

Customized Briefing for Kimberly Barry-Curley

September 22, 2014



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Leading the News

Flexible Spending Account Rule Change Allows Employees To Carry Balances Year-To-Year.

The [New York Times](#)   (9/20, B4, Carrns, Subscription Publication) reported that flexible spending accounts (FSAs) may become more popular among employees as more companies implement rule changes allowing plans to carry over up to \$500 from one year to the next. The rule was implemented last year, but most employers did not immediately implement it. The Times cited data from the National Business Group on Health, noting “of 60 members responding to an internal poll, more than a third said they would adopt the change for 2015, and roughly a quarter more said they were considering it.” The Times also provided general information about FSAs and the similar Health Savings Account.

From NAHU

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NAHU in the News



ACA Agent Registration Period Ending.

[LifeHealthPro](#)   (9/19) reported that HHS' "2015 agent registration period for the public health insurance exchanges" is scheduled to end on Sept. 30. Agents must complete the application process before that date in order to sell qualified health plans through an exchange. The article noted frustration among some brokers, however. For example, "In California, Neil Crosby, a vice president at the California Association of Health Underwriters (CAHU), said he sees some exchange agents who are tired of wrestling with exchange computer system and compensation system problems."



Legislation and Policy



ACA Has Impact On Tax Rules.

[Modern Healthcare](#)   (9/19, Dickson, Subscription Publication) reported that the IRS is finalizing rules for health insurers' deductions of executive health benefits. The "somewhat obscure" part of the Affordable Care Act lowers the limit from one million dollars.



The [Minneapolis Star Tribune](#)   (9/21, Spencer) reported that the fewer companies paid the ACA's medical device tax than anticipated and the IRS wants to know why. Only 5,107 companies paid the tax, bringing in a total of \$913 million. Estimated had projected between 9,000 and 15,000 companies would pay a total of \$1.2 billion. The tax shortfall "could become a problem for the government, which is counting on revenue from the tax to help pay for the Affordable Care Act."





HealthCare.gov Faces Continuing Security Challenges.

[USA Today](#)   (9/21, O'Donnell) reports that the administrators of healthcare.gov are "trying to resolve glitches and security questions raised by the Government Accountability Office, so people can safely and successfully sign up for insurance at open enrollment Nov. 15," and "administration officials [are] prepar[ing] to test the site with insurers Oct. 7." According to USA Today, "consumers will be able to browse plans at a still unknown time before Nov. 15," and "they will not have to set up an account – a process that stalled many" last year.



[CNN](#)   (9/19, Pagliery) reported that healthcare.gov still faced security risks, even though there had been no publicly-reported breach of personal information. CNN summarized the findings of a recent study into the Federal health exchange conducted by the Government Accountability Office. In addition to the noted deficiencies, GAO's Gregory Wilshusen complained before a House panel that, as CNN put it, "health officials aren't giving investigators enough access to spot problems."

GOP Opening New ACA Attacks Based On GAO Reports.



[The Hill](#)   (9/21, Ferris) reported that Republicans are opening new lines of attack against the Affordable Care Act in light of a pair of negative reports from the Government Accountability Office. The much-discussed reports found health plans receiving Federal subsidies offering elective abortion services in apparent contradiction of the requirements of the ACA. The second audit discovered ongoing security vulnerabilities in healthcare.gov. A spokesman for Heritage Action for America said, "The news that we've seen over the last week and a half really emphasizes what conservatives and Republicans were trying to do last year, which was preventing a lot of this from happening."

Another article in [The Hill](#)   (9/19, Viebeck) noted the GOP's continued attacks on the ACA's definition of full-time work as 30 hours. The [Albert Lea \(MN\) Tribune](#)   (9/20, Stultz) reported on Republican opposition to the ACA, quoting Senate candidate Mike McFadden, who called the landmark health law a "train that continues to wreck."



Most Insurance Plans Do Not Cover Applied Behavioral Analysis For Adults.

[Kaiser Health News](#)   (9/19, Andrews) reported that adults with autism often have trouble finding health insurance plans that cover applied behavioral analysis. While many states require health insurers to provide coverage of the therapy for children, there is no such mandate for adults. Lorri Unumb, Vice President of State government Affairs at Autism Speaks, believes the age limits, which have never been considered by the courts, may violate Federal law, saying, "In my opinion, all of these age caps are probably invalid under mental health parity."



