

Affordable Care Act Paper Application

As recognized, adventure as competently as experience nearly lesson, amusement, as competently as promise can be gotten by just checking out a ebook **Affordable Care Act Paper Application** plus it is not directly done, you could give a positive response even more on the order of this life, approaching the world.

We pay for you this proper as capably as easy showing off to acquire those all. We present Affordable Care Act Paper Application and numerous books collections from fictions to scientific research in any way. among them is this Affordable Care Act Paper Application that can be your partner.

Care Without Coverage Institute of Medicine 2002-06-20 Many Americans believe that people who lack health insurance somehow get the care they really need. Care Without Coverage examines the real consequences for adults who lack health insurance. The study presents findings in the areas of prevention and screening, cancer, chronic illness, hospital--based care, and general health status. The committee looked at the consequences of being uninsured for people suffering from cancer, diabetes, HIV infection and AIDS, heart and kidney disease, mental illness, traumatic injuries, and heart attacks. It focused on the roughly 30 million -- one in seven--working--age Americans without health insurance. This group does not include the population over 65 that is covered by Medicare or the nearly 10 million children who are uninsured in this country. The main findings of the report are that working-age Americans without health insurance are more likely to receive too little medical care and receive it too late; be sicker and die sooner; and receive poorer care when they are in the hospital, even for acute situations like a motor vehicle crash.

Public Health and Welfare: Concepts, Methodologies, Tools, and Applications

Management Association, Information Resources 2016-09-12 The prevention and treatment of diseases is a primary concern for any nation in modern society. To maintain an effective public health system, procedures and infrastructure must be analyzed and enhanced accordingly. Public Health and Welfare: Concepts, Methodologies, Tools, and Applications provides a comprehensive overview of the latest research perspectives on public health initiatives and promotion efforts. Highlighting critical analyses and emerging innovations on an international scale, this book is a pivotal reference source for professionals, researchers, academics, practitioners, and students interested in the improvement of public health infrastructures.

Health-Care Utilization as a Proxy in Disability Determination

National Academies of Sciences, Engineering, and Medicine 2018-05-02 The Social Security Administration (SSA) administers two programs that provide benefits based on disability: the Social Security Disability Insurance (SSDI) program and the Supplemental Security Income (SSI) program. This report analyzes health care utilizations as they relate to impairment severity and SSA's definition of disability. Health Care Utilization as a Proxy in Disability Determination identifies types of utilizations that might be good proxies for "listing-level" severity; that is, what represents an impairment, or combination of impairments, that are severe enough to prevent a person from doing any gainful activity, regardless of age, education, or work experience.

PPACA Pulse Check United States. Congress. House. Committee on Energy and Commerce 2014

The Future of Nursing Institute of Medicine 2011-02-08 The Future of Nursing explores how nurses' roles, responsibilities, and education should change significantly to meet the increased demand for care that will be created by health care reform and to advance improvements in America's increasingly complex health system. At more than 3 million in number, nurses make up the single largest segment of the health care work force. They also spend the greatest amount of time in delivering patient care as a profession. Nurses therefore have valuable insights and unique abilities to contribute as partners with other health care professionals in improving the quality and safety of care as envisioned in the Affordable Care Act (ACA) enacted this year. Nurses should be fully engaged with other health professionals and assume leadership roles in redesigning care in the United States. To ensure its members are well-prepared, the profession should institute residency training for nurses, increase the percentage of nurses who attain a bachelor's degree to 80 percent by 2020, and double the number who pursue doctorates. Furthermore, regulatory and institutional obstacles -- including limits on nurses' scope of practice -- should be removed so that the health system can reap the full benefit of nurses' training, skills, and knowledge in patient care. In this book, the Institute of Medicine makes recommendations for an action-oriented blueprint for the future of nursing.

