

Customized Briefing for Kimberly Barry-Curley



October 27, 2014

[Leading the News](#)  
[Legislation and Policy](#)

[Public Health and Private Healthcare Systems](#)  
[Uninsured](#)

## Leading the News

### Insurers Try To Limit Costs, But Patients See Separate Fees From Providers.

The [New York Times](#)   (10/26, A20, Rosenthal, Subscription Publication) reported on the trend of insurers de-escalating payments to physicians and hospitals as the latter impose “a host of new charges” for services that in the past were included in other costs or not enumerated at all. Cindy Weston of the American Medical Billing Association, an industry group, said it’s doctors’ prerogative to decide what to include under principal payments and what to consider as extra charges. The Affordable Care Act offers guidance on what kinds of exams must be covered at no cost as preventive services, the story notes. But a spokeswoman for America’s Health Insurance Plans said providers who choose “to do something beyond what’s covered” may incur charges.

#### From NAHU

#### PPACA Certification Course

Developed by experts in both PPACA and employment law, this high-level 10-hour course will ensure that the student understands the key technical components of PPACA and is better prepared to counsel his or her clients on upcoming required healthcare changes and new options and requirements for health plans.

An overview of all regulations already issued will be presented along with details on specific regulations issued to date. The student will learn what is needed to comply with the new law as well as how the market is likely to change over the next few years and will be able to develop client specific timelines and provide advice to guide clients in planning for the future.

Complete course instruction will be delivered through NAHU's [Online Learning Institute \(OLI\)](#) and followed by a final exam, which is required to obtain certification and [continuing education \(CE\)](#) credits.

[Click here](#) to enroll in this course or visit NAHU's [PPACA certification webpage](#) for more information.

*\*The PPACA certification course is a certification of expertise in the provisions and implementation of health reform. It does not meet state or federal requirements that may be necessary or required to sell exchange-based plans.\**







## Legislation and Policy

Advertisement





## CMS Prepares Healthcare.gov To Handle Open Enrollment Surge.

According to officials, the Centers for Medicare and Medicaid Services “is preparing to handle the largest swell of Healthcare.gov users accessing the system since it launched a year ago. Open enrollment for Affordable Care Act health insurance plans starts Nov. 15,” the [Federal Times](#)   (10/24) reports. Anticipating a surge of enrollees, “CMS has retooled its Healthcare.gov website and increased staffing at call centers across the nation.”

***HealthCare.com Uniquely Positioned During ACA Open Enrollment.*** The [Washington Post](#)   (10/25, Millman) “Wonkblog” reports on how some ACA customers may “wind up by mistake at HealthCare.com” during open enrollment. HealthCare.com CEO Jeff Smedsrud “is fine with that” as his company’s website touts “a choice of 93,000 plans from about 180 insurers across the country, with the opportunity for consumers to enroll online, over the phone or with a

licensed agent or broker.”



## ACA Enrollment Workers Expected To Play Bigger Role This Year.

[Politico](#)   (10/25, Villacorta) reported that the second ACA open enrollment period begins Nov. 15, and advocates “expect a much smoother start than last year’s debacle.” Still, challenges remain, including poor public understanding of the law. Consequently, navigators, counselors and in-person assisters “expect to play an even bigger role this year, partly because one of the ‘lessons learned’ from the first enrollment push is that they can be very effective.”



## HIV-Positive Consumers Find Drug Costs On Exchanges Too High.

The [Miami Herald](#)   (10/27, Nehamas) explores the issue of HIV treatment under the ACA. Some insurance companies, according to a Federal Civil Rights Complaint, effectively discriminate against HIV patients by charging “inordinately high” rates for related medication in an effort to deter HIV-positive consumers from choosing those plans. The Ryan White program, which helps HIV-positive people pay for medication, is a “payer of last resort,” meaning that many who benefit from the program will have to get insurance through the exchanges, where HIV medication costs are high. Aaron Albright, a spokesman for CMS, said the ACA laws against medical discrimination are “effective.”

## Days Before Midterms, No Signs Of House’s Legal Challenge To ACA.

[Politico](#)   (10/27, Gerstein) reported that House Speaker John Boehner “came out swinging hard last June” when he announced that the House would sue the Obama Administration over aspects of the Affordable Care Act. But lawyers close to the process, who originally expected the legal challenge to be filed in September, now say they don’t expect any action before the midterm elections. The delay “means the core of the suit could effectively be moot,” as the case was expected to focus on an employer mandate provision that is scheduled to kick in for many on Jan. 1.

