



# NEWS & NOTES

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## ACA Today

### WORKERS PAYING MORE FOR HEALTH INSURANCE, BUT GETTING FEWER BENEFITS

Although the ACA has not led to soaring insurance costs, as many critics claimed it would, the law hasn't provided much relief to American workers either, according to a new study of employer-provided health benefits. Workers continue to be squeezed by rising insurance costs, eroding benefits and stagnant wages, the report from the nonprofit Commonwealth Fund found. ([Los Angeles Times](#))

### OUT-OF-POCKET HEALTH CARE COSTS SOAR

Health care costs keep climbing, and so does our share of them. Adults with insurance through work paid almost 7 percent more out-of-pocket in 2013 than in 2012, according to a new study from the Health Care Cost Institute, a nonprofit funded partly by insurance companies. ([Marketplace](#))

### FUNDING WOES IMPERIL FUTURE OF STATE-RUN EXCHANGES

Starting this year, state-run insurance exchanges are legally required by the healthcare reform law to be financially self-sustaining.\* But that mandate is being ignored across the country, and there do not appear to be any immediate consequences for the states. Many of the 16 states and the District of Columbia that run their own marketplaces will continue to rely on leftover federal funds to pay for operations this year. ([Modern Healthcare](#))

### ACA HEALTH PLANS IMPOSING HIGH COST SHARING ON DRUGS

A growing number of Obamacare plans are imposing the highest cost sharing on patients for entire classes of drugs, even including some generics, according to a new Avalere study. Researchers looked at 20 classes of drugs and found that some plans placed all of the drugs in five classes on the costliest "specialty tier" of their formulary.

### HOUSE APPROVES BILL TO CHANGE ACA FULL-TIME EMPLOYEE DEFINITION

The House voted 252-172 to approve legislation (HR 30) that would change the definition of full-time employees under the ACA's employer mandate from those who work 30 hours per week to 40 hours per week. ([California Healthline](#))

### LAWMAKERS TARGET OBAMACARE DEVICE TAX

The measure from Sens. Orrin Hatch (R-Utah) and Amy Klobuchar (D-Minn.) would repeal the healthcare law's 2.3 percent excise tax on medical products and equipment. With support from members of both parties as well as industry, the bill is one change to the health care law that seems likely to pass Congress this year. ([The Hill](#))

\* Self-sustaining in this context means that beginning in 2015, ACA states public health exchanges no longer have access to federal funds for support of operational expenses. This has no effect on available consumer tax credits.

**LAVISH ‘CADILLAC’ HEALTH PLANS DYING  
OUT AS OBAMACARE TAX LOOMS**

Large employers are increasingly putting an end to their most generous health-care coverage as a tax on “Cadillac” insurance plans looms closer under Obamacare. Employees including bankers at JPMorgan Chase & Co. and college professors at Harvard University are seeing a range of moves to shift more costs to workers. Companies are introducing higher deductibles and co-payments, rising premiums and the imposition of wellness programs that carry penalties for people who don’t comply. ([Bloomberg](#))

**OBAMACARE CO-OPS ARE  
UNDERWATER AND SINKING FAST**

S&P writes: “All but one of the [23] co-ops included in our study reported negative net income through the first three quarters of 2014. Most co-ops’ weak operating performance is a result of high medical claims trend and not enough scale to offset administrative costs. In fact, nine of the co-ops (including CoOpportunity Health) reported a MLR [i.e., medical loss ratio; the claims compared to premiums] of 100% or more through September 2014.” ([Forbes](#))

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