PPACA Implementation Failures United States. Congress. House. Committee on Energy and Commerce. Subcommittee on Health 2014

Understanding Consumer Health Insurance Decision-Making Under the Affordable Care Act

Petra Willis Rasmussen 2020 Following the implementation of the Affordable Care Act (ACA), millions of Americans have gained coverage, many for the first time in their lives. The law has created more options for affordable coverage and put millions into the driver seat when it comes to selecting their coverage and enrolling in a health plan. The individual health insurance market has undergone significant changes under the ACA, including the creation of state-based and federally facilitated marketplaces where individuals in all states can go to shop for and enroll in potentially subsidized individual market coverage. This dissertation seeks to improve our understanding of consumer decision-making in this new health insurance landscape. Through three sets of analyses of consumer behavior during the insurance decision-making process, this dissertation will provide needed updates to the literature on this topic. It also highlights key considerations for policymakers and agencies to weigh when evaluating how consumers might respond to policies that change their available coverage options. The first paper examines two key components of health plans that individuals weigh when making enrollment decisions - cost and quality. The ACA requires both federally facilitated and state-based marketplaces to provide easy to understand plan quality information to customers shopping for coverage. Through two

hypothetical choice experiments, this paper examines how consumers weighed health plan costs and quality in different choice environments and explored the consumer characteristics associated with a preference for high quality plans as well as with the selection of inferior plans. In each experiment, participants responded to a series of choice scenarios that asked them to choose between five health plans that differed only in their costs and quality ratings, represented by stars. Overall, between scenarios individuals were willing to pay more for higher quality plans when the quality ratings of all available plans were lower, when the higher quality plan's rating was two stars higher rather than one star higher than other plans, and when the price differential was lower. More risk averse participants had higher predicted probabilities of consistently choosing the higher quality, more expensive plan. However, a significant portion of the study population made poor decisions: more than a third of participants chose a dominated plan at least once. The less numerate, those with higher risk-seeking tendencies, and those with low health insurance literacy had the highest predicted probabilities of choosing poorly. The second experiment also found that individuals are more likely to choose a dominated plan when the quality star ratings are similar across plans. The second and third papers use data from California's health insurance marketplace, Covered California, to examine consumer behavior following the implementation of silver loading in 2018. Silver loading is a policy California and other states put into place after the cancellation of federal funding for a set of subsidies included in the ACA that reduce the amount of cost-sharing required by low-income enrollees in silver tier marketplace plans, known as cost-sharing reductions (CSRs). Silver loading placed the cost of providing CSRs in the absence of federal funding onto the premiums of silver plans, subsequently raising premium subsidies which are tied to the cost of silver coverage. The second paper focuses on enrollment in silver plans that became dominated because of silver loading. This paper looks at enrollment in these plans over time (both before and after they became dominated) and by enrollees' prior year enrollment decisions to examine differences in enrollment by pre-existing biases regarding metal tier labeling and the potential role of status quo bias. Overall, more than 60,000 Californians enrolled in a dominated plan in 2018 and, on average, households enrolled in dominated plans in 2018 spent an additional \$38.87 per month in premiums. Households that were enrolled in silver coverage in the year before the examined silver plans became dominated had the highest predicted probability of enrolling in a dominated plan in 2018. The third paper examines Covered California consumers' decisions to switch health plans during open enrollment over the first four open enrollment periods where individuals could renew their coverage (2015-2018). Under the ACA, switching rates in the individual market have been much higher than those previously seen in other markets. Looking at re-enrollees in Covered California, this paper provides data on consumer switching behavior over time and identifies the consumer, plan, and choice environment characteristics associated with consumers' decisions to change their coverage during open enrollment. The percentage of re-enrollees in Covered California who made changes to their coverage steadily increased between the 2014-15 and 2017-18 open enrollment periods. Following the implementation of silver loading the proportion of consumers who moved into gold plans during the 2017-18 open enrollment period drastically increased, compared to previous years. Among bronze or silver plan enrollees who switched metal tiers during open enrollment, those who could enroll in gold plans that were no more than \$49 per month more expensive than their initial bronze or silver plan had a significantly higher probability of

switching into gold coverage than those who faced larger premium differences. The results of this dissertation identify several consumer, health plan, and choice environment characteristics that can influence consumer health insurance decision-making. Policymakers and marketplace regulators can use this work to help inform the decisions they make around marketplace choice architecture, policies aimed at retaining enrollees and recruiting new consumers, and decisions about re-enrollment for consumers who do not actively renew their coverage during annual re-enrollment periods.

