



**National Patient  
Advocate Foundation**

May 21, 2019

The Honorable Bill Cassidy, M.D.  
520 Hart Senate Office Building  
Washington DC 20510

The Honorable Thomas R. Carper  
513 Hart Senate Office Building  
Washington DC 20510

The Honorable Michael F. Bennet  
261 Russell Senate Office Building  
Washington DC 20510

The Honorable Todd C. Young  
400 Russell Senate Office Building  
Washington DC 20510

The Honorable Maggie Hassan  
324 Hart Senate Office Building  
Washington DC 20510

The Honorable Lisa Murkowski  
522 Hart Senate Office Building  
Washington DC 20510

Dear Senators Cassidy, Hassan, Bennet, Carper, Young and Murkowski:

National Patient Advocate Foundation (NPAF) appreciates your leadership in introducing the Stopping the Outrageous Practice (STOP) of Surprise Bills Act of 2019 – legislation we support together with the other endorsing organizations listed at the conclusion of this letter. We applaud your bipartisan effort to address this issue affecting thousands of patients and families across the country.

NPAF represents the voices of millions of adults, children and families coping with serious and chronic illnesses nationwide as the advocacy affiliate of Patient Advocate Foundation (PAF). PAF provides direct case management, financial support, and educational services to tens of thousands of primarily low-income patients and caregivers each year who are experiencing distressing financial, employment, insurance coverage or household material hardships because of their health conditions. We develop and advocate for person-centered policies that will improve the quality of life for all patients and families coping with serious illnesses.

Financial hardship resulting from medical costs, including surprise medical bills, continues to be one of the top reasons patients and caregivers contact PAF for assistance. In 2017 alone, debt crises were the second largest issue affecting patients seeking PAF case manager assistance.<sup>1</sup> Millions of people in the US are at risk of losing their health, homes, credit standing, and financial security annually because of the harms of medical debt. The burdensome consequences can be overwhelming, and families often cut corners in their own household and health care needs in an effort to maintain financial viability.

NPAF has long advocated for policies and practices that protect patients and families from the distressing harms of medical debt and we fully endorse the key patient protections in this legislation as they align with our organization's position on surprise out-of-network billing practices. NPAF advocates for policies that will:

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<sup>1</sup> Patient Advocate Foundation. 2017 Annual Impact Report. Available at: [https://dev.patientadvocate.org/wp-content/uploads/sites/8/2017\\_AnnualImpactReport.pdf](https://dev.patientadvocate.org/wp-content/uploads/sites/8/2017_AnnualImpactReport.pdf)

1. **Protect patients from balance bills:** Patients should not be held financially responsible for balance bills due to unexpected out-of-network care.
2. **Improve cost transparency:** Patients should be notified in a timely manner when they receive services from out-of-network providers or facilities, and clear information about network status should be publicly available, up-to-date and easily accessible.
3. **Promote meaningful choice:** Patients should be directly informed of cost information for health services prior to delivery, specifically their out-of-pocket (OOP) costs responsibility related to their insurance coverage, and they should have the opportunity to ask questions, explore other options, if available, and consent to the services.

The STOP Surprise Bills Act of 2019 upholds the same principles we support and completely removes patients from the middle of a billing process outside their control protecting patients from receiving surprise balance bills in scenarios when patients receive emergency care by an out-of-network provider or at an out-of-network facility; when patients receive additional care at an out-of-network facility following an emergency; when patients receive non-emergency care by out-of-network providers at in-network facilities as well as when patients receive out-of-network ancillary care such as laboratory or imaging services ordered by in-network providers. In those scenarios, patients will only be responsible for their in-network cost-sharing. Furthermore, the legislation includes key provisions that require both providers and health plans to inform patients of their expected cost-sharing for a specific health care service – an important step towards a person-centered care delivery model that should also integrate conversations about costs and assessment of financial risks.

We believe the protections in the STOP Surprise Bills Act of 2019 will help patients avoid the financial distress and household material hardships that come with chronic/serious illnesses or medical emergencies. NPAF looks forward to working with you on securing passage of this important legislation, especially to provide feedback from patient, caregiver and family perspectives. Please contact Melissa Williams, manager of healthcare policy and advocacy at [Melissa.Williams@npaf.org](mailto:Melissa.Williams@npaf.org) or 202-573-6459 if NPAF can provide further details or assistance.

Respectfully submitted,



Rebecca A. Kirch  
EVP Healthcare Quality and Value

**Organizations Endorsing this Support for the Stopping the Outrageous Practice (STOP) of Surprise Bills Act of 2019**

Alliance for Aging Research

American Kidney Fund

CancerCare

Children's Brain Tumor Foundation

Cutaneous Lymphoma Foundation

GO2 Foundation for Lung Cancer

Mended Hearts

Mended Little Hearts

National Alliance on Mental Illness

National Osteoporosis Foundation

Partners for Better Care

Prevent Cancer Foundation

RetireSafe