

From: Office of Communications <communications@scdhhs.gov>
To:
Date: 3/28/2014 10:04:07 AM
Subject: today's stories

- 1) **S.C. health care industry works toward elusive goal of price transparency**
<http://www.postandcourier.com/article/20140327/PC16/140329426/1177/sc-health-care-industry-works-toward-elusive-goal-of-price-transparency>
- 2) **Florence County latest to have on-site health care**
http://www.snow.com/news/politics/article_358397b8-b54d-11e3-aca9-0017a43b2370.html
- 3) **S.C. Doctors fear new ICD-10 system will diminish their ability to administer care**
<http://www.goupstate.com/article/20140326/ARTICLES/403261002/1101?Title=Doctors-fear-new-ICD-10-system-will-diminish-their-ability-to-administer-care>
- 4) **“At *The Atlantic*’s Health Care Forum in Washington on Thursday, health care and business professionals said that there’s an increasing trend in the industry toward cutting insurance companies out of the process entirely, as large, regional hospital systems move into the insurance business.”**
<http://www.thefiscaltimes.com/Articles/2014/03/27/Hospitals-Plot-End-Insurance-Companies>
- 5) **“The disparities reveal a stark truth about the Affordable Care Act: With the first open enrollment period set to end Monday, six months after its troubled online exchanges opened for business, the program widely known as Obamacare looks less like a sweeping federal overhaul than a collection of individual ventures playing out unevenly, state to state, in the laboratories of democracy.”**
<http://www.nytimes.com/2014/03/28/us/politics/deadline-near-health-signups-show-disparity.html?hp>
- 6) **“This concept of ‘health care exceptionalism’ — that the health care sector doesn’t operate according to standard market forces — has shaped much of the debate among policymakers about how to reform it. But how exceptional is it, really? Amitabh Chandra of Harvard University, Amy Finkelstein and Adam Sacarny of MIT and I set out to answer this question in a recent [study](#). When we looked at the data, we discovered that the health care market might not be as exceptional as we think.”**
<http://fivethirtyeight.com/features/standard-market-forces-appear-to-apply-to-hospitals-too/>
- 7) **Alabamans Struggle Most to Afford Healthcare and Medicine**
<http://www.gallup.com/poll/167777/alabamans-struggle-afford-healthcare-medicine.aspx>
- 8) **White House Says Health Care Rolls Top Goal: 6 Million**
<http://www.nytimes.com/2014/03/28/us/politics/white-house-says-6-million-have-enrolled-for-health-insurance.html?ref=healthcarereform>
- 9) **States Work To Clarify Enrollment Rules, Untangle Technical Problems As Open Enrollment Period Moves Toward Its Close**
<http://www.kaiserhealthnews.org/Daily-Reports/2014/March/28/state-action-on-outreach-and-enrollment.aspx>
- 10) **Hospitals chart ways to boost care, funding under ACA**
<http://www.usatoday.com/story/news/nation/2014/03/27/hospitals-improve-care-funding-creatively/5899835/>
- 11) **Colorado Health Exchange’s Marketing Budget Draws Enrollees, Critics**
<http://www.kaiserhealthnews.org/Stories/2014/March/27/Colorado-Exchange.aspx>
- 12) **Crowdsourcing medical decisions: Ethicists worry Josh Hardy case may set bad precedent**
http://www.washingtonpost.com/national/health-science/crowdsourcing-medical-decisions-ethicists-worry-josh-hardy-case-may-set-bad-precedent/2014/03/23/f8591446-ab81-11e3-adbc-888c8010c799_story.html
- 13) **Nitroglycerin, a Staple of Emergency Rooms, Is in Short Supply**
<http://www.nytimes.com/2014/03/26/business/nitroglycerin-a-staple-of-emergency-rooms-is-in-short-supply.html>
- 14) **The Next Big Thing You Missed: The World’s Best Weight-Loss Technology Is Shame**
<http://www.wired.com/business/2014/03/fitness-apps-now-include-human-help/>
- 15) **Op-Ed: It’s No Substitute for the Sun**
http://www.nytimes.com/2014/03/28/opinion/its-no-substitute-for-the-sun.html?_r=0

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