## Georgia’s Insurance Commissioner Takes Heat From Opponents On ACA.



The [Atlanta Journal-Constitution](#)   (10/27) reports that Republican Ralph Hudgens, Georgia’s incumbent insurance commissioner, continued to voice his criticism of the ACA on Sunday “even while caught in a political crossfire from his two lesser-known opponents.” At an Atlanta Press Club debate, Hudgens stated, “I’ve said it’s going to limit choices, limit the number of doctors, and that premiums are going to increase.” Meanwhile, Democrat Elizabeth Johnson said Hudgens failed to help uninsured Georgians sign up for coverage on the state’s exchange, and Libertarian Ted Metz “accused Hudgens of failing to inform Georgians about the effects the Affordable Care Act, which Metz also opposes, would have on their daily lives.”

## Vitter Says Repealing ACA Would Be GOP Senate’s Top Priority.



[The Hill](#)   (10/27, Wong) reports that Sen. David Vitter (R-LA) said Sunday that the number-one priority for Republicans if they take control of the Senate is to repeal the ACA. Speaking on Fox News, Vitter stated, “Now that would be vetoed by President Obama, but I

think it's very important to move forward with that, the House and Senate together." He added, "And then also look at specific reforms after that veto that can make a difference in the next two years before the next presidential election."



## **Administration Delays ACA's Data Disclosure Requirements For Insurers.**

The [New York Times](#)   (10/27, Pear, Subscription Publication) reported that with the ACA's open enrollment period set to begin in November, the Obama Administration has notified insurance companies that it will delay requirements for them to disclose data on the number of people enrolled, the number of claims denied and the costs for specific services. For months insurers have been asking the government whether they had to comply with certain provisions of the ACA that require "transparency in coverage." The Administration said in a bulletin last week, "We do not intend to enforce the transparency requirements until we provide further guidance." CMS spokesman Aaron Albright stated, "We expect this will begin after a full year of claims data is available."



## **ONC Departures Could Hinder Administration's Interoperability Efforts.**

[Congressional Quarterly](#)   (10/27, Subscription Publication) reported that the departure of the "two top officials in the federal government's health IT effort" seems to come at a bad time amid the Obama Administration's effort to boost health interoperability. It was announced last week that Karen DeSalvo would be leaving her post as director of the Office of the National Coordinator for Health Information Technology in order to assist HHS Secretary Sylvia Mathews Burwell on the US response to Ebola. Also leaving the ONC is DeSalvo's deputy Jacob Reider, who announced his plans shortly after DeSalvo's reassignment was made public.



## **Washington County Uses Outreach To Enroll Uninsured Populations.**

[National Journal](#)   (10/25, Subscription Publication) profiled Daphne Pie, "the manager of access and outreach at the public health department for Seattle and King County" in Washington state. Pie and Matias Valenzuela, King County's equity and social justice manager have identified trusted leaders within populations with higher-than-average uninsured rates "to carry their message: You can have health insurance for free or at very low cost." The article noted that while county bureaucrats have identified areas where certain populations lag behind in healthcare, "they can't always reach out to them on their own."



## **Risk-Corridor Debate Could Spark Congressional Standoff.**

[Modern Healthcare](#)   (10/24, Subscription Publication) reported that a "big fight" in Congress could be brewing over the ACA's risk-corridor program. Insurers rely on the program to protect them from major losses if their exchange customers end up being more costly than anticipated, but Republicans say the program constitutes a bailout for insurance companies. Last month, the GAO issued an opinion "that conservatives have interpreted to mean that Congress must provide explicit funding for the risk-corridor program." In response, 14 Republican senators sent a letter to House Speaker John Boehner (R-OH), asking him to block any spending bill that provides funding for the program.



## **Op-Ed: ACA Has Helped Rhode Island Hospitals.**

In an op-ed for the [Providence \(RI\) Journal](#)   (10/25), Ted Almon, co-chairman of the reform advocacy group HealthRight, touted the successes of the ACA. He noted that before the law, Rhode Island's hospitals were "deeply stressed" by a cost spiral in uncompensated care. But this fiscal year, they achieved a surplus of about \$50 million, a "remarkable turnaround" that shows that "meaningful and apparently effective reform is indeed taking place."

## **New York Candidates Fight Over ACA.**



[Newsday](#)   (10/25) reported that Democrat Kathleen Rice and Republican Bruce Blakeman "faced off Friday in the only debate" of New York's 4th Congressional District campaign, but "it was President Barack Obama's name that took center stage." Blakeman said the ACA was "bringing us closer to socialized medicine" and said that Rice supports "every single one" of Obama's policies. Rice acknowledged that the implementation of the law was "a disaster," but stressed her independence from fellow Democrats and said Blakeman's calls for repeal were "political gimmicks."