Medical Liability Insurers See Dropping Profits.

[Modern Healthcare](#)   (9/19, Robeznieks, Sandler, Subscription Publication) reported that medical-liability insurance providers are seeing declining income due to "consolidation among healthcare providers, more self-insurance, a highly competitive market and a decline in claims frequency." The piece also noted "fierce competition between companies writing MPL [medical professional liability] policies."

ACA Benefiting Homeless Population.


The [Baltimore Business Journal](#)   (9/20, Gantz, Subscription Publication) reported on how the Affordable Care Act is improving access to health services among the homeless population. The increase in Medicaid and private insurance coverage means that organizations serving the homeless have substantially fewer patients who are unable to pay, which in turn means those organizations can focus on improving their services. The article profiled the Baltimore organization Health Care for the Homeless.

Consumers May Have To Pay Back Some Insurance Subsidies.

The [Detroit Free Press](#)   (9/21, Tompor) reported that some consumers may have to pay back some of the money they received as subsidies for health insurance premiums. The payments come from differences between actual income and the amount of money people estimated they were going to make when signing up for coverage through an insurance exchange.



Public Health and Private Healthcare Systems

Medicare Advantage Plans Shift Costs To Patients, Study Finds.

The [Congressional Quarterly](#)   (9/19, Adams, Subscription Publication) reported that, according to Avalere Health, a consulting firm, analysis of files released by the Centers for Medicare and Medicaid Services, 40 percent of prescription drug plans offer options with lower premiums but are “shifting other costs to patients through higher deductibles and other out-of-pocket costs.” Dan Mendelson, CEO at Avalere Health said that 2015 is a “pivotal year for the Medicare Advantage market” as “the confluence of payment pressures and re-alignment in the provider markets is likely to have a significant impact on plan participation decisions and benefit design.”





Studies: Medicaid Coverage Renewal Can Face

Problems.



The [Congressional Quarterly](#)   (9/19, Adams, Subscription Publication) reported that, according to findings from six focused group studies presented at the Medicaid and CHIP Payment and Access Commission (MACPAC), “many people who enrolled in Medicaid this year do not realize that they need to renew their coverage.” Mike Perry, a PerryUndem Research/Communication partner said that it is a “sleeper issue” and is urging states to “step up their efforts” to help people understand the process, as people might have “outdated information” about their previous Medicaid coverage. The article reports that the lack of information and beneficiaries with limited understanding of coverage are prominent reasons causing the problem.

Also covering the research is [Modern Healthcare](#)   (9/19, Dickson, Subscription Publication).



US Representative Works To Eliminate Medicare Appeals Process.



[Modern Healthcare](#)   (9/19, Herman, Subscription Publication) reported on US Representative Kevin Brady’s (R-TX) [letter](#)   to HHS Secretary Sylvia Burwell in which he “urged” her to “explain how the government developed” the Medicare appeals “settlement process.” The request follows “surreptitious” Aug. 29 announcement from CMs that “it would pay hospitals and health systems 68% of their inpatient-status claims sitting in Medicare’s backlogged appeals process.” In a statement, Brady said, “While the backlog of Medicare appeals is at an unacceptable high, settling all appeals without reviewing the merits of the appeals or coming up with any plan to address the backlog is just throwing money at a problem to make it go away,” which “hurts the integrity of Medicare and is a waste of taxpayer dollars.”



Local Commentary Considers Medicaid Expansion.



The [Portland \(ME\) Press Herald](#)   (9/21) editorialized that Maine Governor Paul LePage’s (R) propensity to dismiss the state’s uninsured as “able-bodied adults...who don’t deserve to be part of the MaineCare system” works to “demean the people who need help.”





The paper opines that Medicaid expansion in Maine is a “no brainer” because data from the US Census shows that non-expansion has “not just financial costs but human costs as well.” The editorial board writes that “it’s time to pay attention.” The [Lewiston \(ME\) Sun Journal](#)   (9/21, Skelton) also offers commentary about Governor LePage’s handling of Medicaid.

