December 21, 2020

The Honorable Richard E. Neal  
Chairman  
Committee on Ways and Means  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Kevin Brady  
Ranking Member  
Committee on Ways and Means  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairman Neal and Ranking Member Brady:

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, our clinician partners – including more than 270,000 affiliated physicians, 2 million nurses and other caregivers – and the 43,000 health care leaders who belong to our professional membership groups, the American Hospital Association (AHA) thanks you for your efforts to protect patients from surprise medical bills by including the No Surprises Act as part of the year-end legislative package. Your tireless work to support patients and the providers who care for them was crucial to the passage of this important legislation.

As you know, the AHA agrees with you that protecting patients from balance bills is paramount. Critical as well is ensuring that their cost-sharing responsibilities are limited to what they would have paid in-network. Solving for this in an “out-of-network” scenario was not easy, and we commend you for developing an approach for determining cost-sharing that both limited patients’ financial exposure and allowed for them to be “taken out of the middle” of any discussions between the health plan and the provider regarding reimbursement. We strongly supported these provisions in the legislation.

We also commend you for protecting patients’ long-term access to care by avoiding an approach to provider reimbursement that could destabilize provider financing and threaten their ability to continue providing services to their communities. Once the patient is protected, hospitals and health systems will be permitted to work with health plans to determine appropriate reimbursement, as is outlined in your bill. We strongly opposed approaches that would have imposed arbitrary rates on providers, which could have had significant consequences far beyond the scope of surprise medical bills and impacted access to hospital care, particularly in rural communities, and we are grateful that no such provision was included in the final legislation.
We also appreciate that you did not include in the legislation certain provisions extraneous to the surprise medical billing issue, such as those related to privately negotiated contracts, which would lead to narrower provider networks with fewer choices for patients.

We share your commitment to transparency and want to ensure patients know their payment responsibilities in a timely manner. We appreciate that the final legislation addressed our concerns related to the unworkable provision related to billing timelines and processes.

Thank you for your leadership to end surprise medical billing and for working with us to protect patients while addressing this important issue in such a thoughtful manner.

Sincerely,

/s/

Richard J. Pollack
President and Chief Executive Officer