Legal and Regulatory Environment of Healthcare

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President Barack Obama transformed the American healthcare sector by establishing the Affordable Care Act whose aim is to protect American people. This Act became controversial and raised several questions that resulted in the discourse regarding the Act's constitutionality (Clarke, 2016). Such questions and concerns led various States to file a petition against the Act's constitutionality at the United States Supreme Court. The *National Federation of Independent Business V. Sebelius* remained a concerned and significant case in the Supreme Court, which was to be analyzed, reevaluated, and regulated based on the federal government's enforcement.

The reevaluation and disagreement of the Act brought several constitutional issues, including the individual mandate and expansion of Medicaid across the United States. The individual mandate required civilians to purchase health insurance. In contrast, the Medicaid expansion focused on expanding the Medicaid program to cater to all the Americans in consideration of income bracket, leading to the loss of Medicaid funds across America (Clarke, 2016). The Supreme Court evaluated the individual mandate and declared that the Act was unconstitutional under commerce, Proper and Necessary Clauses. However, the Court considered the Act to be constitutional under Power to Tax.

The Supreme Court also examined Medicaid Expansion and described it as coercive based on the penalty in noncompliance. The individual mandate aims to reduce the number of uninsured United States residents in reforming the health care system. It needs individuals to keep "minimum essential" health insurance coverage and penalize those who would not comply by requiring them to share the responsibility payment to the federal government (Obama, 2016). The ACA outlines how the fine would be applied, especially to the Internal Revenue Service, together with taxes among individuals. Such fines and taxes would be monitored and regulated similar to tax penalties.

The individual mandate included other clauses, including the Commerce Clause that describes Congress's power of regulating commerce in various States (Obama, 2016). On the same note, the NFIB v. Sebelius case provides challenges regarding holding the commerce clause by Congress via the substantial effects doctrine of the Clause. Here, the case questions Congress's ability to regulate commerce and economic activities not outlined or defined about commerce themselves. The federal government uses this clause and substantial effects doctrine to expand its power (Obama, 2016). The Commercial Clause regarding NFIB v. Sebelius holds a key constitutional concern about the regulation of PPACA's mandate.

Necessity and Proper Clause under the Constitution permit Congress to make laws responsible for executing other powers described in the constitution. Similarly, the constitutional issue surrounding the PPACA outlines the necessity of the law (Obama, 2016). Here, the Clause had to be implemented and become an example of a power permitted to Congress as outlined by the constitution. The Commerce Clause thus plays a significant constitutional role concerning NFIB v. Sebelius. Besides, Congress combined the two clauses to reinforce the government's case to fulfil PPACA's constitutionality in justifying the individual mandate.

Medicaid Expansion is aimed at increasing individuals' coverage among the States to meet the interest of all. The Affordable Care Act seeks to cater for Medicaid coverage to individuals with low incomes ranging from 133 percent to the federal property level (Christine, 2020). The Medicaid Expansion and the constitution under Article/Section eight provide Congress with a mandate to spend money for debts, general welfare, and defense of the United States. This section allows Congress to encourage various states to comply with federal laws. The ACA provides equal access to affordable care in several ways to benefit low-income families and individuals. The Act includes quality health insurance and limits the spending on health care in the United States.

The Act brought several changes, including the "Ten Essential Benefits." Such benefits include maternity and outpatient care, emergency services, hospitalization, chronic disease treatment, newborn care, health services, and prescription drugs. Similarly, the Act covered other areas such as laboratory services, rehabilitative services and devices, addiction treatment, pediatric services, free preventive and wellness services (Christine, 2020). This Act considered the needs and expectations of all people, including the adult population, low-income earners, and all categories or social classes across the United States.

However, the Act faced numerous critics, especially across the political spectrum, outlining its negative consequences differently. For instance, most of the leading lights from the far left criticized Obamacare, which goes all the way to socialized medicine as an alternative to the single-payer/ public option defeated in the Congress (French et al., 2016). Obama's critics claimed that the ACA Act is a "Trojan Horse for socialized medicine." They criticized that the Act was merely a Trojan horse for a single-payer system. Other critics suggested that the ACA would result in a massive cancellation of millions of policies held by individuals and loss of their coverage almost immediately.

The Court's decision regarding the National Federation of Independent Business v. Sebelius was based on four significant issues related to the ACA legality. First, the decision was to address Congress's power to enact the individual insurance coverage requirement under the federal constitution (French et al., 2016). The Court was to decide whether Congress, through ACA, was unconstitutionally coercive in threatening to take away the existing federal Medicaid funding from states that failed to abide by the implementation of the Medicaid expansion. Therefore, the NFIB case brought several issues that transformed the health care system in the United States.

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