

The Patient Protection and Affordable Care Act (PPACA) is officially the Law of the Land. After almost 100 years of thoughtful and arduous effort by generations of Americans concerned about the health of their fellow citizens, America has finally made a meaningful move toward what the rest of civilized nations have had for decades, healthcare for all. Since around the time of the First World War, this effort has been intermittently on this country's agenda, pitting social justice and humanitarian ideals against political and economic forces, with the latter forces prevailing every time...until now. Indeed, PPACA only became law on the narrowest thread possible, on the intellect of a single man in a country of 314 million individuals.

I will not recite the benefits of this seminal piece of social legislation as these have been discussed in detail since PPACA was first accepted for Supreme Court review. Those interested in the benefits are well aware of what will change as a result of PPACA, and those opposed to the legislation on ideological and political grounds do not care. But they should, as I will illustrate shortly.

Although some elements of PPACA have been phased-in since signed into law by President Obama in 2010, the bulk of the legislation will not enter the American landscape until 2014. It will not be in full effect until 2020. This phased approach was required due to the enormous impact healthcare has on the fabric of our country, representing 18% of the Gross National Product. Anyone who claims to have a simple answer to healthcare does not understand the question.

I have been engaged in the national healthcare reform effort as a physician advocate since 1992. All of us, on both sides of the discussion, have had reciprocal periods of great elation and profound depression. And we all also understand that this is still only the end of the beginning. The law is far from perfect. The proponents will endeavor to revise and refine the law to improve it, and the opponents now will embark on attempts to dismantle the law by any means possible, as they say, to repeal and replace. It is not clear with what they would replace PPACA. See comment above about simple answers.

The healthcare industry and healthcare providers will now continue the Herculean tasks of implementing the provisions of the law. But we need parallel efforts to focus on cost containment and quality improvement. Since financial profit is

often predicated on inefficient and redundant care, these efforts will be slow and difficult. Accountability will play a huge role in moving these efforts forward. Innovative applications of healthcare information technology to implement evidence-based disease management of high-risk patients that produce disproportionate costs will be required. Management strategies are known; implementation strategies are not. Healthcare systems must take the long view and invest on the tools and skills to achieve those goals.

To our conservative colleagues in the courts, Congress and Main Street, let me posit a scenario on why they should care about what is in PPACA. Many who oppose PPACA, and certainly those in Congress, have insurance. Let's pretend that they, too, would now be subject to our healthcare system without PPACA's benefits. They can now be denied healthcare coverage for a pre-existing condition. Or be faced with an unaffordable premium since without the mandate, fewer people would be paying for sicker care. They would have a limit on lifetime benefits, so too bad if they have chronic or recurrent diseases. Their young adult children, who may not be able to afford insurance on their own, cannot remain on their parents' policies. The insurance companies can keep their excess profit, rather than having to refund back the difference. And there would be no marketplace to shop for the best insurance plan for themselves and their families. All gone without the provisions in PPACA. How would they like THEM apples?