

Lower health care costs not reaching rural areas

By Reed Abelson, Katie Thomas and Jo Craven McGinty, *New York Times*

As technical failures bedevil the rollout of President Obama's health care law, evidence is emerging that one of the program's loftiest goals – to encourage competition among insurers in an effort to keep costs low – is falling short for many rural Americans.

While competition is intense in many populous regions, rural areas and small towns have far fewer carriers offering plans in the law's online exchanges. Those places, many of them poor, are being asked to choose from some of the highest-priced plans in the 34 states where the federal government is running the health insurance marketplaces, a review by the *New York Times* has found.

Of the roughly 2,500 counties served by the federal exchanges, more than half, or 58 percent, have plans offered by just one or two insurance carriers, according to an analysis by the *Times* of county-level data provided by the Department of Health and Human Services. In about 530 counties, only a single insurer is participating.

The analysis suggests that the ambitions of the Affordable Care Act to increase competition have unfolded unevenly, at least in the early going, and have not addressed many of the factors that contribute to high prices. Insurance companies are reluctant to enter challenging new markets, experts say, because medical costs are high, dominant insurers are difficult to unseat, and powerful hospital systems resist efforts to lower rates.

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