COALITION AGAINST

Then vs. Now: Understanding the Impact of the No Surprises Act

Before the No Surprises Act:

- <u>**1** in 5 patients</u> admitted to the hospital on an in-patient basis received a bill from an out-of-network physician.
- In 2018, Americans made about 130 million visits to the emergency room. At least 1 in 6 patients who had health insurance received a surprise medical bill from a provider or specialist who treated them.
- The outrageous out-of-network bills from a subset of specialty physicians result in <u>\$40 billion</u> in additional spending in employer-provided coverage alone.



After the No Surprises Act:

- The No Surprises Act protected Americans from <u>9 million</u> surprise medical bills in the first <u>9 months</u> of its implementation – averaging about 1 million surprise medical bills a month.
- Despite the Centers for Medicare and Medicaid Services (CMS) expecting fewer than 18,000 IDR claims to be filed in 2022, <u>over 90,000 claims</u> were filed in just five and a half months, far exceeding CMS estimates.
- Nearly **25,000** of the 90,000 IDR claims filed were initiated in Texas.
- Certified IDR entities found nearly 16,000 of closed disputes were ineligible for the IDR process – that's 69% – highlighting another strategy to misuse or abuse the IDR process.
- Late last year CMS announced the administrative fee for initiating IDR will increase in 2023 from **\$50** to **\$350** per dispute, resulting in higher costs for patients.









