# Affordable Care in the U.S

#### Manuel F. Duncan

Asst. Prof. University of Toronto, Canada

## Abstract

The fact that there are more volumes of people applying for the insurance cover, means more cash to take care of the facilities and services that will be at use or at least this is the way the officers in charge of health insurance thought it would be when they were for the idea. Research has shown that the facilities have not been sufficient for the ever-increasing volumes of those applying for the PPACA. The numbers of healthcare practitioners are not enough to handle the number of people. This has placed the redistribution policy's weight on other sides more than others. The Constitution states that it is the government's role to fund the states with money to expand Medicaid to help cover the ever-increasing number of the insured population. This means that the government takes the money that has been collected and redistributes it to the various states to finance specific projects that will ensure the population receives the healthcare they need and in return more money is collected from the increase in the increased number of those that come to seek healthcare. According to the constitution, it is also the role of the government to collect the taxes from the wealthy, healthcare industries and private healthcare centers. The money collected is used to finance the Obama care program so that all the healthcare facilities that offer the Obama Care services are well equipped with equipment and skilled medical practitioners.

Keywords: PPACA, Private Health Insurance etc.

## 1 Introduction

The private health insurance organizations that offer services to those who have their cover under Medicare Advantage program, have had their payment from the government reduced to \$156 billion so that more cash can be distributed to the public healthcare sector which has a more inflow of patients. While this is logical, it places more strain on the private health insurers and has led to the laying off of some health practitioners to reduce the financial strain on the private organizations. This means a decrease in the quality of the healthcare services but more people being able to access these healthcare services. Some of the private organizations have had to hike their prices to balance this out but this has pushed away some of their potential clients and even led to some leaving the program. Pushing away these groups of people will mean a reduction in the amount of cash the Obama care is extracting from the American population to help run the program efficiently.

## 2 Methodology

To further help finance the Obama Care program, healthcare industries, that is; those who provide

> Received: September 2021 Accepted: December 2021 Printed: February 2022

healthcare products, equipment and gadgets, are taxed. The most expensive healthcare programs such as healthcare programs for heart diseases are taxed higher. Those who are wealthy or are earning a salary that is considered to be above the federal poverty level and have not signed up for healthcare insurance cover are given a penalty and this adds to the source of the program's income. From the above information, it can be concluded that the Obama care has been fueled through wealth sharing. Those who have more are taxed more and those with less and there is a balance that is created to ensure everybody is taken care of.

## 3 Results and Discussion

The Obama care received a lot of criticism and some of the members of the congress went for the modification of the Act. The Act's modification that the states could choose to have an out from the ACA helped to secure the wealthy meaning that they could not be taxed because they earn more than others. This lifted the taxation off their shoulders. The advantage to the Obama care program is that, now those who are confirmed to be on the federal poverty level and below now will not be burdening the Obama care program financially. Another modification is that the private sectors were now allowed to charge up to five times what Obama care cover does. Compared to the three times that was done before, this is an increase in the cash inflow for the private insurers which help them avoid lying off of the workforce and therefore sufficient skill and quality provision. This will give the Obama care a chance to tax the private sector more and, therefore, more cash for the public sector.

In 2012, the Act was modified so that each state could choose if it could implement the ACA in its state or not. The condition was that if a state chooses to not implement the Affordable Care Act, they were to find another health insurance program that is as affordable as the PPACA for its residents. The modification will wound the finances of ACA because those states that will not implement it will not be taxed under the categories that are taxed on the basis of health insurance. It could also mean that the state will not have control over the amount of cash given to the private insurers of those states thus they could receive more than they are supposed to. Another modification is the act resurrected the higher charges on the more complex health programs such as those that deal with cardiac problems. This will be costly for those who are on the federal poverty level and below and this might mean not acquiring cover for such health problems. Pushing away these groups of people will mean a reduction in the amount of cash the Obama care is extracting from the American population to help run the program efficiently.

The Constitution states that it is the government's role to fund the states with money to expand Medicaid to help cover the ever-increasing number of the insured population. This means that the government takes the money that has been collected and redistributes it to the various states to finance specific projects that will ensure the population receives the healthcare they need and in return more money is collected from the increase in the increased number of those that come to seek healthcare. According to the constitution, it is also the role of the government to collect the taxes from the wealthy, healthcare industries and private healthcare centers. The money collected is used to finance the Obama care program so that all the healthcare facilities that offer the Obama Care services are well equipped with equipment and skilled medical practitioners.

## 4 Conclusion

The government has the duty to regulate interstate commerce. It regulates the healthcare transactions that happen amongst states and the economic activities that are included in it. For instance, pharmaceutical products exchange amongst the states and the tax rates involved ensuring affordability to the citizens and at the same time ensuringfinical returns to the government.

## References

- S. S. Kathleen. (2012 July 9). Health Care: Constitutional Rights and Legislative Powers.*Congressional Research Services*, 7(5700), 12-13. Retrieved from https://fas.org/sgp/crs/misc/R40846.pdf
- O. Barack and JD. (2016 August 2). United States Health Care ReformProgress to Date and Next Steps. *The JAMA Network*, 316(5), 525-532. doi:10.1001/jama.2016.9797
- G. Maureen. (2017 March 20). Republicans Modify
  Obamacare Repeal Bill to Win More GOP
  votes. Retrieved from
  https://www.usatoday.com/story/news/politics/2
  017/03/20/republicans-modify-obamacare repeal-bill-appease-conservatives/99427432/
- O. Jonathan. (2017 January 5). The End of Obamacare.The New England Journal of Medicine DOI: 10.1056/NEJMp1614438