In its quest to address the cost of health care, Congress has turned its attention to surprise medical bills — instances where the patient expects an in-network charge but then receives a much higher out-of-network one. Both the Senate and the House are considering bills that seek to reduce this event, and AAF’s Health Care Policy Analyst Jonathan Keisling examines the mechanics of the bills along with their potential effects.

An excerpt:

This bill’s potential impact on the cost of health care is complicated. On the one hand, there is a cost shift from patients to insurers and providers that would seem to put upward pressure on prices and premiums that patients face. On the other hand, there is a reduced incentive for providers to jump in and out of networks for the purpose of negotiating higher rates, which would put downward pressure on patient costs. The interplay of these two forces would determine how a bill such as S. 1895 would impact patients’ pocketbooks. But if the interplay is similar to that in New York, then patients can be hopeful that the reduction of surprise billing could also lead to reduced premiums.

Read the analysis.