States are doing better than the federal government at enrolling people in high-risk insurance pools, according to a recent Government Accountability Office (GAO) report.

As of April 30, the 27 states that operate their own high-risk pools had enrolled 15,781 individuals with pre-existing conditions that were previously unable to secure affordable health care coverage. Meanwhile, the federally-operated pool for the 23 other states and the District of Columbia had enrolled only 5,673 individuals.

This is strong evidence that crucial aspects of the Affordable Care Act are best managed at the state level. And it should help answer the question as to whether states should choose to oversee the establishment of new, competitive health insurance marketplaces that the Affordable Care Act calls for by 2014.

The law allows these health insurance marketplaces, or exchanges, to be established and administered by individual states or, failing that, they will be established and administered federally.

At the Center for Rural Affairs, since early in the debate over the Affordable Care Act we have maintained that individual states should take the bull by the horns where they can - e.g. high risk insurance pools and health insurance marketplaces - and control their own health care destiny.

Moreover, the best ways to address the health care challenges that rural communities face will vary widely from state to state. A federal health insurance marketplace will never address those unique rural challenges as well as a marketplace administered by the state.

John Crabtree

The Center for Rural Affairs