While the issue of surprise medical bills has faded from view during the COVID-19 pandemic, it has not disappeared entirely, in part because of speculation that any further federal response could contain policy reforms in this area. While the federal government has not acted yet, a number of states have over the last several years, and AAF’s Director of Health Care Policy Christopher Holt assesses these state-level policies. He finds that while the policies vary in nuanced ways, there is a remarkable amount of consensus in their approaches. As a result, they provide a roadmap for a federal solution.

An excerpt:

As federal and state policymakers continue to work toward a legislative agreement addressing SMBs, a review of the approaches taken by many states in recent years elicits two key conclusions that provide a helpful roadmap for a federal solution.

First, there is broad consensus among the various state approaches. States have widely agreed that patients should be protected from SMBs, and three-fifths of states have undertaken measures to do so. Additionally, over two-thirds of states that regulate SMBs mediate payment disputes between payers and providers for out-of-network (OON) services. Finally, more than half of the states regulating SMBs have enacted an independent dispute resolution process (IDRP), including most states that enacted SMB laws within the last year.

Second, there simply has not been enough time to determine the full impact of these laws. Going forward, transparency around state regulations will be crucial to determining the impact of these policies on patients, providers, payers, and health care costs. Any federal legislation should prioritize ensuring data on outcomes are publicly available.

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