

Another Voice: Protect against surprise medical bills, but preserve access, too

By Another Voice

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By Art Fougner

New York physicians support the spirit of the legislation being considered by Congress to prevent “surprise” medical bills for emergency room care.

But unless the right approach is taken to address this problem, patients could suffer the consequences.

The right approach has been advanced by Buffalo Rep. Brian Higgins and Rochester Rep. Joe Morelle, who have been actively supporting bipartisan legislation (HR 3502) in conjunction with Reps. Raul Ruiz, D-Calif., and Phil Roe, R-Tenn., – both doctors. The approach is similar to a widely acclaimed state law adopted in 2014 that protects patients from surprise bills when a non-participating physician provides treatment. This law has proven to be fair for doctors, health insurers and patients.

However, other proposals would undermine the tenuous balance New York’s law created and could create access problems in our already stressed hospital emergency departments. New York’s law addressed only the 40% or so of insured New Yorkers whose health policies are regulated by the State. They do not address the millions of New Yorkers whose coverage is regulated by the federal government.

As a result, lawmakers in Washington, D.C., have rightly decided to tackle this problem. But instead of following New York’s careful approach, the proposals being considered would hand enormous new powers to insurance companies. These proposals would force doctors to accept insurer-determined payments that would eliminate any incentive for insurers to ensure that specialists who serve our communities will participate in your plan.

They would hand insurance giants a new weapon to limit their participating physician networks. They will cancel contracts, kick doctors out of their networks and negotiate new contracts at a much lower price.

California passed a similar law in 2016 and insurers responded as predicted. As the California Medical Association has warned Congress, “Insurers are terminating long-standing contracts with physicians or mandating significant rate cuts.” A just-released RAND study noted that some specialists no longer are available “on-call” in emergency departments

Morelle’s and Higgins’ legislation would help to protect patients and help to assure that neither physicians nor health plans can game the system.

It is my hope that Sens. Charles Schumer and Kirsten Gillibrand will urge their colleagues to reject the failed California system and step up as a voice for patients and advocate for a solution that ends surprise billing, removes the patients from the middle of any payment dispute and protects patients’ access to care.

The future of our health care system hangs in the balance.

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