Examining Obamacare's Failures in Security, Accountability, and Transparency United States. Congress. House. Committee on Oversight and Government Reform 2015
The Affordable Care Act 2014 This paper is designed to provide those interested in the role of health in promoting opportunity for vulnerable families with the information necessary to pursue a two-generation approach to health and well-being. This paper is divided into two sections. The first section focuses on changes in health care coverage effected by the ACA and explores the unfinished business of developing coverage and enrollment systems that support two-generation approaches. The second section addresses changes in the organization and delivery of health care services and identifies areas of opportunity within the ACA to support vulnerable families.

Applying the Medicare Stars System to the Private Individual Health Insurance Market Under the Affordable Care Act Robert Hedges 2016 With the increased importance of health insurance for individuals under the Individual Mandate of the Affordable Care Act, this research applies a system used in Medicare in order to improve the current system for this type of insurance. The Affordable Care Act introduced a plan rating system that assesses Medicare Advantage plans on their quality of care and management of chronic conditions, to help push the idea of improved quality of care for patients. These ratings link directly with the financial payments from the government in order to incentivize companies to improve their health care services and achieve higher ratings. By using the Medicare system as a case study, this paper will examine the effectiveness of this system over the past five years for Medicare, and will determine if a similar system would be applicable and beneficial for the private individual health insurance market.

Affordable Care Act Kayla Murdock 2012-11-13 Research Paper (undergraduate) from the year 2012 in the subject Politics - International Politics - Region: USA, grade: 98.00, , language: English, abstract: The following report explains how Hispanic families, mainly the children, are affected by being uninsured and how the Patient Protection and Affordable Health Care Act will affect them. The Hispanic population has consistently grown in the United States for the past several decades. With the unexpected rapid growth of the minority, several issues have risen including Hispanic families and children being uninsured or underinsured for healthcare. Statistics show millions of children are underinsured, an alarming 31 percent of those being Hispanic (Flores, Olson, Tomany-Korman, 2004). To correct the problem, along with many other concerns, President Obama signed the Patient Protection and Affordable Care Act of 2010. The law was put into place to correct the health care system that the United States previously had. It is a health care reform that requires every individual to carry some form of insurance by 2014. The report will list my recommendations on how to make the Patient Protection and Affordable Health Care Act a perfect fit for Hispanic families and children that are below the poverty line in America. The recommendations will have a description, rationale, information on how to

implement the program, and an evaluation of the Affordable Care Act as a whole. Some of the recommendations include: building a community based agency to ensure that Hispanics understand and utilize every service available to them to obtain insurance, to provide a program for individuals with pre-existing conditions that were denied medical coverage before the Affordable Care Act passed, and an emergency room visit cap for those who tend to abuse the system. The final evaluation will sum up the entire paper, and mention why I feel the Patient Protection and Affordable Care Act is a suitable choice for the United States healthcare system reform.

