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Reinventing American Health Care: How the Affordable Care Act Will Improve Our Terribly Complex, Blatantly Unjust, Outrageously Expensive, Grossly Inefficient, Error Prone System by E. Emmanuel (Review)

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E. Emmanuel

Reinventing American Health Care: How the Affordable Care Act Will Improve Our Terribly Complex, Blatantly Unjust, Outrageously Expensive, Grossly Inefficient, Error Prone System

New York: Public Affairs/Perseus, 2014, 386 page. USD 17.66. Hardcover

The American health care system (AHCS) is messy, disjointed, problematic, and immensely complicated. The Patient Protection and Affordable Care Act (2010, PPACA), intended to address the complexities of the system, is itself long, complex, and can be difficult to understand. Combine the difficulties of interpreting the PPACA with plenty of publically available misinformation about the PPACA and it is easy to see why there is significant confusion about the PPACA’s provisions and what those provisions mean for people. In Reinventing American Health Care: How the Affordable Care Act Will Improve our Terribly Complex, Blatantly Unjust, Outrageously Expensive, Grossly Inefficient, Error Prone System, Dr. Ezekiel Emanuel, one of the architects of the PPACA, attempts to allay this confusion by sorting through this complexity and explaining the various provisions of the law and what those provisions are intended to address.

The book is divided into three parts: “The American Health Care System”, “Health Care Reform”, and “The Future of American Health Care”. In “The American Health Care System”, Dr. Emanuel details the state of the AHCS immediately prior to the passage of the PPACA and focuses on the monumental task of outlining the various aspects of the AHCS. Using his gift for clear and concise writing, he describes the labyrinthine system of how and where Americans get care, what they are charged and who pays for those charges. Finally, he outlines what he sees as the five key problems with the pre-PPACA AHCS: the cost of being uninsured for patients, the economic impact of high health care costs, non-existent or unenforced quality standards, the lack of transparency in both costs and quality, and the problem of medical malpractice. It is these problems that spur reform.

In “Health Care Reform”, Dr. Emanuel begins with an historical overview of attempts at health care reform, and the political and economic factors that have resulted in the existing system. Understanding the various players (including physicians, politicians, political parties, insurance companies and corporations) and how their agendas shift over time explains how America ended up with such a patchwork system and demonstrates the challenges of reforming the system. He includes an insider’s account of how these challenges were met in developing and enacting the PPACA and the Supreme Court decisions that further demonstrate the intense politics that govern how Americans get care.

Dr. Emanuel then turns to his explanation of the PPACA and wisely chooses to address the provisions thematically in order to better summarize the reforms required by the law. For each thematic area (such as access, cost control, quality improvement, etc.), there is an explanation of the elements of the PPACA that address particular area and how those elements are supposed to address the problem. Critics of individual provisions, or the entire PPACA, may not be satisfied by the explanations because Dr. Emanuel does not provide much argument as to why these particular provisions will solve the identified problems better than other possible solutions. However, this is a bit unfair, as the purpose of the book is not to defend every aspect of the PPACA but to explain what the provisions of the PPACA are and what those provisions are intended to address. Those seeking detailed justification for the various parts of the PPACA should look elsewhere.

In the final section, “The Future of American Health Care”, Dr. Emanuel discusses how the PPACA will change health care delivery and payment in America. He begins with a scathing analysis of what went wrong in the initial implementation efforts and establishes metrics (“ACA dashboards”) for determining if the PPACA is doing what it was intended to do. He then bravely offers predictions for the future of health care in America after the PPACA and envisions a radical transformation of the health care landscape. This brave new world of health care includes not only meeting the objectives of the PPACA, such as cost reductions and quality improvements, but also includes more radical predictions about the growth of telemedicine and outpatient integrated care reducing the need for hospitalizations resulting in the closure of many acute care hospitals.

There are undoubtedly still open questions, for example, what, if any, provisions of the PPACA will address the needs of patients in need of long-term care
whose family is unable or unwilling to care for them? The insurance plans are not required to cover skilled nursing facilities. Additionally, it is not entirely clear how patients will act within this new system. Things such as patient (or family) wishes regarding treatment, patient compliance and patient’s willingness to use new technologies have a significant impact on how, where, and what care is delivered. Certainly, addressing cost, quality, and access will influence patient actions, but whether or not Dr. Emanuel’s predictions about the future health care system come to pass depends in part on the actions of patients within that system.

Ultimately, this book provides a great service; Dr. Emanuel offers a clear and accessible summary of the need for health care reform and an explanation of the provisions of the PPACA. This is a helpful work for general readers and a great starting place for more serious inquiries into health care reform.

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