

SCOTUS Finds Obamacare Insurance Subsidies Legal

On June 25, 2015, the *Supreme Court of the United States* (SCOTUS) announced its decision to uphold the legality of health insurance subsidies for individuals participating in federally-run insurance exchanges.¹ In a 6 to 3 landmark decision, with the majority opinion written by Chief Justice Roberts, the Court upheld the federal government’s interpretation of the *Patient Protection and Affordable Care Act* (ACA), also known as *Obamacare*, allowing the *Internal Revenue Service* (IRS) to issue tax credits, or subsidies, to participants who purchase insurance on federally-funded and run exchanges.²

The case, *David King, et al. v. Sylvia Burwell, Secretary of Health and Human Services, et al.*, originated when four private citizens who expected to be subject to tax penalties under the ACA’s *Individual Mandate* (i.e., the plaintiffs) argued that the IRS’s *Health Insurance Premium Tax Credit* rule, which gives the IRS the authority to grant subsidies to participants of health insurance exchanges, only applied to state-run exchanges.³ The plaintiffs’ argument is derived from a portion of the ACA that explains how the *U.S. Department of Treasury* will calculate the subsidies for individuals, which includes the statement “*established by the State under [section] 1311*,” which the plaintiffs have interpreted to mean that Congress intended tax subsidies to be used *exclusively* for state-run exchanges.⁴ The case was dismissed by the Eastern District Court of Virginia on February 18, 2014, as a result of the court’s application of the *Chevron* doctrine that allowed the court to defer to the interpretation in place (i.e., allowing federal exchange participants to receive subsidies),⁵ a decision that was affirmed by the Fourth Circuit on appeal on July 22, 2014.⁶ The plaintiffs subsequently filed a writ of certiorari with the SCOTUS, which was granted on November 7, 2014.⁷

During oral arguments on March 4, 2015, some of the justices expressed concern for the effects of a finding that subsidies for federally-run exchanges are illegal, a concern that may have affected their voting decisions. Justice Sonia Sotomayor discussed the “*death spiral*” that would occur if federal exchange participants did not receive subsidies, pointing to the loss of healthy participants and the addition of older and/or non-healthy participants that would follow, causing insurance premiums to dramatically escalate.⁸ Perhaps even more noteworthy, Justice Anthony Kennedy, who typically

favors states’ rights, expressed similar concerns for the effect that such a decision would have on the 34 states that use federally-run exchanges.⁹ Emphasizing and expounding upon the opinion of Justice Sotomayor, Justice Kennedy noted that a decision against the government had the potential to violate the states’ constitutional rights because it would force states to “*choose between the death spiral [or] creating an exchange.*”¹⁰

In the majority opinion, Chief Justice Roberts concurred with this sentiment, stating, “*Congress passed the Affordable Care Act to improve health insurance markets, not to destroy them. If at all possible, we must interpret the Act in a way that is consistent with the former, and avoids the latter. Section 36B can fairly be read consistent with what we see as Congress’s plan, and that is the reading we adopt.*”¹¹

This decision again affirms the legality and constitutionality of the ACA pending before the SCOTUS. The next possible, and potentially final, challenges to the ACA may arise in the 2016 Congressional Budget and the 2016 presidential race. However, the *Congressional Budget Office’s* June 19, 2015 report entitled, “*Budgetary and Economic Effects of Repealing the Affordable Care Act*,” which determined the anticipated financial impact, from 2016 to 2025, that would occur if the ACA was repealed, estimated that the federal deficit would increase by \$137 billion, including the effects of macroeconomic feedback such as an increased labor supply.¹² This deficit, which was unexpectedly higher than previous reports,¹³ may impact future political and legislative opinions that challenge the provisions of the ACA. As of now, the *King v. Burwell* case is the last legal challenge to the constitutionality of the ACA pending before the SCOTUS, so remaining challenges, if any, will likely arise from the legislature.

1 “King et al. v. Burwell, Secretary of Health and Human Services, et al” No. 14-114 (U.S. June 25, 2015), Slip Opinion, p. 4, 21.
 2 “King et al. v. Burwell, Secretary of Health and Human Services, et al” No. 14-114 (U.S. June 25, 2015), Slip Opinion, p. 4, 21.
 3 “King v. Sebelius” 997 F. Supp. 2d 415, 418, 423 (E.D. Va., 2014).
 4 Ibid.
 5 Ibid.

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- 6 “King et al. v. Burwell, Secretary of Health and Human Services, et al.” 759 F.3d 358, 376 (4th Cir., 2014).
- 7 “King et al. v. Burwell, Secretary of Health and Human Services, et al” 135 S. Ct. 475 (U.S., 2014).
- 8 “King, et al. v. Burwell, Secretary of Health and Human Services, et al.” No. 14-114 (U.S., March 4, 2015), Oral Argument Transcript, p. 15.
- 9 Ibid, p. 16.
- 10 Ibid.
- 11 “King et al. v. Burwell, Secretary of Health and Human Services, et al” No. 14-114 (U.S. June 25, 2015), Slip Opinion, p. 21.

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- 12 “Budgetary and Economic Effects of Repealing the Affordable Care Act” Congressional Budget Office and Joint Committee on Taxation, June 19, 2015, http://www.cbo.gov/sites/default/files/114th-congress-2015-2016/reports/50252-Effects_of_ACA_Repeal.pdf (Accessed 6/19/15) p. 1.
- 13 “CBO Puts \$353 Billion Price Tag on Obamacare Repeal” By Brian Faler, June 19, 2015, http://www.politico.com/story/2015/06/obamacare-repeal-congressional-budget-office-deficit-119228.html?hp=t1_r (Accessed 6/19/15).