Departments of Labor, Health and Human Services, Education, and Related Agencies Appropriations for 2015: Oversight hearing: Public Health Emergency Medical Countermeasure Enterprise; U.S. Department of Health and Human Services; Budget hearing: future of biomedical research United States. Congress. House. Committee on Appropriations. Subcommittee on the Departments of Labor, Health and Human Services, Education, and Related Agencies 2014

President's Fiscal Year 2015 Health Care Proposals United States. Congress. Senate. Committee on Finance 2015

Departments of Labor, Health and Human Services, Education, and Related Agencies Appropriations for 2016 United States. Congress. House. Committee on Appropriations. Subcommittee on the Departments of Labor, Health and Human Services, Education, and Related Agencies 2015

Health Insurance Exchanges United States. Congress. Senate. Committee on Finance 2015

The Affordable Care Act Tamara Thompson 2014-12-02 The Patient Protection and Affordable Care Act (ACA) was designed to increase health insurance quality and affordability, lower the uninsured rate by expanding insurance coverage, and reduce the costs of healthcare overall. Along with sweeping change came sweeping criticisms and issues. This book explores the pros and cons of the Affordable Care Act, and explains who benefits from the ACA. Readers will learn how the economy is affected by the ACA, and the impact of the ACA rollout.

Affordable Care Act Katherine Erickson 2020 This paper intends to analyze the Affordable Care Act using the Family Impact Analysis (FIA) lens to answer the following question: Under the ACA, are women able to access preventative health services without out-of-pocket costs. By using the FIA it will examine the policy focusing on what the impact of this policy has on families. Under the ACA the contraceptive provisions, plans in the Health Insurance Marketplace must cover FDA-approved contraceptive methods and counseling for all women, as prescribed by a health care provider. Since the implementation of the ACA, it has eliminated cost as a barrier and women can access these highly effective long-acting reversible contraceptives. Studies have shown by removing the cost of contraceptives and access to other preventative care services has decreased the number of unintended pregnancies.

Delivering Better Health Care Value to Consumers United States. Congress. Senate. Committee on Commerce, Science, and Transportation 2014

Medical Education and Ethics: Concepts, Methodologies, Tools, and Applications Management Association, Information Resources 2016-09-27 As the healthcare industry continues to expand, a higher volume of new professionals must be integrated into the field. Providing these professionals with a quality education will likewise ensure the further progress and advancements in the medical field. **Medical Education and Ethics: Concepts, Methodologies, Tools, and Applications** presents a compendium of contemporary research on the educational practices and

ethical considerations in the medical industry. This multi-volume work contains pedagogical frameworks, emerging trends, case studies, and technological innovations essential for optimizing medical education initiatives. This comprehensive publication is a pivotal resource for medical professionals, upper-level students, researchers, and practitioners.

Going Into the Affordable Care Act Pinar Karaca-Mandic 2013 The Affordable Care Act (ACA) will dramatically alter health insurance markets and the sources through which individuals obtain coverage. As the ACA is implemented, it is essential to monitor the intended and the unintended consequences of these regulations. To evaluate the changes in health insurance markets linked to the ACA, it is critical to consistently measure the size and structure of health insurance markets, as well as the performance of participating health insurers, prior to and post-ACA. In this paper we discuss challenges of describing the size, structure, and performance of the individual and small group markets. Next, we discuss improvements in data availability starting in 2010 to address some of these concerns. Finally, using data from the National Association of Insurance Commissioners (NAIC), we evaluate insurance market structure and performance during 2010-2012, focusing on enrollment, the number of participating insurers, premiums, claims spending, MLR, and administrative expenses.

