

A Patient-Friendly and Free Market Solution to Ending Surprise Billing



Texas hospitals **support** protecting patients from unexpected bills for out-of-network emergency health care services. Eliminating patients' financial responsibility beyond known, required cost-sharing amounts for out-of-network emergency or unplanned health care services is **fair and reasonable**.

Solving the problem of surprise billing is simple.

- Remove the patient from the equation.
- Maintain mediation as the tool for health plans and health care facilities to work out a fair, reasonable and mutually acceptable payment amount.

Texas hospitals oppose replacing mediation with arbitration for health plans and facilities.

- Arbitration is unnecessary and administratively burdensome.
- Arbitration could undermine consumers' access to high-quality, high-value provider networks the exact opposite of what ending surprise billing should do.
- Arbitration gives the government, rather than the free market, the authority to establish acceptable payment amounts, establishing a slippery slope towards more government control of health care.
- ⊗ Arbitration could lead to higher health care costs.
 - ➤ Senate Bill 1264 originally had a fiscal note because of the estimated additional annual costs for the state's largest health care programs -- the Teacher Retirement System (\$60.5 million) and the Employee Retirement System (\$14.7 million for 2020).
 - ➤ Sen. Joan Huffman's amendment to SB 1264 acknowledged these increased costs and retains mediation for TRS and ERS. The Senate approved the bill with this amendment to protect patients and to guard against increased health care costs.

More information available at www.tha.org/surprisebilling.

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