



Opening Statement

COMMITTEE ON EDUCATION & LABOR

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The Hon. Robert C. "Bobby" Scott • Chairman

Opening Statement of Chairman Robert C. "Bobby" Scott (VA-03)

House Committee on Education and Labor Full Committee Markup

H.R. 5800, The *Ban Surprise Billing Act*

2175 Rayburn House Office Building

Tuesday, February 11, 2020 | 10:15am

Today, we are marking up H.R. 5800, the *Ban Surprise Billing Act*, a bipartisan proposal to end surprise medical bills and provide comprehensive consumer protections for patients across the country.

Surprise medical billing is a troubling and all-too-common product of our complex health care system. These bills occur when patients with health insurance incur unanticipated and, frequently significant, out-of-pocket expenses because, through no fault of their own, they were treated by a provider not covered under their plan.

In many cases, victims of surprise medical bills have no control over whether their medical provider is in-network. Patients who've suffered severe accidents, for example, may not be capable of choosing which emergency room they go to, but must still foot the bill.

Even those who are careful to avoid out-of-network costs can be hit with surprise bills. For example, a patient undergoing surgery can know their emergency room is covered under their insurance, only to find out later that the anesthesiologist in the room was not.

According to a recent survey, 57 percent of consumers have received an unexpected medical bill that they thought would be covered by their insurance. Another survey found that seven in 10 patients who have received unaffordable, out-of-network medical bills were unaware that their provider was out-of-network at the time of care.

The consequences of surprise medical bills are not just felt by patients and their families. These high out-of-pocket costs are also a burden on America's employers, who share the cost of health insurance with their employees.

In fact, this morning I'm entering into the record a new nonpartisan analysis of the surprise billing proposal bill reported out by the Energy and Commerce Committee. According to this report by the Joint Committee on Taxation, the Energy and Commerce bill would have the effect of *increasing* workers' wages by curbing health care costs for employers. The legislation we are considering today uses a similar approach, and we expect it to produce a similar result.

There is universal agreement from all sides of this debate that patients should be protected from surprise out-of-pocket costs. The *Ban Surprise Billing Act* is a bipartisan solution that achieves this shared goal while being fair to both providers and payers.

The *Ban Surprise Billing Act*:

- Holds patients harmless by limiting cost sharing and out-of-network bills;
- Includes bipartisan reforms that improve transparency in health coverage;

- Protects air ambulance patients and takes steps to address ground ambulance surprise bills; and,
- Provides a two-tiered mechanism for resolving payment disputes between providers and payers:
 - For amounts less than or equal to \$750, the reimbursement rate would be determined by a market-based benchmark, which is the *median in-network rate* of providing similar items or services in the same geographic area.
 - For amounts above \$750, providers and payers may elect to use either the benchmark or an independent dispute resolution process to determine a fair payment amount.

Surprise medical billing is a contentious and challenging issue that this Congress has been struggling with for the past year.

I understand that there are dissenting views on both sides of the aisle, and I respect the concerns raised by opponents of this approach. This bill reflects a genuine compromise. By blending the policies put forth by both sides of the debate, it strikes a careful balance that achieves the goal of protecting patients without tipping the scales toward either providers or payers.

This approach has a bipartisan and bicameral support which is likely to be enacted into law.

So, I would ask my colleagues to remember that the status quo is unacceptable. Patients are getting hit with astronomical bills and both payers and providers are facing an uncertain future.

Today, this Committee an opportunity to promote bipartisan consensus and advance us closer to a solution that patients and their families deserve.

We must show our constituents that even tough issues with only imperfect solutions will not stop us from taking action to protect them.

I want to thank Dr. Foxx and her staff for working with us to find a bipartisan solution, and I hope all my colleagues will join me in supporting the *Ban Surprise Billing Act*.

I now yield to the Ranking Member, Dr. Foxx, for the purpose of an opening statement.