PPACA Pulse Check, Serial No. 113-78, August 1, 2013, 113-1 Hearing 2014

Law, Explanation and Analysis of the Patient Protection and Affordable Care Act CCH Incorporated 2010-01-01 The One Resource That Explains EVERY Provision of the Single Most Sweeping Piece of Legislation in 50 Years! CCH's Law, Explanation and Analysis of the Patient Protection and Affordable Care Act, Including Reconciliation Act Impact provides employers, legal, legislative, health, and insurance professionals with comprehensive explanation and analysis of every aspect of health care reform legislation. The information is crucial, current, and reliable and offers complete, clear and practical guidance on every provision. This is one of the most high-impact pieces of legislation passed in decades. Taken together, the laws are over 2,800 pages long. Many hundreds of changes are made to existing laws and— over 600 changes to the Social Security Act alone (which contains all of the Medicare and Medicaid law), including almost 50 newly added provisions. Other laws affected include the Employee Retirement Income and Security Act (ERISA), the Public Health Service Act, the Internal Revenue Code, and even the Fair Labor Standards Act, among others. **Law, Explanation and Analysis of the Patient Protection and Affordable Care Act, Including Reconciliation Act Impact** include contains almost 500 expert explanations telling you what all those law changes mean. Only **Law, Explanation and Analysis of the Patient Protection and Affordable Care Act, Including Reconciliation Act Impact** includes: An editorially enhanced version of the Patient Protection and Affordable Care Act that integrates in place changes made to it by the Reconciliation Act of 2010 and Title X amendments Text of the Joint Committee on Taxation report that provides background information on the revenue-related provisions of the laws Finding devices to help navigate between analysis and official text Caution notes The legislation contains the most significant health care changes in decades. Topics covered include the following: For employers: Enhanced employer responsibility Insurance market reforms Health insurance exchanges Individual responsibility mandate For health providers and beneficiaries: Expanded eligibility rules for Medicaid and the Children's Health Insurance Program Reimbursement changes for physicians and hospitals to focus on primary and preventive care Reimbursement changes for hospitals to increase coverage in rural areas Expansion of existing value-based

purchasing and quality programs EXCLUSIVE ONLINE FEATURE! With your purchase of the book, you'll receive access to a special website that gives you access to SSA, ERISA, and IRC provisions amended by the Patient Protection and Affordable Care Act and the Reconciliation Act of 2010, as well as other valuable Health Care Reform information and resources. Full text of both Acts will also be provided on this exclusive website.

The Affordable Care Act Decision Fritz Allhoff 2014-02-18 Interest in NFIB v. Sebelius has been extraordinarily high, from as soon as the legislation was passed, through lower court rulings, the Supreme Court's grant of certiorari, and the decision itself, both for its substantive holdings and the purported behind-the-scene dynamics. Legal blogs exploded with analysis, bioethicists opined on our collective responsibilities, and philosophers tackled concepts like 'coercion' and the activity/inactivity distinction. This volume aims to bring together scholars from disparate fields to analyze various features of the decision. It comprises over twenty essays from a range of academic disciplines, namely law, philosophy, and political science. Essays are divided into five units: context and history, analyzing the opinions, individual liberty, Medicaid, and future implications. Obamacare Implementation United States. Congress. House. Committee on Oversight and Government Reform 2014

The Center for Consumer Information and Insurance Oversight and the Implementation of the Patient Protection and Affordable Care Act United States. Congress. House. Committee on Energy and Commerce. Subcommittee on Oversight and Investigations 2013

The Effects of the Affordable Care Act on Health Insurance Coverage and Labor Market Outcomes Mark Gregory Duggan 2017 The Affordable Care Act (ACA) includes several provisions designed to expand insurance coverage that also alter the tie between employment and health insurance. In this paper, we exploit variation across geographic areas in the potential impact of the ACA to estimate its effect on health insurance coverage and labor market outcomes in the first two years after the implementation of its main features. Our measures of potential ACA impact come from pre-existing population shares of uninsured individuals within income groups that were targeted by Medicaid expansions and federal subsidies for private health insurance, interacted with each state's Medicaid expansion status. Our findings indicate that the majority of the increase in health insurance coverage since 2013 is due to the ACA and that areas in which the potential Medicaid and exchange enrollments were higher saw substantially larger increases in coverage. While labor market outcomes in the aggregate were not significantly affected, our results indicate that labor force participation reductions in areas with higher potential exchange enrollment were offset by increases in labor force participation in areas with higher potential Medicaid enrollment

