

Case Study : Healthcare.gov



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Case Study: Healthcare.gov

Project Introduction and Objectives

The Affordable Care Act (ACA), formally known as the Patient Protection and Affordable Care Act (PPACA) and sometimes also known as Obamacare, is a healthcare reform law enacted in the United States in 2010 (Wikipedia, 2024). It was created to fix some big problems in the healthcare sector in the USA. It gives consumers more rights and protections. This means insurance companies can't refuse coverage because of pre-existing conditions, they can't limit the care you receive, and they can't cancel your coverage. The ACA also aims to make coverage more affordable. It ensures that most of your premium goes towards your healthcare and not administrative costs, and it helps keep insurance rates in check. There's also assistance available to help lower-income individuals pay for their premiums, making healthcare more accessible to everyone. Additionally, the ACA provides better access to care by offering free preventive services, allowing young adults to stay on their parents' insurance until they're 26, and creating the Health Insurance Marketplace where people can compare and purchase insurance plans. It also strengthens Medicare by lowering prescription drug costs, providing free preventive services, combating fraud, improving the quality of care, reducing unnecessary hospital readmissions, and ultimately lowering premiums for everyone (Obama White House, 2010).

Instead of lots of government rules, the ACA wanted to rely more on people making their own choices. It hoped to create a system where everyone could get affordable healthcare by making smart decisions and sharing the costs fairly. Overall, the ACA's main goal was to make sure everyone could afford healthcare, by letting people choose what's best for them and spreading the costs fairly (Silvers, 2013).

Project Failures

Designing and setting up new government programs can be tough. When the Centres for Medicare & Medicaid Services (CMS) had to create HealthCare.gov, they faced a bunch of problems right from the start.

Project Complexity: Making a big IT system like HealthCare.gov was hard because it involved lots of different organizations working together. Even though CMS had experience with health programs, they weren't fully ready for how complex this project would be (Lee & Brumer, 2017).

Uncertainty: The rules and plans kept changing, which made it hard to know what to do next. Instead of focusing on building the website, CMS had to spend a lot of time figuring out new policies. Plus, they weren't sure how much money they'd have, so they couldn't plan well (Lee & Brumer, 2017).

Compressed Timeframe: CMS hired contractors to build the website, but they didn't give them clear instructions until very late. That meant the contractors didn't have much time to get the job done right (Lee & Brumer, 2017).

High-Risk Contracts: CMS made deals with the website developers that weren't great. These contracts meant CMS had to pay the developers no matter what, even if the website wasn't finished. So, the costs kept going up, and the project ended up costing over \$2.1 billion (Lee & Brumer, 2017).

All these problems made it tough to create HealthCare.gov smoothly.

Impacts of the Project Failures

The problems with the Affordable Care Act (ACA) caused several issues in healthcare. Here are some things that happened.

Insurance Problems: The ACA made it uncertain for insurance companies, so they raised prices or stopped offering plans in some areas. A study in Health Affairs said this uncertainty made insurers leave, reducing options for people (Gruber & Sommers, 2019).

Higher Costs: Prices for ACA insurance went up in some places, making it harder for people to afford. A report by the Kaiser Family Foundation showed these price increases (Cox, et al., 2018).

Less Choices: Because of insurance companies leaving, people had fewer options for healthcare. The Urban Institute said this was a problem, especially in rural areas (Blumberg, Buettgens, & Holahan, 2016).

More People Without Insurance: Even though the ACA aimed to reduce the number of uninsured people, some ended up without coverage. The Congressional Budget Office predicted this would happen because of policy changes and higher prices (Congressional Budget Office, 2017).

Money Problems for Medicaid: The ACA made more people eligible for Medicaid, but this caused money issues for states. A report by the Kaiser Family Foundation talked about this problem (Garfield, Orgera, & Damico, 2020).

Healthcare Gaps: The ACA didn't help everyone equally. Some groups, like low-income people and people of colour, still had trouble getting healthcare. A study in JAMA Internal Medicine showed this (Lee, Hodgkin, Johnson, & Porell, 2021).

In short, the ACA's problems led to higher costs, fewer choices, more uninsured people, money problems for Medicaid, and healthcare gaps for certain groups. Fixing these issues needs big changes to make healthcare more affordable and accessible for everyone.

Factors that Resulted in Project Failures

Designing and putting together HealthCare.gov was a huge job, but right from the start, the people in charge made some big mistakes that made it harder to use and caused problems.

Poor Project Scoping and System Requirements Analysis: At first, they didn't understand all the technical stuff the website needed. So, they made wrong choices like picking technology that hadn't been tested well. They also didn't plan for enough people to use the website at once (Lee & Brumer, 2017).

Inadequate Risk Management: They didn't plan for things that might go wrong. So, when problems happened, they had to spend a lot of time and money fixing them (Lee & Brumer, 2017).

Lack of Clear Leadership: There wasn't anyone in charge who really understood the whole project. This made it hard to make decisions and solve problems (Lee & Brumer, 2017).

Time Mismanagement: They didn't use their time well, especially near the end. They kept making changes at the last minute, which made things chaotic and caused problems with the website's security (Lee & Brumer, 2017).

Rigid Organizational Culture: The people working on the website didn't feel like they were part of the team. Their ideas were often ignored, and the working atmosphere was not good (Lee & Brumer, 2017).

Project Management Fundamentals: They didn't follow basic rules for managing a big project. They didn't plan well, keep track of their budget, or review their progress regularly (Lee & Brumer, 2017).

Lessons Learned for Future Projects

Conduct robust capacity planning: Before anything else, gather opinions from experts and people involved to create a plan that can handle both expected and unexpected demands. Also, make sure contracts with service providers include clear expectations and the ability to adapt quickly to changes (Overby, 2013).

Avoid the Big Bang: Starting a new project without proper testing is risky. Look for service providers who have experience with flexible methods and can deliver solutions in smaller, tested parts (Overby, 2013).

Make customer experience a priority: When creating systems, think about how users will interact with them. Simplify processes whenever possible. Also, prioritize making it easy for users to get help if they encounter problems (Overby, 2013).

Anticipate mistakes: People make mistakes, so it's important to have plans in place to fix them. For example, if incorrect information is given, decide in advance how to handle it fairly (Overby, 2013).

Get everyone on the same page: When working with different groups, it's crucial to use the same measures to track progress. This encourages cooperation and avoids confusion (Overby, 2013).

Set standards: Use established guidelines and standards to ensure quality throughout the project. This includes testing software properly and managing services effectively. Service providers should also meet international standards to ensure their solutions are reliable. (Overby, 2013)

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