



May 21, 2020

President Donald J. Trump
 The White House
 1600 Pennsylvania Avenue NW
 Washington, D.C. 20500

Dear President Trump,

The 28 undersigned organizations, representing millions of patients and consumers across the country who face serious, acute, and chronic health conditions, write to urge you to permanently end all surprise medical billing and to protect patients from financial harm. Patients and consumers, now more than ever, need comprehensive protection from surprise bills.

Recent media reports indicate that individuals diagnosed with COVID-19 may face extreme costs because of the nature of their treatment and quarantine.¹ Patients with serious and chronic conditions who routinely require medical treatment to maintain their health are being asked to shift their care to different providers and facilities as a result of the COVID-19 pandemic. These shifts, while necessary to contain the virus, may result in out-of-network care – increasing consumers’ risk of receiving a surprise bill. Fear of exorbitant costs and subsequent surprise medical bills should not keep patients and consumers away from care related to COVID-19 or an underlying medical condition during this critical time.

¹ Carmen Heredia Rodriguez. [COVID-19 Tests That are Supposed to be Free Can Ring UP Surprising Charges](#) (NPR, April 29, 2020).

Our organizations have worked alongside Congress to develop bi-partisan, bi-cameral legislation that would provide robust protections for patients from receiving unexpected medical bills – which many of our organizations strongly support. However, Congress has been unable to finish this important work. We therefore urge you to continue your leadership on this critical issue and push Congress to robustly protect patients from all surprise medical bills. Specifically, we ask that any legislation meet the following criteria:

1. **Hold Patients Harmless:** Any policy addressing surprise billing must ensure that patients are held financially harmless. When patients receive services from an out-of-network provider for which they have the reasonable expectation that the service was performed in-network (for example, services performed at an in-network facility, or services ordered by an in-network provider), the patient should incur no greater cost-sharing than if the service was performed by an in-network provider. Any such cost-sharing should accrue to in-network deductibles and out-of-pocket caps. Any solution should also ensure costs are not simply passed along to patients through higher premiums or out-of-pocket costs.
2. **Apply Protections to All Insurance Plans:** Surprise billing protections should apply to all commercial health insurance plans, including individual, small group, large group, and self-insured plans as applicable, as well as plans that do not qualify as “qualified health plans” under the Affordable Care Act.
3. **Apply Protections to All Surprise Bills for All Covered Services:** Protections should apply to all surprise bills, regardless of the amount of the bill. Protections should apply to devices that may be provided to a patient while in their provider’s office. A surprise bill of any amount can be challenging to patients and their families.
4. **Apply Protections to All Care Settings:** Surprise billing protections should be applicable regardless of provider type or care setting. Policies should not limit these protections to just emergency services, hospital services, or certain types of specialists.
5. **Require Transparency in Addition to – Not Instead of – Surprise Billing Protections:** Increased transparency for patients is not a sufficient way for policymakers to address the problem of surprise billing. In the vast majority of surprise billing cases, the affected patient has little ability to seek an alternative in-network provider, even if given more information. While our organizations support greater transparency requirements for plans and providers, such requirements are insufficient to meaningfully protect patients from surprise bills.
6. **Conduct Additional Research:** Surprise billing can occur for a variety of reasons, including the inadequacy of a plan’s provider network. Policymakers who enact surprise billing protections should also consider requiring data collection on the incidence of surprising billing to determine whether additional policies and protections are warranted (for example, enactment of more robust network adequacy requirements).
7. **Strengthen State Protections Instead of Weakening Them:** Any federal protections against surprise billing should set a floor to ensure that at least this level of protection exists in all states, but not pre-empt stronger state-level protections where these rules apply.

8. **Protecting Patients Who Utilize Emergency Transportation:** Our organizations are deeply concerned about the impact of balance billing practices on individuals who require emergency transportation. Emergency transportation services reduce transport time for patients during life threatening situations and are a critical component of successful treatment for individuals experiencing a serious health event. Patients in these situations have no choice over who provides care or how they are transported and are frequently balance billed as a result. Policymakers should craft policies that protect patients in all health care settings, including emergency transportation settings.

During this time of uncertainty, patients and their families need peace of mind that they will not receive unexpected medical bills when seeking treatment for COVID-19 or other medical conditions.

If you have any questions or would like to discuss this critical issue with our organizations further, please contact Katie Berge of the Leukemia & Lymphoma Society at katie.berge@lls.org.

Sincerely,

ALPHA-1 FOUNDATION

ALS Association

American Cancer Society Cancer Action Network

American Heart Association

American Kidney Fund

American Lung Association

Arthritis Foundation

Cancer Support Community

CancerCare

Chronic Disease Coalition

COPD Foundation

Crohn's & Colitis Foundation

Epilepsy Foundation

Family Voices

Hemophilia Federation of America

Immune Deficiency Foundation

Leukemia & Lymphoma Society

Muscular Dystrophy Association

National Alliance on Mental Illness

National Health Council

National Hemophilia Foundation

National Multiple Sclerosis Society

National Organization for Rare Disorders

National Patient Advocate Foundation

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Susan G. Komen

The American Liver Foundation

WomenHeart: The National Coalition for Women with Heart Disease