**Obamacare Pros and Cons**

The Affordable Care Act (ACA), also known as Obamacare, was introduced into the healthcare system as part of the overall reform. The ACA pursued the expansion of healthcare coverage, striving to address the plight of the poorest in society and those with complex health conditions. Many critics addressed the components of the health act, focusing on the implications for economic advancement, social developments, and the future of healthcare costs. Significant praises have also targeted this legislation, voicing the millions who have gained from its impacts. This essay analyzes the pros and cons of the ACA relative to the entire healthcare system and the American people. Indeed, despite limitations in cost management, the ACA has reduced the number of uninsured in the community today, ultimately enhancing access to services that were previously beyond reach.

**Pros of Obamacare**

Obamacare has enhanced marketplace enrollment within the population. According to Glied et al. (2017), many Americans remained uninsured before the Affordable Care Act's implementation. Between 9 and 19 percent of the non-elderly population in the United States reported going without care because of a lack of access to sufficient coverage (Glied et al., 2017). The introduction of the ACA recorded a significant increase in insurance rates. More than 20 million Americans have gained coverage since the introduction of Obamacare (Keith, 2021). This gain was in all income levels, with reductions in the difference between specific races and ethnicities and their access to healthcare. Despite some states adopting Medicaid while others failed, the effect of the ACA was perceptible countrywide, with only modest differences in these contexts. Ultimately, reports of failure to seek care because of the lack of insurance coverage diminished significantly after Obamacare across the sociodemographic lines (Courtemanche et al., 2018). These experiences accentuate the implications of the ACA for enrollment into healthcare coverage.

The ACA has also benefited the healthcare system by improving the coordination capacities among different organizations. One of the fundamental reforms of Obamacare was the introduction of accountable care organizations (ACOs) (Neiman et al., 2021). Mainly, these entities are voluntary models comprising diverse providers who align with the sole purpose of ensuring highly coordinated care for their patients. This approach means that patients with chronic conditions are more assured of comprehensive care (Neiman et al., 2021). Primary care and population health have gained significance, with practitioners focusing on practices that create efficient management. Besides, the systems incur lower costs, mainly as the systems facilitate shared savings and extensive bonuses. The rewards of preventive care are also beneficial to the participating providers (Song, 2021). Therefore, more private payers have bought into the system and invested in the capabilities that this approach promises. The possibilities of healthcare savings have also grown, allowing the total country expenditure to slow down over the last five years.

**Cons of Obamacare**

On the other hand, Obamacare has some shortcomings. The growth of high-deductible health plans is one of the issues confronting America after the ACA, primarily because of the resulting burden on consumers. Notably, this challenge develops from employer reactions to the provisions of Obamacare. Many large group employers have adopted a trend where they only offer high-deductible health plans, a feature observable in over 42% of the entities. This approach is beneficial for organizations as it reduces the monthly premium payments. However, the high-deductible health plans increase the subscribers' out-of-pocket expenses. A notable phenomenon is a reduction in the cost of care, not as a direct outcome of cheaper services but as a response to the decrease in health service usage. Ultimately, consumers face a greater responsibility to account for their healthcare costs.

Obamacare has also increased the premium payments, ultimately making insurance more expensive for a significant proportion of the population. According to Book and Howard (2017), premium rates rose by 60% beginning in 2013. Health Maintenance Organization (HMO) premiums declined by about 5% before the ACA. However, after legally implementing this provision, there was an estimated 46% increase over four years. Despite variations in age and family involvement, the ultimate report indicated that the ACA increased premiums by about 60% (Book & Howard, 2017). The changes in social conditions, alongside Obamacare's provision that insurers must cover people with pre-existing conditions, have escalated these costs. Besides, the participant pool is broader, making insurers need to seek options to ease operational costs (Keith, 2021). Hence, premium costs will continue rising under the ACA as providers strive to sustain their marketplace presence.

**Conclusion**

Obamacare has been advantageous in easing healthcare access across socioeconomic groups, despite presenting cost challenges to some premium payers and consumers. The act introduced conditions that improved marketplace enrollment and encouraged quality care through the ACOs. However, some demerits accompanied this legislation, including the heavy responsibility for consumers through out-of-pocket costs and the annual growth of premiums. The impacts depict the ACA as both beneficial to American society and challenging to sustain in terms of price. Therefore, Obamacare may be a fundamental component of the solution to the United States' healthcare limitations, but crucial changes would be necessary to accomplish comprehensive transformations.

**References**

Book, R., & Howard, P. (2017, March 22). *Yes, it was the Affordable Care Act that increased premiums*. Forbes. https://www.forbes.com/sites/theapothecary/2017/03/22/yes-it-was-the-affordable-care-act-that-increased-premiums/?sh=c42573c11d25

Courtemanche, C., Marton, J., Ukert, B., Yelowitz, A., & Zapata, D. (2018). Effects of the Affordable Care Act on health care access and self-assessed health after 3 years. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing, 55*, 0046958018796361.

Glied, S. A., Ma, S., & Borja, A. (2017, May 8). *Effect of the Affordable Care Act on health care access*. Commonwealth Fund. https://www.commonwealthfund.org/publications/issue-briefs/2017/may/effect-affordable-care-act-health-care-access

Keith, K. (2021). The American Rescue Plan expands the ACA. *Health Affairs, 40*(5), 696-697.

Neiman, P. U., Tsai, T. C., Bergmark, R. W., Ibrahim, A., Nathan, H., & Scott, J. W. (2021). The Affordable Care Act at 10 years: Evaluating the evidence and navigating an uncertain future. *Journal of Surgical Research, 263*, 102-109.

Song, Z. (2021). Taking account of accountable care. *Health Services Research, 56*(4), 573-81.