May 14, 2019

The Honorable Mitch McConnell                  The Honorable Charles Schumer
Majority Leader                                Minority Leader
United States Senate                          United States Senate
Washington, DC 20510                          Washington, DC 20510

The Honorable Nancy Pelosi                    The Honorable Kevin McCarthy
Speaker                                       Minority Leader
United States House of Representatives       United States House of Representatives
Washington, DC 20515                          Washington, DC 20515

Dear Leader McConnell, Leader Schumer, Speaker Pelosi and Leader McCarthy,

The undersigned organizations appreciate the need to address the issue of surprise billing. With memberships dedicated to providing safe and effective high-quality health care to patients, we believe that legislative solutions to address surprise billing must protect patients by holding them harmless and out of the middle of any billing disputes. We are committed to collaborating with you to find a federal solution that addresses this issue in a comprehensive way that does not compromise access to care through unintended consequences.

Legislative solutions must also improve network adequacy, promote transparency, create a fair mechanism to address insurer and physician payment disputes, and ensure high quality care. We are hopeful that surprise billing solutions will encompass these provisions.

However, we have significant concerns regarding surprise billing proposals that promote hospital bundled billing and so-called “network matching”. Bundled billing is administratively complex to implement, is untested in this context, and would require significant government intervention. Importantly, it would also change the relationship between hospitals and providers, threatening the independent practice of medicine.

In addition, this potential requirement would be difficult to operationalize, especially from a timing perspective. Hospital contracts with insurers can be multi-year, so there would too often be scenarios where the hospital has dropped or changed a contract with a particular insurer, yet the physician group contract with that same insurer would not yet have expired, or vice-versa. As well, a single insurer often has numerous products that each reflect a range of network breadths. To try and align each of these products across each hospital and any physician groups involved will introduce even further additional administrative complexities.

Solutions for addressing surprise billing should focus on protecting the patient. We believe this can be achieved through holding the patient harmless and setting up a process for negotiation between the provider and insurer. Unfortunately, bundling payments for physicians from hospitals does not move us in this direction, and in fact, would create new administrative, legal, and financial challenges that could interfere with the independent and efficient practice of medicine.
We urge you to reject the bundling and network matching proposals. We are committed to working together to craft a federal solution to surprise billing that will ensure a better health care system for our patients and practitioners.

Sincerely,

American Association of Neurological Surgeons
American College of Emergency Physicians
American College of Radiology
American College of Surgeons
American Medical Association
American Society of Anesthesiologists
College of American Pathologists
Congress of Neurological Surgeons