

Employers preparing for health care reform impacts

By Dave Hodges | Democrat Business Editor | @TallyBiz on Twitter Filed Under Business

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Business owners bracing for more work in response to health care reform have a checklist that will grow in 2014 as more provisions of the Affordable Care Act take effect.

Preparing for the changes was the subject of the Tuesday morning meeting of the Health Sciences & Human Performance Enhancement (Health Care) Roundtable of the Economic Development Council of Tallahassee-Leon County. The meeting was hosted by Tallahassee Memorial HealthCare.

“I just tell people ‘Put on your hard hat and get ready’ – 2014 is going to be here before you know it,” said Joyce Chastain, human resources executive and principal at Chastain Consulting in Tallahassee.

Chastain is also the incoming chair of the HR Florida State Council, the Florida affiliate of the Society for Human Resource Management. The council represents 14,000 of Florida’s employers.

“I can tell you with absolute certainty that most of them are panicked about what this is going to mean for them going forward,” she told the audience of business representatives and medical professionals.

Among the changes this year is the requirement under the ACA that employers show the value of a worker’s health benefits on the person’s Form W-2 wage statement for 2012. Employers must also create a policy that permits nursing mothers unpaid break time to express milk, and a private area other than a bathroom for them to use.

In 2013, the law imposes a \$2,500 annual cap on flexible spending accounts, which Chastain said many workers use to pay for medical services that their insurance plans don’t cover. Employers must also begin educating their personnel about the ACA and its provisions, but she urged employers to consult their plan providers for resource materials to use for this.

The to-do list gets longer in 2014 “That’s the big year, folks,” Chastain said. “If nothing changes, it’s going to be a huge burden on employers to manage what’s happening in their benefit provisions with their employees.”

That’s the year employers must begin annual reporting of health insurance and employee information to the federal government, provide workers an annual summary of benefits and coverage, and furnish “affordable minimum essential health insurance coverage” or pay a tax penalty.

Organizations with more than 200 employees will have to institute automatic enrollment for their full-time personnel.

Marshall Kapp, director of the Center for Innovative Collaboration in Medicine and Law at the FSU Department of Geriatrics, briefed the audience on the law’s status and legal challenges. He said there are 35 challenges still pending to the law’s provisions, based on religious or moral grounds.

While candidates for Congressional seats and presidential contender Mitt Romney say they will repeal the Affordable Care Act if elected, Kapp said it’s much more likely that parts of the law will be amended in the next few years. How quickly it is implemented will also depend upon the Congressional authorization and appropriations bills.

“The Affordable Care Act authorizes various federal agencies to write literally hundreds of sets of regulations. A few of those have been written,” he noted, but many agencies are running behind in the schedule to produce those rules.

Mark O’Bryant, CEO of TMH, also thinks the landmark legislation passed in 2010 will evolve. “The Washington logic was let’s get something passed when we can, then we’ll work to modify it as time goes on. That was the logic,” he said. “Of course, this has become one of the most widely politicized bills out there.”

“It’s really health care finance reform because the idea was to create not a single-payer health system, but really more of a universal coverage environment.” O’Bryant said the goal was to get more people covered, enabling insurers and health care providers to spread costs over a larger group of participants instead of just those who have insurance.