The Problem With US Health Care: It Ain't Obamacare!

To the Editor:

The Affordable Care Act or ACA (aka Obamacare) is the most important health care legislation enacted in the United States since the creation of Medicare and Medicaid in 1965.¹ With the ACA, the uninsured rate declined by 43%, from 16.0% in 2010 to 9.1% in 2015.¹² Approximately 20 million individuals gained health insurance, including young adults covered under parental insurance, private insurance exchanges, and state Medicaid expansion.¹²

According to a 2017 US National Academy of Medicine initiative, critical issues central to the future of health and health care in the United States strongly transcend the ACA provisions receiving the greatest attention.³ Health care costs remain alarmingly high with \$3.2 trillion spent annually, equivalent to \$9990 per person and accounting for 17.8% of the gross domestic product of which an estimated 30% is related to waste, inefficiencies, and excessive prices.³ Health disparities are persistent and worsening, and the health and financial burdens of chronic illness and disability are straining families and communities.^{3,4}

Medicare spending had grown nearly 3 times faster in the United States than in Canada since 1980 – this trajectory is unsustainable. A 2012 US Institute of Medicine report revealed that US health care squandered \$750 billion in 2009 through unnecessary or unneeded care, Byzantine paperwork, fraud and other wasteful activities.

The ACA Repeal Efforts

The repeal of ACA had been anticipated and written about for years. The proposed repeal bills failed to deliver on the promises to "have insurance for everybody," to be "much less expensive and much better," with "much lower deductibles" than the ACA. If anything, millions of Americans over time would lose health insurance coverage.

The Way Forward

Without prejudice to the politics of an ACA repeal, the fact of the matter is that no legislative posturing that fails to address these fundamental infrastructural challenges and deficiencies inherent in US health care would lead to sustainable and improved health care delivery in the United States. Major changes such as payment reforms, significant cost-control measures across the entire spectrum of health care delivery processes, are warranted and mandatory.

I believe the federal government should establish a Health Care Commission to revisit all of the relevant ills plaguing US health care and to come up with clear-cut real solutions to these chronic problems. Such a Commission should have as members practicing physicians and economists, preferably headed by an MD MBA or an MD PhD in economics.

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