

ACA provides an ounce of prevention

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One's view of the tumultuous launch of the federal health insurance marketplace probably depends on your party affiliation and whether or not you've had the misfortune of trying to sign up for coverage via the law's HealthCare.gov web site.

As a supporter of the Affordable Care Act and someone with decent health insurance, I would charitably characterize that rollout as botched, but imminently fixable. I'd also characterize the Obama Administration's ham-handed ability to communicate the costs and benefits of the ACA as a greater impediment to the law's full implementation than the unrelenting, yet predictable opposition of Congressional Republicans committed to the law's demise.

The problem-plagued website and administration's missteps continue to obscure the successful rollout of many other parts of the reform law over the past three years, including cost-free access to a range of preventive services for those currently insured and those who will gain coverage through the private exchanges and Medicaid expansion.

In Nevada, as a result of the ACA, nearly 400,000 Medicare enrollees now have access to preventive services, such as colon cancer screenings, mammograms, and an annual wellness visit without copayments, coinsurance, or deductibles. Likewise, over 600,000 Nevadans with private health insurance have gained preventive services coverage with no cost sharing due to the reform law.

Last week, research presented at Immunize Nevada's annual conference in Las Vegas underscored the promise of improved population health and substantial health care cost savings in Nevada through preventive-services provisions contained in the ACA.

Epidemiologist Dr. John McLaughlin presented estimates of the human and economic toll of four vaccine-preventable diseases (VPDs) – influenza, pneumonia, herpes zoster or shingles, and pertussis – among Nevadans over the age 50. His analysis revealed that the current cost of these four adult VPDs is \$212 million. This includes \$178 million in direct medical costs associated with diagnosing and treating those diseases and another \$34 million in indirect costs, such as illness-related lost income and diminished productivity.

To be sure, none of these diseases is entirely preventable and the provision of every preventive service has an associated price tag for workers and taxpayers (I take every opportunity to remind my students that nothing is free). Nonetheless, we have only begun to realize the

sizable return on investment and reduction in human suffering resulting from greater access to vaccinations and other cost-effective, evidenced-based preventive measures.

The ACA provides an essential and necessary platform for extending the impact of such measures to uninsured Nevadans by improving their access to a primary care physician or nurse practitioner knowledgeable about prevention in the first place, and by removing any remaining financial impediments to preventive services, such as copays for vaccines.

We should only expect more rather than less attempts to obstruct, defund, repeal, investigate, and otherwise undo the ACA by the law's congressional opponents for as far as the eye can see. I for one remain bullish on the promise of reform and the positive impact it is already making on the public's health in Nevada.

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