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Welcome to the HSA Update, keeping you up-to-date on the Health Savings Account marketplace with bi-weekly analysis and review of public policy, market innovations, and technology advances in the HSA arena.

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■ **Republican's Declaration of Health Care Independence**

At the end of January, Republican Congressman Steve King (Iowa 5<sup>th</sup>), along with other House Republicans, unveiled the Declaration of Health Care Independence. According to Representative King's press release, this Declaration is "a commitment to protect the rights of the American people to make their own health decisions, reduce bureaucratic red-tape, decrease intergenerational debt and includes ten common-sense principles that must be included in future health care reforms."

The Declaration states:

In order to retain the Blessings of Liberty as secured to us by our Founding Fathers and as expressed in our Constitution, We the People reject the imposition upon us of a new, Washington-controlled system of government-run health care. We demand Constitutional protection of the right to make our own health decisions and our own health care choices free of government denials, bureaucratic red-tape, and greater intergenerational debt.

A Washington takeover of American health care will

- 1) Deny fundamental personal and economic liberties and indisputably violate the Principle of Limited Government as established by the Constitution;
- 2) Impose increased costs and taxes upon individuals, families, and businesses, as well as taxpayers at the federal, state, and local levels;
- 3) Irreparably cripple the American economy, at the cost of jobs, businesses, productivity, and quality of life;
- 4) Create an inescapable new tax by imposing individual and employer mandates;
- 5) Institutionalize a massive, ever-expanding federal bureaucracy that is impersonal and impractical;
- 6) Empower bureaucrats to interfere in the doctor-patient relationship, undermine the quality of care, limit choice, and increase the cost of health care.

We have appealed to the decency of the elected majority to respect the rights of all Americans, but their leaders have been deaf to the Voice of the People. We are appalled by their cavalier disregard of the Constitution and of the demands of the People. We are repulsed by their blatant political bribes and kickbacks.

We, therefore, the People and Representatives of the UNITED STATES OF AMERICA, do solemnly Publish and Declare that health care reform, as a matter of principle must

- 1) Protect as inviolate the vital doctor-patient relationship;
- 2) Reject any addition to the crushing national debt heaped upon all Americans;
- 3) Improve, rather than diminish, the quality of care that Americans enjoy;
- 4) Be negotiated publically, transparently, with genuine accountability and oversight, and be free from political favoritism;
- 5) Treat private citizens at least as well as political officials;
- 6) Protect taxpayers from funding of abortion and abortion coverage;
- 7) Reject all new mandates on patients, employers, individuals, or states;
- 8) Prohibit expansion of taxpayer funded health care to those unlawfully present in the United States;
- 9) Guarantee Equal Protection under the law and the Constitution;
- 10) Empower, rather than limit, an open and accessible marketplace of health care choice and opportunity. [Learn more.](#)

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### ■ States Seek Amendments to Ban Federal Health Care Mandates

Even after the election results in Massachusetts, Democratic leaders are promising to pass health care reform. In response, many states are continuing to push for constitutional amendments to ban health insurance mandates. In most states, the amendment will be included on the November ballot.

These state-based amendments are modeled on American Legislative Exchange Council's (ALEC) *Freedom of Choice in Health Care Act*, which, according to ALEC, "protects the right of patients to pay directly for medical services, and it prohibits penalties levied on patients for declining participation in a particular health plan."

Lawmakers in at least 35 states have filed or prefiled amendments to their state constitutions or statutes, or have at least publically announced their intentions to do so. Those states include: Alabama, Alaska, Arizona, Arkansas, Florida, Georgia, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Virginia, Washington, West Virginia, and Wyoming.

Despite these efforts, and even if the amendments pass, most constitutional law experts agree that if the Federal government were to pass a mandate requiring insurance coverage, the supremacy clause of the U.S. Constitution states that the federal law prevails. [Learn more.](#)

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## ■ Aon Employer Survey Results

Aon Consulting Services recently released the results of its *2009 Benefits and Talent Survey*, which asked companies about the various benefits and strategies they use to attract and maintain talent and prepare for economic recovery. The survey was conducted in March 2009 and included 1,300 employers.

According to the survey, the top health and benefit findings are:

- There are modest declines in medical trend, but cost increases still exceed the general rate of inflation.
- Employers are taking a two-pronged approach to reduce health care spend: looking for ways to cut costs in the near-term, while analyzing the root cause of health care spend (such as chronic illness, obesity, etc.) to reduce costs long-term.
- Voluntary benefits are considered an important cost-reduction tool.
- Employers remain interested in consumer-driven health plans.

In regards to HSAs the survey found:

- 44% of employers offered CDHPs in 2009, a significant gain over the last three years in which only 28% of employers offered CDHPs.
- In 2009, 56% of employers that offer CDHPs paired them with HSAs. This is an increase over the last three years, in which less than half of employers paired CDHPs with HSAs.

While the popularity of HSAs has increased, the use of Health Reimbursement Accounts (HRAs) has decreased from 44% three years ago to only 35% in 2009. HRAs differ from HSAs in that employees have control over the funds in their HSAs, but not HRAs.

The survey also compared the “2009 Monthly Medical Costs for Employer’s Most Prevalent PPO, HMO, HSA, and HRA Plans.” Not surprisingly, the survey found that CDHPs paired with HSAs are consistently the least expensive option for employees and employers. [Learn more.](#)

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