

January 4, 2022

To: Members of the NJ Legislature

Re: Oppose S3458/A6245

A bill to change New Jersey's 2018 Out-of-Network Consumer Protection law (S3458/A6245) is being considered in the legislative lame duck session. This proposed bill runs counter to the federal "No Surprises Act" championed by New Jersey's own Congressman Frank Pallone that became effective on January 1. That federal law expands the protections New Jersey instituted in 2018 beyond the approximately 2.1 million people in health plans regulated by the state, to protect everyone.

Now *all* patients are protected when, without their knowledge or consent, they receive treatment from a health care provider or facility that is not in their insurer's network whether in an emergency or because a doctor in an in-network facility doesn't accept their insurance. The new law makes sure that no patient gets caught in the middle of a dispute and that no patient is balanced billed when they did not knowingly choose to go out of network.

The No Surprises Act also sets up an independent dispute resolution process for doctors and insurers to work out the amount of the bill. This includes a binding process, deadlines for negotiating and payment, and a way to enforce the rules. It also requires disclosures and notices to consumers and the use of various forms by doctors and facilities and insurers. Due to the requirement for greater patient disclosure, more specifics on enforcement, and specific payment considerations for arbitration, the No Surprises Act is even more protective of consumers than the New Jersey law.

Now is the time for New Jersey to make its law consistent with federal law so that doctors and other health care providers and facilities can use the same disclosure forms and notices for everyone and treat everyone the same when it comes to surprise bills. Having uniformity will reduce administrative costs and confusion for everyone - consumers, patients, employers, employees, caregivers, doctors, hospitals, and insurers. Patients will know what to expect when seeking treatment, and providers will know their disclosure and billing responsibilities; and patients' rights and providers' responsibilities will not vary based on insurance plan status.

This is not the time to amend New Jersey's current surprise billing law. Doing so is ill-timed, ill-advised, and illogical and creates unnecessary differences between the New Jersey law and the federal law. These differences make the healthcare system more complex for everyone.

Therefore, as a coalition of consumer groups, a Regional Health Improvement Collaborative, union funds and organizations, and business groups, we ask you to **OPPOSE** S6245/A3458. We also request that you work with us in taking steps necessary to ensure better coordination across state and federal agencies to enforce both the No Surprises Act and the current New Jersey law to protect New Jersey consumers from harmful surprise medical bills.