

## Loyal Stakeholders

Among the reasons to design the Affordable Care Act were to expand the quality of health insurance and affordability, lower the uninsured rate by expanding insurance coverage and lessen the costs of healthcare. The law requires the insurance to accept all the applicants, cover the specific list of provisions and change the same rates notwithstanding the pre-existing conditions. Research a policy that is related with the Affordable care act in your home state or another that may affect healthcare reform and the way health care is provided in the chosen state (Buchmueller et al., 2016)

The affordable care act was enacted to ensure that American can access affordable and quality healthcare. In Colorado, Medicaid expansions were made such as that if one is not disabled and under age 65 eligible up to 133% of poverty, and up to 400% of poverty for premium tax credits, and up to 250% of poverty for cost-sharing subsidies (limits out of pocket spending). Also providing a new marketplace for accessing coverage (Blumenthal & Collins, 2014).

Connect for health Colorado states that every state is supposed to have an exchange in which all individuals can buy health insurance. An exchange is a consumer-driven marketplace that enables people to access and compare health plans based on price, quality, benefits, and services (Parks, 2012). That must include least coverage standards and requirements. Also, make sure to find the choicest coverage with premium and cost-sharing subsidies/credits will facilitate "apples to apples," even foster competition

**1**  
**Describe the policy and who wrote and/or promoted the policy legislature (provide statistical data).**

Colorado State is responsible for promoting connect for health Colorado. The policy involves competition for individuals and employers some things that may include comparing cost and quality data, shopping for health plan characteristics containing similar benefits. In one county in Denver Colorado known as Jefferson County before tax credit, a 27-year-old with the Silver Plan ranges from \$201-\$377. For a 40-year-old with the same plan would range from \$245-\$360. Although nearly 500,000 Coloradans will be eligible for tax credits obviously the amounts of tax credits would be a significantly different (Blumenthal & Collins, 2014).

Here are some data about Colorado Medicaid the new bill titled SB13-200- expanded Medicaid to 133% Federal Poverty Level (FPL) for example 15,282 for an individual and 31,322 for a family of four and working families 122,000 (Parks, 2012). There have been so coverage issues as with any new policy for example as many as 35% of people below 200% of the Federal Poverty Level will more than likely transition between Medicaid and private insurance as there may be some that just can't afford to go with private insurance. There seems to be a problem going back and forth when it comes to continuity of coverage (Barbaresco et, al 2015).

Tax credits are also offered to small businesses (<50) are not requires to provide employee coverage. Companies with fewer than 50 employees can purchase insurance through Connect for Health Colorado or companies can offer employees a choice of plans. Tax credits that are available for small businesses up to 25 employees with average wages under 50,000, if 50% of premium paid) to provide employees coverage starting 2010 up to 35% until 2014 and 50% between the years of 2014-2016.

**What are the trade-offs offered to bring balance to the healthcare stakeholders?**

We expect **healthcare** landscapes to **always** change from time **to** time. Thus there are new benefits and risks arise from the change. Consequently, new challenges arise for stakeholders to solve. Therefore there must be some alternative interventions to bring about balance. For instance, the **Administration of the Affordable Care Act would need to lead another stakeholder towards bearing capacities for recognition and improving the system** thus balancing the risks and the benefits. Health care providers have to trade off customers that are new to them as well as decrease the costs by imposing new tax obligations or by reducing the revenues. Stakeholders do not approve some of these policies in most cases (Buchmueller et al., 2016)

**1**  
**What role has public perception and disinterestedness played in the valuation of health care performance?**

The **public** is instrumental in shaping healthcare performance since it shapes the debates that involve healthcare thus affecting and influencing where people will seek medical help. To have an efficient healthcare system surveys should be done regularly and people asked where there needs improvement in the pharmaceutical sector (Blumenthal & Collins, **2014**).

**Describe how process innovation, risk-taking, health policy analysis, and governance "sense-making" provide balance for stakeholders.**

Technology and **innovation** that is used in healthcare can be useful in improving healthcare however it may be hazardous to some extent. All medical intervention involves risk in both the products patient's take and the clinical setting. It is vital that a balance is found between the benefits that innovation and technology bring in healthcare and the risks involved (Barbaresco et., al 2015).

<sup>2</sup>  
References

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