

Insurers continue to hike prices, abandon ACA markets

May 25 2017, by Tom Murphy

People shopping for insurance through the Affordable Care Act in yet more regions could be facing higher prices and fewer choices next year as insurance companies lay out their early plans for 2018.

Blue Cross and Blue Shield of North Carolina is asking regulators for a 23 percent price hike next year because it doesn't expect crucial payments from the federal government to continue. That announcement comes a day after Blue Cross and Blue Shield of Kansas City said it will leave the individual market next year, a decision that affects about 67,000 people in a 32-county area in Kansas and Missouri.

The Kansas City company's decision also will leave shoppers in 25 counties with no options for this kind of coverage next year unless another insurer steps in, according to data compiled by The Associated Press and the consulting firm Avalere.

Other insurers around the country, such as Aetna and Humana, have already said they will not offer this coverage next year, though some, including Centene, say they will.

Blue Cross and Blue Shield of North Carolina said Thursday that it expects no help from federal cost-sharing reduction payments next year. With that help, it said prices would rise about 9 percent instead of 23 percent on average for this kind of coverage. The plan covers about 500,000 people who buy insurance through the Affordable Care Act and it is the lone option in nearly all of the state's counties.

It said about two thirds of its customers get cost-sharing help.

The government has been giving insurers money to help customers with modest incomes cover out-of-pocket expenses like co-payments and deductibles. But the future of those payments, which are separate from the income-based tax credits that help customers buy coverage on the exchanges, is in political limbo.

Republicans had sued the Obama Administration to stop the subsidies, and that case is now tied up in court. President Donald Trump's administration has sent mixed signals over how it will pursue the case or whether the payments will continue. Insurers want to know that the payments, which total about \$7 billion, will continue through 2018 so they can decide whether to offer [coverage](#) and what to charge for it.

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Citation: Insurers continue to hike prices, abandon ACA markets (2017, May 25) retrieved 27 April 2024 from <https://medicalxpress.com/news/2017-05-hike-prices-abandon-aca.html>

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