

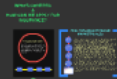
Jiamei Dental: Private Health Care in China, Chinese Version



TheCaseSolutions.com

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Thank You!

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The Patient Protection and Affordable Care Act (ACA) was signed into law by President Obama on March 23, 2010. The ACA is a landmark piece of legislation that aims to reform the U.S. health insurance system. It addresses issues such as the number of people with health insurance, the cost of health insurance, the quality of health care, and the role of government in the health care system. The ACA is a complex piece of legislation that has been the subject of much debate and controversy. It has been praised for its potential to improve the health care system and reduce costs, but it has also been criticized for its impact on the economy and the role of government in health care.

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Introduction

The Patient Protection and Affordable Care Act, often shortened to the Affordable Care Act (ACA), or nicknamed Obamacare, is a United States federal statute enacted by the 111th United States Congress and signed into law by President Barack Obama on March 23, 2010. Before the ACA, millions of individuals could not afford nor had access to health insurance coverage. By 2016 at least 28 million American citizens had gained access to healthcare insurance (Kaiser Family Foundation, 2017). American citizens can now qualify for health insurance via Medicaid or Medicare, and they can also purchase insurance via state regulated Marketplaces. The expansion and the availability of health insurance coverage has greatly impacted health insurance premiums. Thus, generating a great political debate as to how to conserve cost, while also improving access to health insurance and quality of care.

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Under the Affordable Care Act, nearly 20 million Americans gained access to health insurance. Before the enactment of the Affordable Care Act, at least 44 million American citizens were uninsured (Kaiser Family Foundation, 2017). However, after the passing of the Affordable Care Act the number of uninsured Americans significantly decreased. As of 2016, at least 28 million American citizens still remained uninsured (Kaiser Family Foundation, 2017). The majority of the individuals who are uninsured or who can't afford health insurance coverage come from single income households. In order to qualify for the Medicaid you have to meet a certain income poverty level, which determine if you have free health insurance, insurance premiums, or if you pay out-of-pocket.

State-based Marketplace- Federal Platform (SBM-FP)

This form of marketplace is still ran and operated by the state government, however it utilizes a Federally-Facilitated IT platform.

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State-Partnership Marketplace (SPM)

Allows for individuals and companies to have face-to-face assistance when selecting an insurance via the market place, and Health and Human Services continue to handle the remaining marketplace functions.

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Federally-Facilitated Marketplace (FFM)

The department of Health and Human Services controls all of the operations of the marketplace. Individuals and companies apply for and enroll in insurance via healthcare.gov.

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Medicaid & The Affordable Care Act

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When the Affordable Care Act was passed, a main purpose was to expand Medicaid. In doing so, every U.S. state was given the optional choice to decide whether Medicaid expansion would happen within the state (Courtemanche, C., et al., 2016).

Medicaid Expansion in the U.S.



Short Term Results

- Less Americans uninsured
- Medicaid also expanded to non-elderly adults
- In 2014, those who were uninsured dropped by (Buchmueller, et al., 2016):
 - 7.1% for Hispanics
 - 5.1% for African Americans
 - 3% for Caucasians

Long Term Results

- Greater medical coverage
- Improved access to care
- Economic improvements (Antonisio, et al., 2018)

Coverage-significant gains in coverage and a reduction in those who are uninsured. Access to care-more access to care, greater utilization of services, affordability of care, financial security among those with low-income, improved self-reported health, economic-reduction in uncompensated care costs for hospitals/clinics and improved employment in labor market

Criticism

- Provider shortages (Antonisio, et al., 2018)
- Increases in Medicaid spending for government (Antonisio, et al., 2018)

