Although the assurance of health care coverage for every American is the prime directive, numerous provisions within the bill aim to control costs and improve health

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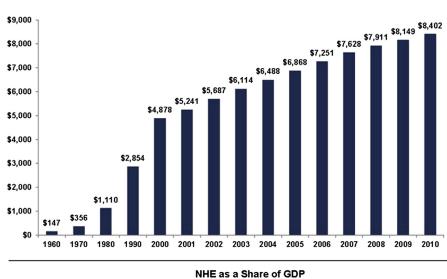
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5.2% 7.2% 9.2% 12.5% 13.8% 14.5% 15.4% 15.9% 16.0% 16.1% 16.2% 16.4% 16.8% 17.9% 17.9%

Fig. 1. National health expenditures per capita as a share of gross domestic product, 1960 to 2010. (Adapted from Centers for Medicare and Medicaid Services, Office of the Actuary, National Health Statistics Group. Available at: http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NationalHealthAccountsHistorical.html [see NHE summary including share of GDP, CY 1960–2010; file nhegdp10.zip]. Accessed April 25, 2014.)

care quality in the United States (**Box 1**).⁴ The ultimate effects of the ACA on health care in the United States remain an area of considerable uncertainty. Because of the broad scope of this bill, it has far-reaching implications for hand surgeons, including new quality benchmarks and changing reimbursement structures.

The 905-page ACA bill, as originally written, was comprised of 10 titles scheduled to be phased in through Jan. 1, 2018,⁵ costing a total of \$1.7 trillion (**Box 2**).⁶ Title 8 (Community Living Assistance Supports and Services) was abandoned by the

Box 1 ACA goals and components

Goals of ACA

- Provide health care for all Americans
- Control costs of health care
- Improve the quality of health care

Essential Components of ACA

- Individual and business mandate
- Federal subsidies for health insurance for uninsured patients
- Extensive new requirements on health insurance industry
- New regulations on the practice of medicine

Obama Administration on Oct. 15, 2013, on the grounds that it would not be financially viable.⁷ The 5% cosmetic surgery tax in Title 9 was also subsequently repealed, as it was felt to disproportionately affect the middle class and women.⁸ There have been many other modifications to the ACA since initial implementation, and this article attempts to provide the most current account of the bill.

KEY ASPECTS OF THE ACA Access

The ACA is estimated to increase the number of Americans with health insurance by 32 million by 2019.9 There are multiple avenues through which the ACA attempts to achieve this goal. The most notable measure is by expanding Medicaid eligibility to Americans in a wider income bracket; this alone is estimated to result in 16 to 18 million newly insured Americans.¹⁰ Medicaid eligibility will be expanded to up to 133% of the poverty line. Further, tax credits will be available for the purchase of health insurance for people between with incomes between 100% and 400% of the poverty line.9 The ACA also limits insurance exclusions, prevents the use of lifetime caps on insurance, makes it illegal to deny insurance coverage for those with preexisting conditions, and allows insurance coverage for children on parental plans up to the age of 26.9

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