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Robert James Cimasi, MHA, ASA, FRICS, MCBA, CVA, CM&AA, serves as Chief Executive Officer of **HEALTH CAPITAL CONSULTANTS (HCC)**, a nationally recognized healthcare financial and economic consulting firm headquartered in St. Louis, MO, serving clients in 49 states since 1993. Mr. Cimasi has over thirty years of experience in serving clients, with a professional focus on the financial and economic aspects of healthcare service sector entities including: valuation consulting and capital formation services; healthcare industry transactions including joint ventures, mergers, acquisitions, and divestitures; litigation support & expert testimony; and, certificate-of-need and other regulatory and policy planning consulting.

Mr. Cimasi holds a Masters in Health Administration from the University of Maryland, as well as several professional designations: Accredited Senior Appraiser (ASA – American Society of Appraisers); Fellow Royal Institution of Chartered Surveyors (FRICS – Royal Institute of Chartered Surveyors); Master Certified Business Appraiser (MCBA – Institute of Business Appraisers); Accredited Valuation Analyst (AVA – National Association of Certified Valuators and Analysts); and, Certified Merger & Acquisition Advisor (CM&AA – Alliance of Merger & Acquisition Advisors). He has served as an expert witness on cases in numerous courts, and has provided testimony before federal and state legislative committees. He is a nationally known speaker on healthcare industry topics, the author of several books, the latest of which include: "[Accountable Care Organizations: Value Metrics and Capital Formation](#)" [2013 - Taylor & Francis, a division of CRC Press], "[The Adviser's Guide to Healthcare](#)" – Vols. I, II & III [2010 – AICPA], and "[The U.S. Healthcare Certificate of Need Sourcebook](#)" [2005 - Beard Books]. His most recent book, entitled "[Healthcare Valuation: The Financial Appraisal of Enterprises, Assets, and Services](#)" was published by John Wiley & Sons in 2014.

Mr. Cimasi is the author of numerous additional chapters in anthologies; books, and legal treatises; published articles in peer reviewed and industry trade journals; research papers and case studies; and, is often quoted by healthcare industry press. In 2006, Mr. Cimasi was honored with the prestigious "[Shannon Pratt Award in Business Valuation](#)" conferred by the Institute of Business Appraisers. Mr. Cimasi serves on the Editorial Board of the Business Appraisals Practice of the Institute of Business Appraisers, of which he is a member of the College of Fellows. In 2011, he was named a Fellow of the Royal Institution of Chartered Surveyors (RICS).



Todd A. Zigrang, MBA, MHA, ASA, FACHE, is the President of **HEALTH CAPITAL CONSULTANTS (HCC)**, where he focuses on the areas of valuation and financial analysis for hospitals, physician practices, and other healthcare enterprises. Mr. Zigrang has over 20 years of experience providing valuation, financial, transaction and strategic advisory services nationwide in over 1,000 transactions and joint ventures. Mr. Zigrang is also considered an expert in the field of healthcare compensation for physicians, executives and other professionals.

Mr. Zigrang is the author of the soon-to-be released "[Adviser's Guide to Healthcare – 2nd Edition](#)" (AICPA, 2014), numerous chapters in legal treatises and anthologies, and peer-reviewed and industry articles such as: [The Accountant's Business Manual](#) (AICPA); [Valuing Professional Practices and Licenses](#) (Aspen Publishers); [Valuation Strategies; Business Appraisal Practice](#); and, [NACVA QuickRead](#). Additionally, Mr. Zigrang has served as faculty before professional and trade associations such as the American Society of Appraisers (ASA); the National Association of Certified Valuators and Analysts (NACVA); the Physician Hospitals of America (PHA); the Institute of Business Appraisers (IBA); the Healthcare Financial Management Association (HFMA); and, the CPA Leadership Institute.

Mr. Zigrang holds a Master of Science in Health Administration (MHA) and a Master of Business Administration (MBA) from the University of Missouri at Columbia. He is a Fellow of the American College of Healthcare Executives (FACHE) and holds the Accredited Senior Appraiser (ASA) designation from the American Society of Appraisers, where he has served as President of the St. Louis Chapter, and is current Chair of the ASA Healthcare Special Interest Group (HSIG).



John R. Chwarzinski, MSF, MAE, is Senior Vice President of **HEALTH CAPITAL CONSULTANTS (HCC)**. Mr. Chwarzinski holds a Master's Degree in Economics from the University of Missouri – St. Louis, as well as, a Master's Degree in Finance from the John M. Olin School of Business at Washington University in St. Louis. Mr. Chwarzinski's areas of expertise include advanced statistical analysis, econometric modeling, and economic and financial analysis.



Jessica L. Bailey, Esq., is the Director of Research of **HEALTH CAPITAL CONSULTANTS (HCC)**, where she conducts project management and consulting services related to the impact of both federal and state regulations on healthcare exempt organization transactions and provides research services necessary to support certified opinions of value related to the Fair Market Value and Commercial Reasonableness of transactions related to healthcare enterprises, assets, and services. Ms. Bailey is a member of the Missouri and Illinois Bars and holds a J.D., with a concentration in Health Law, from Saint Louis University School of Law, where she served as Fall Managing Editor for the Journal of Health Law and Policy.



Richard W. Hill, III, Esq. is Senior Counsel of **HEALTH CAPITAL CONSULTANTS (HCC)**, where he manages research services necessary to support certified opinions of value related to the Fair Market Value and Commercial Reasonableness of transactions related to healthcare enterprises, assets, and services, and conducts analyses of contractual relationships for subject enterprises. Mr. Hill is a member of the Missouri Bar and holds a J.D., with a concentration in Health Law, from Saint Louis University School of Law.