## **Healthcare Sharing Ministries Examined As Alternative To ACA Plans.**



The [US News & World Report](#)   (10/24) reported in its "My Money" blog that people who cannot afford ACA-approved plans – or object to purchasing one for religious reasons – can sign up for healthcare sharing ministries, which are alternative plans that "allow people to share their health expenses for the common good." The non-profit religious organizations currently cover 300,000 people nationwide, according to the Alliance of Health Care Sharing Ministries. Though the plans offer a lower level of coverage overall and are

not required to cover pre-existing conditions, healthcare sharing ministries “often cost far less than traditional insurance.”

## Ads Targeting ACA Pick Up As Midterms Near.

[Bloomberg](#)   (10/24, Talev) reported that with “less than two weeks to go before the Nov. 4 elections, the Obamacare attacks are back, according to new campaign ad spending data.” Indeed, in the first week of July there were only 1,378 “anti-Obamacare” ads on TV in Senate races. But between Oct. 7 and 13, “there were 11,782 anti-Obamacare ads on TV in Senate races across the country, with the biggest concentrations in four of the nation’s hottest campaigns: Kentucky, Iowa, Louisiana and Colorado.”



## Alabama Insurance Agents Use Own Online Health Exchanges To Find Customers.

[Alabama Live](#)   (10/25) reported on how Alabama insurance agents are staying relevant after the ACA kicked “into high gear last year.” Insurance agent Mark Cagle, for instance, “hired a Birmingham-based business to build his own health exchange at shophealthinsurance.net, which launched last month.” Using data from HealthCare.gov, the website offers health plans sorted by ZIP code in addition to life insurance, home insurance, and other products sold by Cagle. Meanwhile, Birmingham-based Health Partners America “has created about 1,000 similar online health exchanges for insurance agents and businesses nationwide.”



## Public Health and Private Healthcare Systems

---

### Status Of Medicaid Expansion In Red States Seen As Mixed.

[USA Today](#)   (10/25, Jackson) reported that President Obama is getting mixed news as “his administration tries to persuade Republican governors to sign off on Medicaid expansions.” Utah Governor Gary Hebert, for example, said he had reached a tentative deal on Medicaid expansion. Meanwhile, reports have surfaced that Indiana Governor Mike Pence “may nix a Medicaid deal.”




### Tennessee Baptist Children’s Homes Struggle With Medicaid Applications.

The [Tennessean](#)   (10/27) reports that Tennessee Baptist Children’s Homes are having trouble applying for the state’s Medicaid program, TennCare, on behalf of children. Lisa Epps, a campus ministry assistant at Double B Boys Ranch in Millington, said she tried submitting an application to the federally-facilitated marketplace after “TennCare stopped having state personnel process most of its Medicaid applications” and never heard back. She later tried to apply through HealthCare.gov and ran into another problem: “She couldn’t use her Social Security number to apply on any child’s behalf because their parents still have legal custody.”



### ACA, Medicaid Expansion Get Mixed Reviews At Kansas Conference.

The [Kansas Health Institute](#)   (10/24) reported the Affordable Care Act received mixed reviews at the 2014 Kansas Economic Policy Conference, which wrapped up on Thursday. While Andy Allison, a former Kansas Medicaid official, noted that Medicaid expansion had dramatically reduced the uninsured rate in Arkansas, Kansas State Rep. David Crum (R) stated, “Until Congress can fix our entitlement system and balance our budget, I worry about expanding the Medicaid program.”

### Report Projects Medicaid Growth Despite Expansion Holdouts.

Bruce Japsen wrote in [Forbes](#)   (10/25) that a new [report](#)   last week indicated “continued momentum for Medicaid” and particularly so-called “Medicaid managed-care” plans. Enrollment in Medicaid and the Children’s Health Insurance Program is expected to surge by 13.5 million in 2016, according to Avalere Health. Notably, Avalere’s projections “also assume 22 states, largely led by Republican governors or legislatures opposed to the law, continue to ‘opt out of the ACA Medicaid expansion in 2014 and beyond.’”

### Doctor Says Indiana Medicaid Alternative Is Reforming The Program.



In an op-ed for the [Indianapolis Star](#)   (10/27), John J. Wernert, MD, secretary of the Indiana Family and Social Services Administration, argues that Indiana is set to avoid traditional “Medicaid’s shortcomings” by reforming, and not expanding, the program under Governor Mike Pence’s Healthy Indiana Plan. He writes that the state “cannot and should not” merely extend coverage, but instead expand access and improve physician and clinic networks. As such, Dr. Wernert says he strongly supports “the governor’s efforts to provide responsible health care options to low-income Hoosiers.”

