**Policy evaluation of the Affordable Care Act**

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**Introduction**

Evaluation of a health policy is an integral part of a policy that assists in addressing its efficiency, whether the desired objectives are met or not, helps improve quality when done incorrect fashion, solves problems, builds knowledge, and informs decision making. Evaluation can come in different forms, but its main purpose is to gain a deeper understanding of improving health care. (*Evaluation: What to consider*) It’s been 12 years since ACA is implemented and is considered a historical landmark in the health insurance market. The goal or objective of this paper is to evaluate the effectiveness of this policy and provide a better understanding of ACA in terms of if success and reach.

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| Healthcare Program/Policy Evaluation | Affordable care act/Obama care |
| Description | Affordable care act also known as Obama care was enacted in March 2010 by President Barak Obama. Its main goal is to make health insurance affordable to everyone as it provides people with premium tax credits, expands the Medicaid program, and supports new advanced medical care delivery methods designed to decrease the cost of health care in general. (Assistant Secretary for Public Affairs (ASPA), 2022) |
| How was the success of the program or policy measured? | After the act was enacted, there was a huge expansion of health insurance coverage all over the United States, more people insured ultimately increased health care accessibility. The annual payment to hospitals under the Medicare program has decreased because of ACA. Medicare Advantage plans also have been reduced; Medicare expenses are 20% less than what was projected after the law was enacted. Several steps were taken to either reward or penalize providers that help in the reduction of hospital readmission, hospital-acquired infection/condition reduction, and a hospital value-based purchasing program. (*The Affordable Care Act at 10 years: What's changed in Health Care Delivery and payment?* 2020) |
| How many people were reached by the program or policy selected? How much of an impact was realized with the program or policy selected? | As of June 2021, thirty-one million American people are covered by the Affordable Care Act. Along with this uninsured rate has decreased in the country. There is a record-breaking high number of people getting insurance from Marketplace and Medicaid expansion. Between 2010 to 2016, there is a dramatic decrease in the number of nonelderly uninsured people from 48.2million to 28.2million. (Assistant Secretary for Public Affairs (ASPA), 2022). Before ACA the only way to get health insurance was through a job and people were discriminated based on their pre-existing medical conditions. If they want to buy coverage themselves, it was like taking a chance because they were not warned before their premiums were raised or canceled. ACA banned discrimination against those with pre-existing conditions by providing coverage outside work, therefore, reducing Job locks and encouraging people towards entrepreneurship and job mobility based on their interests and ability. (*Six economic benefits of the Affordable Care Act*) |
| At what point in program implementation was the program or policy evaluation conducted? | Program or policy evaluation started during the legislation phase. On December 24, 2009 Affordable health care act of America was revised by Senate and the initial version was changed to the senate version and called America’s healthy Future act. (*History of the affordable care act (Obamacare) | health*) Since then, there has been a continuous ongoing evaluation of ACA till today’s date to provide affordable health care to all Americans. |
| What data was used to conduct the program or policy evaluation? | Various data sources were used to conduct the policy evaluation. National, as well as individual surveys, were carried out.  **National Surveys:**  **America Community survey:** Annual survey was done by the US census Bureau. Two million households were randomly selected to do the survey and they were mandated to complete the questionnaire.  **Medical Expenditure panel survey:** Conducted under the Department of Health and Human Services. Surveys of health care providers, individual families, and US employers were done under this survey where cost, insurance coverage, and healthcare usage information were gathered.  **National health interview survey:** Survey was conducted by the census bureau and was to monitor national health trends and survey income and program participation.  **Independent Surveys:**  Commonwealth fund tracking surveys: Survey of health insurance coverage, gallop Health ways wellbeing index, Health reform monitoring survey, RAND Health Reform opinion study were conducted under commonwealth fund tracking surveys.  Other data sources were from the Centers for Medicare and Medicaid Services (CMS), the Health care cost and utilization project (HCUP), and the state independent database (SIDS). (Serakos & Wolfe, 2016) |
| What specific information on unintended consequences were identified? | The individual mandate fee was 695 dollars per adult or 2.5% of income, either way, both of them were greater. Insurance deductibles were also greater than out-of-pocket costs making both deductible and out of post costs expensive. ACA intention was not to encourage health saving accounts, but health saving accounts (HSA) were highly encouraged, and employer had to pick up more and more health care costs. (Health, 2020) Latinos were less likely to enroll and there was opposition from different parties. The individual mandate was a financial burden for low-income families. |
| What stakeholders were identified in the evaluation of the program or policy? Who would benefit most from the results and reporting of the program or policy evaluation? Be specific and provide examples. | Stakeholders identified during the evaluation were Health care providers, Health care consumers, and the federal government. People who were insured under the affordable care act were benefitted more and will continue to benefit if It does well, they will continue to get affordable health care plans. |
| Did the program or policy meet the original intent and objectives? Why or why not? | Yes, the program meets the original objective because millions have affordable health care insurance, there is no more discrimination against people based on their preexisting medical condition, and people don’t have to completely rely on their Job and get stuck in one place despite interest and ability to get affordable insurance. The main goal of ACA to increase access, improve quality, and reduce cost was met. |
| Would you recommend implementing this program or policy in your place of work? Why or why not? | Yes, I do recommend implementing this policy in the workplace. In my opinion, if employees have access to affordable health insurance, then it will motivate them to give their best at work as a healthy workforce. Employer health care needs should be first met to improve productivity and improve the quality of an organization. |
| Identify at least two ways that you, as a nurse advocate, could become involved in evaluating a program or policy after one year of implementation. | Policy advocacy is still not considered that important in nursing schools, so nurses themselves must explore how to develop necessary skills and that can be possible from self-training manuals and guides available to health professionals who are interested in advocacy.  Networking can be another way to get involved in policy evaluation. I would get in touch with people who are interested in policy advocacy so that they can offer me moral as well as technical support. They can provide me with useful publications and be involved in the research process.  Other ways can be using evidence based research to look for different methods on how to implement policy and get better outcomes. |
| General Notes/Comments | ACA made insurance affordable to millions of Americans, people who were not insured prior because of various reasons have insurance now. Health care outcomes have significantly improved after the implementation of ACA which plays a huge role in making healthier and happier Americans. |

**Conclusion**

Affordable care act was able to meet all its objectives, millions of Americans have access to affordable health insurance, and multiple options are now available to get insurance. ACA implementation brought a lot of important changes that have improved health care accessibility and quality but still, there were some unintended outcomes. So, in order to improve its effectiveness and establish progress, evaluation should be a continuous process. Evaluation plays an integral role as it assists in making a needed change to the policy to make it more effective.

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