The Impacts of the Affordable Care Act on Preparedness Resources and Programs Institute of Medicine (U.S.). Board on Health Sciences Policy 2014 "Many of the elements of the Affordable Care Act (ACA) went into effect in 2014, and with the establishment of many new rules and regulations, there will continue to be significant changes to the United States health care system. It is not clear what impact these changes will have on medical and public health preparedness programs around the country. Although there has been tremendous progress since 2005 and Hurricane Katrina, there is still a long way to go to ensure the health security of the Country. There is a commonly held notion that preparedness is separate and distinct from everyday operations, and that it only affects emergency departments. But time and time again, catastrophic events challenge the entire health care

system, from acute care and emergency medical services down to the public health and community clinic level, and the lack of preparedness of one part of the system places preventable stress on other components. The implementation of the ACA provides the opportunity to consider how to incorporate preparedness into all aspects of the health care system. The Impacts of the Affordable Care Act on Preparedness Resources and Programs is the summary of a workshop convened by the Institute of Medicine's Forum on Medical and Public Health Preparedness for Catastrophic Events in November 2013 to discuss how changes to the health system as a result of the ACA might impact medical and public health preparedness programs across the nation. This report discusses challenges and benefits of the Affordable Care Act to disaster preparedness and response efforts around the country and considers how changes to payment and reimbursement models will present opportunities and challenges to strengthen disaster preparedness and response capacities."--Publisher's description.

The Future of Nursing as Envisaged by the Institute of Medicine Patrick Kimuyu 2018-07-04 Seminar paper from the year 2018 in the subject Nursing Science, grade: 1.4, Egerton University, language: English, abstract: In the recent years, nursing education and practice appear to have been influenced by the current healthcare reforms. The Affordable Care Act has introduced cross-sectional changes in the US healthcare system. For instance, it has led to an increase in the number of uninsured people by introducing universal healthcare under the reviewed health insurance plans. It is predicted that "expanding the reach of insurance coverage will place greater demands on the primary care system, as witnessed in Massachusetts" (IOM, 2010a). Consequently, the scope of healthcare services has experienced immense changes ranging from patient's privacy protection as it is defined by HIPAA to the treatment of degenerative diseases. IOM observes "primary care medical homes and accountable care organizations (ACOs)—rely on interventions that fall squarely within the scope of practice of RNs (e.g., care coordination, transitional care)" (p.375). Owing to these changes in the US healthcare system, transient reforms in the nursing profession are deemed necessary for addressing the vast needs of the US population, and this explains the importance of the 2010 Institute of Medicine's recommendations. Evidence indicates that, the nursing profession plays the pivotal role in the healthcare system because it accounts for the largest percentage of the healthcare workforce. As such, introducing transformations in the nursing profession appear to be as significant as the Affordable Care Act, especially regarding the improvement of healthcare service delivery. Therefore, this research paper will provide a comprehensive overview on the impact of IOM recommendations on the nursing profession including the key messages.

Health Insurance and Labor Supply Daeho Kim 2016 This paper examines how health insurance affects labor supply by exploiting a quasi-experimental change in health insurance provision under the Affordable Care Act (ACA) early Medicaid expansion in Connecticut implemented in 2010. Applying an instrumental variables approach to a difference-in-differences-in-differences strategy, I find remarkable labor supply impacts of the ACA early Medicaid expansion in Connecticut. I show evidence that Connecticut's Medicaid expansion increased Medicaid coverage for low-income childless adults by 5.9 percentage points, and as a result reduced the employment rate by 3.8 to 4.5 percentage points among those low-income childless adults. Master Medicare Guide Wolters Kluwer Law & Business 2015-02-25 The 2015 Master Medicare Guide is packed with timely and useful information to help you stay on top of one of the most complex programs administered by the federal government.

The 2015 Edition includes: Over 500 explanation summaries for all aspects of the Medicare program coverage, eligibility, reimbursement, fraud and abuse, and administration Highlights of the Protecting Access to Medicare Act of 2014 (P.L. 113-93) and the Improving Medicare Post-Acute Care Transformation Act of 2014 (P.L. 113-185)"; the most recent physician fee schedule reimbursement fix; A focus on the continuing implementation of the Affordable Care Act as it relates to Medicare, including accountable care organizations and a tighter link between the quality of health care and Medicare reimbursement All discussions include cross-references to relevant laws, regulations, CMS manual sections, administrative and judicial decisions, and more!

