

The Affordable Care Act: Progress and Unfinished Business

Health for Life Goal | ACA Changes

Health Coverage for All, Paid for by All

Provide health care coverage for all	Expands coverage to 32 million individuals (95% of those legally residing in the US).
Maintain government financing for vulnerable populations	Maintains Medicare coverage. Expands Medicaid and provides federal funds to states to do so. Creates a temporary reinsurance pool for early retirees.
Adopt reforms to make coverage easier to get and keep	Implements a number of insurance reforms, such as prohibiting insurers from dropping coverage or excluding those with pre-existing conditions; allowing parents to include dependent children up to age 26 on their insurance plans; and eliminating annual and lifetime limits.
Ensure individual responsibility	Every individual must have and contribute to the cost of health coverage or face a tax penalty.
Ensure employer responsibility	All but small employers must take responsibility for providing health care coverage for their employees and contribute to its cost or pay tax penalties.
Guarantee collective financing	Hospitals will contribute \$155 billion in savings over 10 years.

Most Efficient/Affordable Care

Simplify public and private insurance	Requires adoption of uniform processes and standards (such as claims processing) to reduce the burden on patients, providers and insurance plans.
Develop best practices	Creates an entity to oversee comparative effectiveness research, and invests \$2.5 billion in evidence-based medicine to better understand which therapies and treatments work best.
Enhance transparency	Requires providers to report publicly on certain quality and performance measures. Requires hospitals and insurers to make public the price/market rate of health services.
Ensure an adequate workforce	Creates a commission to address workforce shortages and encourage training in key areas. Provides enhanced funding to train allied health professionals. • <i>Fails to expand the number of Medicare graduate medical education slots to increase the supply of physicians.</i>
Enhance performance improvement	Establishes a national quality improvement strategy to identifying those priorities that have the greatest potential to improve patient care outcomes and those measures that are most actionable.
Make care more efficient and affordable	Adopts provisions that reward quality over quantity of services. Establishes a value-based purchasing payment system for hospitals, and adopts penalties for readmissions and hospital-acquired conditions. Allows for voluntary demonstration programs and pilots that would bundle Medicare payments for certain services, develop Accountable Care Organizations, and create patient-centered medical homes.
Create a better alternative to today's liability system	Provides demonstration grants to states to create alternatives to current tort litigation, but fails to adopt significant changes on a national scale.

Highest Quality Care

Redesign coverage and payment to guarantee parity	Adopts full mental health parity, ensuring that coverage of mental illness/substance abuse is as comprehensive as that for general health care. Provides funding to support mental health education and training, and to create national centers of excellence for depression (included in the 2008 <i>Mental Health Parity and Addiction Equity Act</i>).
Test payment redesign	Provides \$10 billion for a new Center for Medicare & Medicaid Innovation to test innovative payment and service delivery models that reduce cost and improve quality.
Reduce health disparities and inequity	Incorporates numerous provisions to improve minority health and reduce health disparities, including providing funding to improve care in underserved areas, requiring data collection on race/ethnicity and other factors, and elevating the Office on Minority Health.

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Highest Quality Care (continued)

Remove barriers to clinical integration	Fails to modernize laws and regulations to allow doctors, hospitals and others to work together in teams to deliver coordinated care. Provides the Secretary with only limited authority to waive certain barriers for certain demonstrations/pilots on an as-needed basis.
Expand options for end-of-life care	Fails to educate the public and providers about palliative care options; fails to address changes in coverage and reimbursement to encourage use of non-institutionalized settings; and fails to support creation of advance directives.

Best Information **HITECH Act** (included in the *American Recovery & Reinvestment Act*)

Encourage IT adoption by health care professionals and hospitals	Provides financial incentives for hospitals and eligible professionals that are "meaningful users" of certified electronic health records (EHRs), with penalties beginning 2015 for those who are not. • <i>Fails to provide an adequate transition period, considering the significant requirements of "meaningful use."</i> <i>Fails to account for unique circumstances of small and rural hospitals.</i> • <i>IT Certification program is overly complex, burdensome and limits flexibility.</i>
Create "interoperable" standards and systems	Provides funding to set up state-level health information exchanges. Creates an initial set of standards to help the sharing of data, but continued progress is needed.
Create a national patient identifier	Fails to encourage the private sector to create and use unique, confidential health information identifiers to accurately and securely link patients to their health records.

A Focus on Wellness

Invest in America's public health	Allocates \$12.9 billion to a new prevention and public health fund and creates a council to develop a national strategy to improve the health status of Americans.
Focus on chronic care management	Provides Community Transformation funds to reduce the incidence of chronic disease, create healthier school environments and reduce racial and ethnic disparities.
Promote healthy pregnancies and newborns	Requires states to cover tobacco cessation services for pregnant women enrolled in Medicaid. Requires employers to allow time for breastfeeding mothers to express milk.
Invest in school and community-based health	Provides grant funding to support the operation of school-based health centers and a childhood obesity demonstration project.
Create a source for consumer health information	Directs the Secretary to: create a national public-private partnership to raise awareness around nutrition, obesity, exercise, smoking and the prevention of key diseases; launch a national media campaign on prevention; and create a website with objective health information. Directs each state to design public awareness campaigns to educate Medicaid enrollees on preventive services.
Provide support and incentives to encourage healthy choices and behaviors	Eliminates cost sharing for certain preventive services. Provides grants to small businesses for workplace wellness programs, and to states to encourage Medicaid beneficiaries to participate in healthy lifestyle programs.
Invest in primary care services	Enhances loan programs to increase the supply of primary care physicians, nurses, allied health professionals and the public health workforce, especially in underserved areas. Invests \$12.3 billion in community health centers and funding for the National Health Service Corps. Provides grants and capitated payments to primary care providers in patient-centered medical homes.
Enhance health professions education to include a focus on wellness	Provides funding to establish a Primary Care Extension Program to educate primary care providers about preventive medicine, health promotion, chronic disease management, mental and behavioral health and evidence-based medicine. Provides grants for training graduate medical residents in preventive medicine specialties.

KEY: ■ completed, provisions included in the ACA
■ making progress
■ little or no action