### Fate Of Medicaid Expansion In Some States Depends On Governors’ Races.

[Modern Healthcare](#)   (10/25, Subscription Publication) reported that the outcome of gubernatorial elections in 15 states “could have



a pivotal impact” on healthcare for residents of those states, with the fate of Medicaid expansion “hanging in the balance.” States with close races where the outcome could lead to expansion include Florida, Georgia, Kansas, Maine and Wisconsin. States where the outcome “of the governor’s or legislative races could lead to repeal of expansion include Arizona, Arkansas, Colorado and Kentucky.”

## Tillis Changes Tune On Medicaid Expansion.

In continuing coverage, the [Huffington Post](#)   (10/25) reported that US Senate candidate Thom Tillis (R) in North Carolina last week started “singing and distinctly different tune” on Medicaid expansion. In his primary earlier this year, Tillis ran an ad touting his efforts against expansion. Asked about Medicaid expansion by Time Warner Cable News last week, however, Tillis stated, “I would encourage the state legislature and governor to consider it if they’re completely convinced they now have the situation under control.”

[Modern Healthcare](#)   (10/26, Subscription Publication) also reports the story.



## Providers Plan Big Medicaid Enrollment Push.

[Modern Healthcare](#)   (10/25, Subscription Publication) reported that health providers plan to make their biggest push to sign up millions of additional Americans for Medicaid “during the upcoming open enrollment starting Nov. 15 and lasting three months, though beneficiaries can sign up at any time.” According to the Congressional Budget Office, as many as 11 million more Americans will enroll in Medicaid by the end of 2015. As part of their push, enrollment workers are looking to sign up low-income adults who qualify under Medicaid expansion as well as children and adults who were previously eligible but have not yet signed up.



## Uninsured

---

### Americans Share Experiences With ACA.

The [New York Times](#)   (10/27, A1, Subscription Publication) shares a number of Americans’ personal experiences with the Affordable Care Act. While Lyla Turner, a hairdresser in St. Louis, said she found an “amazingly affordable” plan through the ACA, one New York couple said they are choosing to go uninsured again after finding their ACA plan too expensive. Jessica Porter, a nurse practitioner in South Burlington, Vermont, recounted her frustrating experience trying to use the state’s glitch-ridden exchange website.

### UTSW’s New Clements Hospital Funded Partly By Other Providers.

The [Dallas Morning News](#)   (10/25, Jacobson) reports the new UT Southwestern facility, William P. Clements Jr. University Hospital, has been funded in part by some of “the region’s other major providers.” While the \$800 million facility was not directly financed by competitors, “the support came by way of an affiliation of not-for-profit and for-profit hospitals established to enhance care for poor and uninsured patients in Dallas County.”

## Friday's Lead Stories

---

- [Burwell Announces \\$840M In Grants To Improve Care Quality, Lower Costs.](#)
- [Watchdog Says IRS Must Do More To Protect Taxpayer Data On ACA Exchanges.](#)
- [Experts Consider Medicaid Expansion.](#)
- [Guide Aims To Help Consumers Understand Health Insurers’ Provider Networks.](#)

### Subscriber Tools

- [Change Email Address](#)
- [Send Feedback](#)
- [Unsubscribe](#)
- [Email Help](#)
- [Archives](#)

### Advertise with Bulletin Media:

[Philip Tsolakidis](#), 703-483-6133

[Reach key professionals every morning](#) 

NAHU Newswire is a digest of the most important news selected from thousands of sources by the editors of BulletinHealthcare. The National

Association of Health Underwriters does not receive any revenue from the advertising herein. The presence of such advertising does not endorse, or imply endorsement of, any products or services by the National Association of Health Underwriters.

This complimentary copy of NAHU Newswire was sent to kim@neebco.com as part of your NAHU membership. View BulletinHealthcare's [privacy policy](#).

Neither BulletinHealthcare nor the National Association of Health Underwriters is liable for the use of or reliance on any information contained in this briefing.

For information about other member benefits, please contact NAHU Member Service Center at 202-552-5060 or [membership@nahu.org](mailto:membership@nahu.org).

[National Association of Health Underwriters](#) | 1212 New York Ave NW Suite 1100 | Washington, DC 20005

Copyright © 2014 by [BulletinHealthcare](#) | 11190 Sunrise Valley Drive, Suite 20 | Reston, VA 20191