Dix ans après 1876

Health Insurance Today - E-Book Janet I. Beik 2020-09-10 Master the complexities of health insurance with this easy-to-understand guide! Health Insurance Today: A Practical Approach, 7th Edition provides a solid foundation in basics such as the types and sources of health insurance, the submission of claims, and the ethical and legal issues surrounding insurance. It follows the claims process from billing and coding to reimbursement procedures, with realistic practice on the Evolve website. This edition adds coverage of the latest advances and issues in health insurance, including EHRs, Medicare, and other types of carriers. Written by Medical Assisting educators Janet Beik and Julie Pepper, this resource prepares you for a successful career as a health insurance professional. What Did You Learn? review questions, Imagine This! scenarios, and Stop and Think exercises ensure that you understand the material, can apply it to real-life situations, and develop critical thinking skills. Clear, attainable learning objectives highlight the most important information in each chapter. CMS-1500 software with case studies on the Evolve companion website provides hands-on practice with filling in a CMS-1500 form electronically. UNIQUE! UB-04 software with case studies on Evolve provides hands-on practice with filling in UB-04 forms electronically. UNIQUE! SimChart® for the Medical Office (SCMO) cases on Evolve give you real-world practice in an EHR environment. HIPAA Tips emphasize the importance of privacy and of following government rules and regulations. Direct, conversational writing style makes it easier to learn and remember the material. End-of-chapter summaries relate to the chapter-opening learning objectives, provide a thorough review of key content, and allow you to quickly find information for further review. Chapter review questions on Evolve help you assess your comprehension of key concepts NEW and UNIQUE! Patient's Point of View boxes enable you to imagine yourself on the other side of the desk. NEW and UNIQUE! Opening and closing chapterscenarios present on-the-job challenges that must be resolved using critical thinking skills. NEW! End-of-chapter review questions ensure that you can understand and apply the material. NEW! Clear explanations show how electronic technology is used in patient verification, electronic claims, and claims follow-up. NEW! Coverage of the Affordable Care Act introduces new and innovative ways that modifications to the ACA allow people to acquire healthcare coverage. NEW! Updated information addresses all health insurance topics, including key topics like Medicare and Electronic Health Records. NEW! More emphasis on electronic claims submission has been added. NEW! Updated figures, graphs, and tables summarize the latest health insurance information.

Departments of Labor, Health and Human Services, Education, and Related Agencies Appropriations for 2015 United States. Congress. House. Committee on Appropriations. Subcommittee on the Departments of Labor, Health and Human Services, Education, and Related Agencies 2014

Federal Register 2013-03

The Affordable Health Care Act (ObamaCare) and the Concept of Universal Healthcare Patrick Kimuyu 2017-11-28 Research Paper (postgraduate) from the year 2016 in the subject Medicine - Public Health, grade: 1, Egerton University, language: English, abstract: Healthcare reforms in the United States have always been faced with challenges, ranging from the drafting of the concerned policies to their implementation. This is probably the reason as to why the U.S healthcare system has never attained remarkable sustainability, especially through the elimination of health inequalities with the population. However, ObamaCare has attracted unprecedented political criticism, owing to its cost consequences. Therefore, this paper will provide an overview of the U.S context, in which the Affordable Care Act has attracted political criticism. It will also present the methods used to analyze different perspectives of the issue in regard to political narrative strategies, in which the dominant perspective will discuss the concept on universal healthcare as a reliable public policy.