Naomi Lopez Bauman, director of health policy at the Illinois Policy Institute, offered guest commentary in the [Times of Northwest Indiana](#)   (9/22) concerning the forthcoming revisions to the Healthy Indiana Plan 2.0 (HIP 2.0). She writes that once HIP 2.0 is revised and “obtains[s] Federal approval,” it’s “not going to be the same plan approved by Indiana lawmakers.” Bauman points to a “recent analysis by State Budget Solutions,” a nonpartisan public policy organization, that found “the plan could actually cost the state an additional \$2.9 billion” more than state lawmakers originally thought “and threaten almost 177,000 Indiana jobs.” Bauman warns that “Hoosiers should not allow lawmakers to cede their own authority” and “the public should have the opportunity to openly consider and debate the federally approved final plan. “





Dave Denslow, a local Gainesville, FL economist, wrote in an op-ed for the [Gainesville \(FL\) Sun](#)   (9/21) that if Florida were to accept Federal funds via ACA Medicaid expansion, “the added flow of federal money into the Gainesville metro area in 2016 would be around \$100 million.” Denslow notes that the chances of Gainesville seeing that money “aren’t bad” and that “polls that were done professionally, as opposed to push polls,” reveal that “over 60 percent of Florida’s registered voters favor expansion.” In addition to voters, “powerful Florida organizations favor expanding Medicaid,” including: “the Chamber of Commerce, the Associated Industries of Florida, the Hospital Association, several newspaper editorial boards and recently the Medical Association.”

Kerry Drake wrote an op-ed in the [Wyoming Tribune Eagle](#)   (9/21) concerning the Wyoming Medicaid expansion debate, calling the state’s refusal to expand “shameful.”

Annual Enrollment For Medicare Open Oct. 15.



The [Wall Street Journal](#)   (9/20, Tergesen, Subscription Publication) reported that Medicare’s election period will begin on October 15, which affords current beneficiaries an opportunity to add, drop or switch prescription drug plans and make other coverage changes.

Democratic Texas Gubernatorial Candidate Considers Unilateral Action To Expand Medicaid.



The [Austin \(TX\) Time Warner Cable News](#)   (9/22) reports that Texas Democratic gubernatorial candidate Wendy Davis “said...she’d consider executive action to expand the state’s Medicaid program under the Affordable Care Act” if elected governor. In justifying unilateral action, Davis “says expanding Medicaid would not only help insure lower-income people, but it would also bring huge economic benefits” for Texas. The [Houston Chronicle](#)   (9/22, Ward) also reports on this story.

Uninsured



Medical Students Form Nonprofit To Advocate For Alabama’s Uninsured.

[Alabama Live](#)   (9/19, Oliver) reports that Alabama medical students “influenced by the stories” of patients they met while volunteering at a free medical clinic “formed a nonprofit” and “began going to the clinics to gather the stories of the uninsured.” The stated mission of Rethink Coverage is to “give a platform, a voice, to the uninsured, especially those caught in the Medicaid gap” in Alabama.

Report: Medicaid Expansion Results In More Insured Parents

The [Lebanon \(TN\) Democrat](#)   (9/21, Michaelson) noted “there is a growing gap among the states” for the number of parents with health insurance, “with a stark difference in coverage trends between those that have expanded Medicaid and those that have not.” The article noted “a new report finds that states with expanded Medicaid coverage have seen the insured rate for parents jump by 33 percent, on average. In states with no expansion, such as Tennessee, there has been no significant change.” According to the Lebanon (TN) Democrat, “Tennessee is one of about two dozen states that have thus far declined the federal funding to expand Medicaid, although Gov. Bill Haslam has said the state may submit a proposal this fall.”

Uninsured Rate In New York State Below National Average.

The [Buffalo \(NY\) News](#)   (9/22, Watson) reports the percentage of people without insurance coverage in Erie County, New York was at 6 percent, “one of the lowest in New York State” according to a recently released Census Bureau’s 2013 American Community Survey. Additionally, “Across New York [State], nearly 11 percent do not have health insurance, well below the national rate.”

Friday's Lead Stories

- [Tavenner: 7.3 Million Out Of Eight Million Still Enrolled In ACA Coverage.](#)
- [Covered California Remains On “Sidelines” Of Proposition 45 Debate.](#)
- [Tavenner: CMS Plans HealthCare.gov Testing.](#)
- [GOP Criticizes Lack Of SHOP Data.](#)
- [Study: Oregon’s Rate Of Uninsured Drops By 63%.](#)

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