Name of Student

Name of Professor

Name of Class

Day Month Year

**Introduction**

The Affordable Care Act (ACA) or Obama care is officially known as PPACA, the Patient Protection Affordable Act. It is the law of the United States of America which was approved on 23rd March 2010 by President Barack Obama (Koh). Its aim was to enhance the sustainability and quality of the protections of wellbeing. The focus of this law was on delivering individuals social insurance protections who are unable to manage the expenses of their health care protections. Moreover, ACA’s aim was to advance the general medicinal services of America which were based generally on: reducing social insurance cost of government, monitoring and regulating the protection industry of wellbeing, and empowerment of the protections and rights of the patients (Koh). It comprises more than thousand pages which have provisions that cover industry of human care protection with precise end objective to amend cost of social insurance with the end objective of delivering rational and fair awareness of health protections to the people living in entire America. In addition, the ACA supports families and people who are underprivileged, creating under the FPL (Federal Poverty Level), to obtain protection of wellbeing by the widely spreading Medicare and Medicaid, proposing expenditure support by commercial centers of health protection. This law comprised that until 2022, modifications would be taken off on annual premise when all of the modifications will be recognized inside the particular Act (Patient protection and affordable care act).

**The Background of ACA**

In times, when President of U.S. Barrack Obama fought for the power and administration, he was embraced by the American Nurses Association. It happened because Obama took his time to understand and listen to what attendants had to say about health awareness. President listened about all the struggles, difficulties and battles of nursing. He assured that he would help and address to resolve such issues. After he made a promise and guaranteed, its effects resulted in the creation of Affordable Care Act which was included into the law of United States of America on the 23rd of March, 2010 (Patient protection and affordable care act).

Affordable Care Act’s idea was a distinct order to get insurance and protection along with backings for private protection. This particular idea was advanced for the first time by politically conservationist organization of research, The Heritage Foundation. They believed that “Medicare for All” was a reasonable choice to the single payer, being planned by the administration of Clinton. From that time, change in social insurance was developed and planned by both of the political parties till it was imposed by the Romney, Governor of that time, in Massachusetts. Change in human services took a turn to a noteworthy board on the Democratic Party's stage in 2008 (Patient protection and affordable care act).

Affordable Care Act is in full control now and news of its impacts on the community of nursing can be perceived by anyone. Few of the reports have shown great results. For instance, development of work; whereas others thrust that medicinal caretakers have a massive burden of patients which is bringing on condensed and less health care for the patients.

**Pros and cons of ACA effects on a nursing**

Of course, the Affordable Care Act came with several pros and cons. This law benefited this country and its people but it has also affected some platforms which are mentioned below:

**The augmented necessity for senior medical caretakers**

Healing centers and doctors require attendants who are experienced in hospice and geriatric mind. As, in Washington DC, it is directed by the National Council on Aging: the amount of American people of age ranging from 55 years and more will take off from 21% of the populace (around 60 million) to above than 31% (around 107 million) by the time of 2030 because of the baby boomers (Patient protection and affordable care act). Few most serious sections of the Affordable Care Act are currency associated incentives proposed to chief care providers who are treating patients of Medicare. Healing centers, outpatient focuses, and doctors will be waged for the cooperation and type of deliberation against the amount. In addition, there will be more protruding interest for hospice and geriatric nursing administration to deliver such services (Patient protection and affordable care act).

It is expected that comprehensive applications of telehealth will be an essential plus for most of the population to take care of the growing demand for access and data of medicinal services (Rosenbaum). For nurses, there will be an extended interest, who have mechanical and clinical skills. Because more people have access to affordable care, in the following few years, throughout nurses’ interest will increase exponentially. Although there are chances that ACA may not modify the way patients are treated i.e. one by one, it might change the way they are seen. There is extra attention now to wellbeing and preventive care (Patient protection and affordable care act).

**More Screenings**

The ACA offers many protective measures, they have generally fewer deductibles and low co-pays. The main point is that if one is good in taking care of health, they will be able to delay major health issues in later stages. Healthy consumers bear less cost eventually. For instance, a person having diabetes screening and treatment beforehand helps in avoiding the massive cost of complex treatment at later stages. According to Dr. Christopher Lillis, who is an internist in Virginia "The ACA will be assisting all Americans in quality patient care but in less cost and affordable prices in the coming decades".

**Signing up for ACA can be difficult**

Portal of ACA had various difficulties when it was launched for the first time. It made it very difficult for individuals to sign up. However, such issues have been eventually resolved, people complain that enlistment procedure is complicated because signing up for the right family and business can be complicated (Davis).

**Increase in taxes**

Numerous taxes were made to aid in paying for the Affordable Care Act, comprising taxes on pharmaceutical sales and medical device. More taxes were created as well for individuals with elevated incomes. A lot of savings come from finance of Medicare payments as well (Davis).

Rich people are assisting to support the insurance for the poor people. However, some economists expect that Obama care will aid to lessen the shortage and may finally have a progressive influence on the budget, in long terms.

**Lesser Costs of Drug**

ACA assured to lower the cost of prescription drug and make it economical for several people, especially for the old people who cannot afford the expenses of all their treatments (Koh). Over the years visible growth can be seen in prescription and generic drugs. According to reports, within the first 5 years of ACA, prescription and generic drugs’ saving was more than $15 billion dollars.

**Augmented Stress of Workforce**

Without a solid and developing workforce which is working under improved working conditions, patient consideration nature will not make any signs of progress. Experts of health depress over the effect of the Affordable Care act on their workforces, several are seeing other opportunities and professions. The Affordable Care Act grows pressure on particular frameworks, specialists and associations.

**Patients have entered in the System**

Since the time affordable care Act started, the framework of social insurance came across a rise in the amount of new patients (Kocher). The thing which was not normal is, few patients have chronic and serious sickness which have been ignored and consequently indulge more minds of the people (Rosenbaum). Few may have important conditions which motivated insurance agencies to somehow decline their scope. It takes additional care and time to improve the power of these new patients, which has set tension on healing centers and medical attendants.

**Increase in Emergency Visits**

Earlier, it has been hesitant for an uninsured to go for treatment to crisis spaces. Meanwhile, patients protection now, some offices are meeting prolonged visits of ER.

Therefore, patient burdens and hold up times have equally extended for specialists and medical attendants.

**Conclusion**

The expediency of excellent Affordable Care Act’s human services is tentative. The emerging workforce of health awareness is in scarcity, whereas recognized movements which went before the Affordable Care Act, it is not alleviated by the new law of wellbeing. On the occasion in which such trends continued, they will take a turn to unusual weakness to the prosperity of the Affordable Care Act and damage the quality care’s nature to a massive number of American people. Hence, people of America need more nurses, therapeutic experts, and other specialists. Affordable Care Act’s real procurements were employed in 2014 in the month of January (Rosenbaum). Along with the rough start to the trade enrollment, the decline in the arrangement of wellbeing competition in the trades, doctor's and other medical workers' limited network rise, and deductibles’ and premiums’ rate stun, more people of America challenge the new law of well-being that assists it. There is a chance that these initiating problems change into dropping disappointments fused with horrific troubles of existing care and scope, Congress will be bound to act.

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