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DATA DIVE | Tue Oct 11, 2016 | 12:43pm EDT

For most Americans, healthcare costs aren't skyrocketing

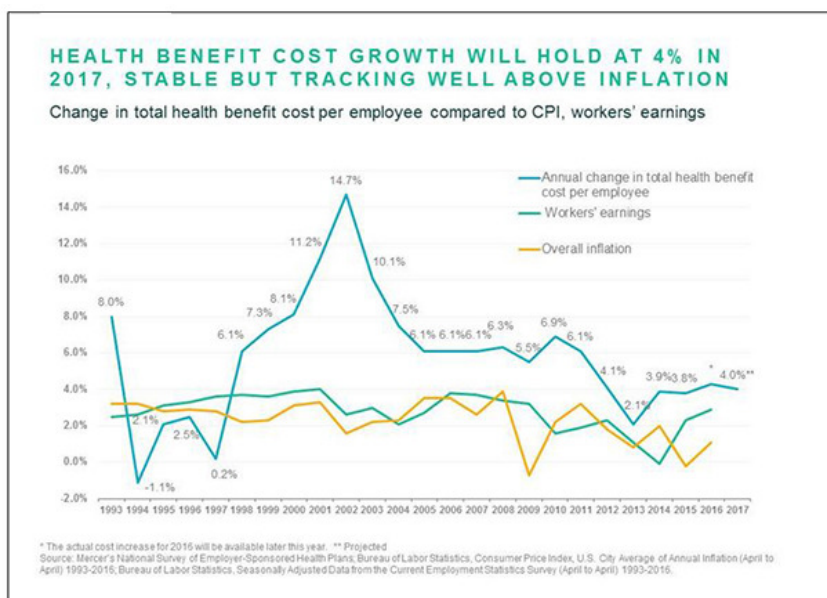
By **Beth Pinsker****MORNING BRIEFING:** The child spies of Islamic State [VIEW MORE](#)

The rising cost of healthcare was a brief topic of conversation at Sunday night's presidential debate, with Donald Trump bemoaning the high cost of premiums under Obamacare and Hillary Clinton talking about how to fix what we already have.

But as Clinton pointed out, the vast majority of Americans get their health insurance through their workplace. So they have little to do with the plans on the state exchanges that were created through the Affordable Care Act. But those Americans still have huge concerns about rising costs.

Most of this country's 170 million workers will see cost increases when they get their 2017 open enrollment packets this fall. But this year's costs increases are lower than in previous years, industry analysts say. And employees are bearing less of the burden of those increases, although they are still running ahead of inflation.

Benefits consultant Mercer found that cost growth is stable at 4 percent for 2017, while inflation is running under 2 percent. The National Business Group on Health, a non-profit trade group, pegged that number at 5 percent.



These numbers are the cost increases after you account for measures that employers take to cut costs. Otherwise, the costs increases would be even higher. Tops on the lists of strategies: raising deductibles or switching carriers, which usually means smaller networks and reduced benefits like out-of-network coverage.

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Less of those costs will be passed along to the consumer this year. That means the bottom line – your monthly premium, the annual deductible and coverage for specialty concerns – will be roughly in line with what you paid last year. NGBH said the median deductible for in-network services for all plan types is \$1,425 for an individual, and \$2,900 for a family.

Mercer attributes the hold on cost-shifting to employees to a delay in the implementation of the excise tax provision of the Affordable Care Act from 2018 to 2020. That tax will eventually apply to benefit plans exceeding certain parameters. Employers have been cutting benefits over the past few years in anticipation.

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