The Effects of the Affordable Care Act on Health Insurance Coverage and Labor Market Outcomes M. Duggan 2019 The Affordable Care Act (ACA) includes several provisions designed to expand health insurance coverage that also alter the tie between employment and health insurance. In this paper, the authors exploit variation across geographic areas in the potential impact of the ACA to estimate its effect on health insurance and labour market outcomes in its first four years. The authors' findings indicate that approximately 70 percent of the increase in health insurance coverage since 2013 is due to the ACA. The authors also find that these increases in health insurance coverage did not result in statistically significant changes in labour market outcomes.

Online Applications for Medicaid And/or CHIP 2011 One key component of the Affordable Care Act is the creation of integrated and coordinated eligibility processes for Medicaid, CHIP, and Exchange coverage that are supported by technology. As part of these processes, states will be required to provide a single application that individuals can use to apply for these programs that is available in multiple formats, including online. Online applications offer a number of potential advantages relative to paper applications. They can minimize burdens on individuals and lead to increased enrollment by making the application available on a 24/7 basis, enabling faster or real-time eligibility determinations, and streamlining and simplifying the application process. States can also benefit from online applications through reduced administrative burdens and increased accuracy and efficiency. However, the extent to which an online application realizes these advantages depends on its structure and capabilities. This analysis provides an overview of current online applications for Medicaid and/or CHIP and examines the extent to which they incorporate features that streamline and simplify the enrollment process for individuals.

Justice and Profit in Health Care Law Sabrina Germain 2019-03-21 The issue of justice in the field of health care is becoming more central with concerns over access, cost and provision. Obamacare in the United States and the Health and Social Care Act 2012 in the United Kingdom are key examples illustrating the increasing pressure put on governments to find just and equitable solutions to the problem of health care provision. Justice and Profit in Health Care Law explores the influence of justice principles on the elaboration of laws reforming health care systems. By examining the role played by key for-profit stakeholders (doctors, employers and insurers), it tracks the evolution of distributive norms for the allocation of health care resources in western welfare states.

Essentially, this book sheds light on the place given to justice in the health care law-making process in order to understand the place we wish to give these principles in future health care reforms.

U.S. Healthcare: A Story of Rising Market Power, Barriers to Entry, and Supply Constraints Ms. Li Lin 2021-07-06 Healthcare in the United States is the most expensive in the world, with real per capita spending growth averaging 4 percent since 1980. This paper examines the role of market power of U.S. healthcare providers and pharmaceutical companies. It finds that markups (the ability to charge prices above marginal costs) for publicly listed firms in the U.S. healthcare sector have almost doubled since the early 1980s and that they explain up to a quarter of average annual real per capita healthcare spending growth. The paper also finds evidence that the Affordable Care Act and Medicaid expansion were successful in raising coverage and expanding care, but may have had the undesirable side-effect of leading to labor cost increases: Hourly wages for healthcare practitioners are estimated to have increased by 2 to 3 percent more in Medicaid expansion states over a five-year period, which could be an indication that the supply of medical services is relatively inelastic, even over a long time horizon, to the boost to demand created by the Medicaid expansion. These findings

suggest that promoting more competition in healthcare markets and reducing barriers to entry can help contain healthcare costs.

The Affordable Care Act and the New Economics of Part-Time Work Casey B. Mulligan 2018 The Affordable Care Act (ACA) imposes several types of incentives that will affect work schedules. The largest of them are (1) an explicit penalty on employers who do not offer coverage to their full-time employees; (2) an implicit tax on full-time employment, stemming from the fact that full-time employees at employers that offer affordable coverage are ineligible to receive subsidies on the law's new health insurance exchanges; and (3) an implicit tax on earnings, stemming from the provisions of the law that give lower subsidies to those with higher incomes. The labor market will likely adjust to the various new costs by reducing weekly employment per person by about 3%. The tax incentives will push some workers to work more hours per week (for the weeks that they are on a payroll), and others to work fewer. According to the model presented in this paper, the ACA's incentives and ultimately its behavioral effects will vary substantially across groups, with the elderly experiencing hardly any new incentives and female workers being most likely to cut their work schedules to 29 hours per week.