

National Journal

We Know Ebola Can Be Beaten, But We Don't Know How - Health Care Edge

Health Care Edge - August 22, 2014

By Sam Baker
August 22, 2014

EBOLA PATIENTS RELEASED: The two American aid workers who contracted Ebola in West Africa have both been released from Emory University hospital, after testing negative for the virus and showing no physical symptoms. Officials at Emory made a point yesterday of hugging and high-fiving Kent Brantly as he was released, to make the point that he's no longer contagious. "The medical staff here at Emory is confident that the discharge ... poses no public health threat," said Bruce Ribner, the director of the infectious diseases unit at Emory.

Top Health Care News

NO ONE KNOWS WHAT WORKED: Brantly and the other aid worker, Nancy Writebol, both received doses of the experimental drug ZMapp. And they both beat Ebola. But that doesn't necessarily mean ZMapp works. It's one of the difficulties of experimental drugs -- ZMapp was tried in conjunction with a host of other treatments, and this was the first time Ebola has been treated in the U.S.' sophisticated medical system. ZMapp might have made the difference, or it might have been supporting treatments like fluids and electrolyte replacement. (Sam Baker, National Journal)

ER VISITS DOWN: The rate of growth in emergency-room visits has slowed in Los Angeles since the health care law's coverage expansion kicked in. That would indicate Obamacare is succeeding at one of its biggest goals -- bringing people into the system so they'll be more likely to use primary care and less likely to go to the emergency room for everything. (Soumya Karlamangla and Doug Smith, Los Angeles Times)

PREMIUM CHECKUP: The average premium increase for Obamacare plans is lower than the average pre-Obamacare increase, although averages can disguise huge swings among states, or even within one state. (Jeffrey Young, Huffington Post)

THE THREE Rs: Part of the reason premiums are rising is that government payments under the law's "three Rs" are set to scale down next year. Experts had baked that factor in when they predicted rate hikes in the high single digits -- about where rates have ended up on average. (Philip Klein, Washington Examiner)

EMPLOYER-BASED COVERAGE MAY GROW: The number of people who get health insurance through their employers could rise as people take heed of the Affordable Care Act's individual mandate. (Margot Sanger-Katz, The New York Times)

Halbig

THE WAR CONTINUES: Linda Greenhouse, a former Supreme Court correspondent for The New York Times, says the *Halbig* challenge to Obamacare's insurance subsidies is simply the next phase in conservatives' long any-means-necessary war against the health care law, and that the D.C. Circuit was wrong when it ruled that the law restricted subsidies to state-based insurance exchanges. (Linda Greenhouse, The New York Times)

CHALLENGERS RESPOND: Michael Cannon, the Cato institute health policy analyst who helped devise the current strategy, says the law is perfectly and explicitly clear, disputing Greenhouse's argument that the language on subsidies is vague and therefore open to interpretation by the agency implementing it. (Michael Cannon, Cato Institute)

Medicare

RUC-US: The American Medical Association pushed back aggressively yesterday against a report in Politico Magazine criticizing an AMA panel known as the RUC. The panel does not control Medicare rates and has not prodded the government to shift payments away from primary care, the AMA said. (American Medical Association)

Technology

GOOGLE GLASS: One of the developers of Google Glass, the wearable camera/computer attached to a pair of eyeglasses, thinks medicine may be one of the technology's most promising applications. Surgeons, for example, could use them to document procedures. (Mark Sullivan, VentureBeat)