



SURPRISE MEDICAL BILLING

*Key findings from a nationwide survey among 1,001 U.S. voters
conducted October 4 to 12, 2019 for*



**Arnold
Ventures**

Voters Feel Out-of-Network Charges Are Unreasonable and Unfair

76% feel that these out-of-network bills are usually unreasonable.

86% say it is **not fair** to charge a lot more to out-of-network patients.

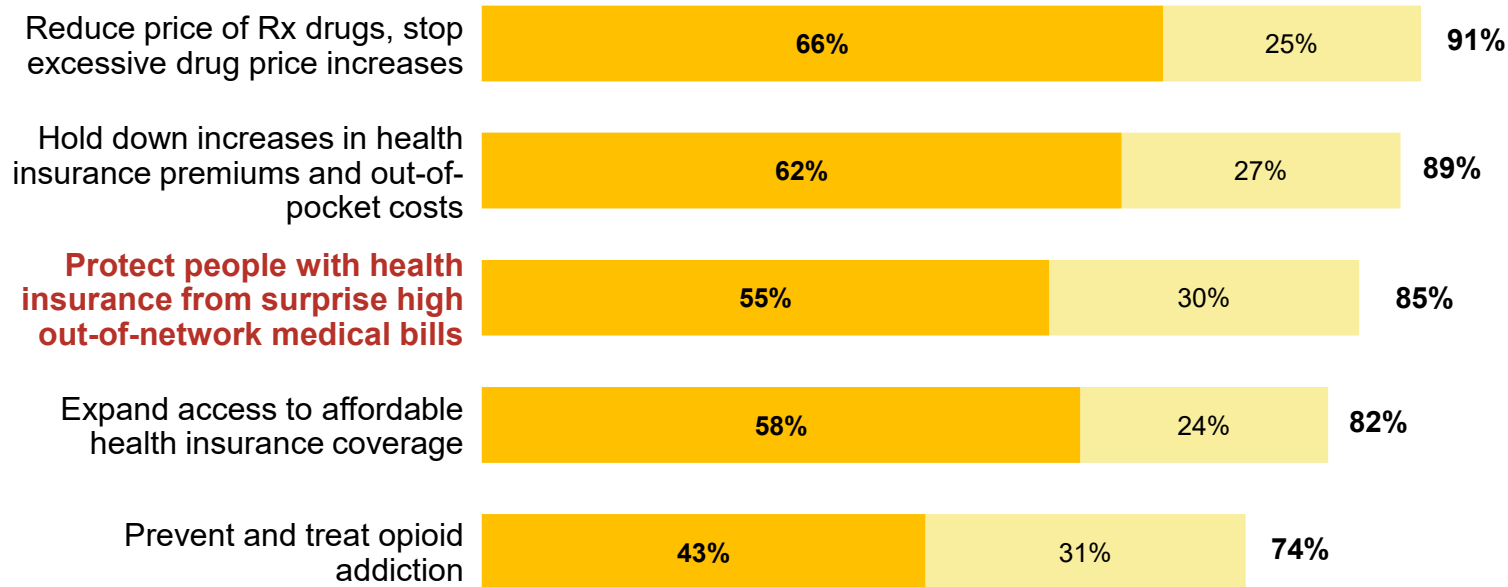
52% of voters say they (24%) or someone they know (28%) have received a surprise medical bill.



* Description provided prior to questions about surprise medical billing: “Now we would like to ask you about surprise medical bills that exceed the usual amount paid through a patient’s insurance and cost-sharing. This situation can occur when a patient with health insurance gets emergency medical care at a hospital that is not covered in their insurance network. It can also happen when a patient goes to a hospital in their insurance network but ends up being seen by a doctor who is not in their network.”

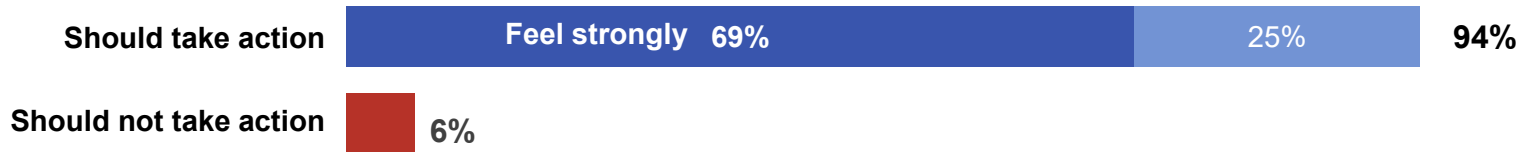
Protecting People from Surprise Billing is a High Priority

How high a priority should this be for Congress to address in dealing with healthcare?

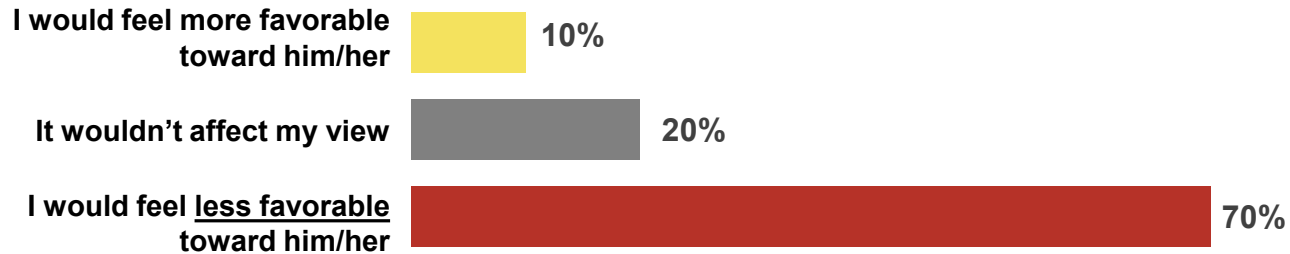


Voters Say Congress Should Take Action on Surprise Billing

Should Congress take action to protect patients from having to personally pay surprise bills for out-of-network medical care that exceed the usual amount paid through their insurance and cost-sharing?



If I learned that my member of Congress did NOT support legislation to protect patients from personally paying for surprise medical bills:



Voters Express Significantly Stronger Support for Average In-Network Rate Approach

How strongly do you support each policy proposal?



(AVERAGE IN-NETWORK RATE) Eliminate surprise medical bills that exceed a patient's in-network co-pays and deductibles, and require out-of-network medical providers to accept the average in-network rate negotiated by providers in that community.

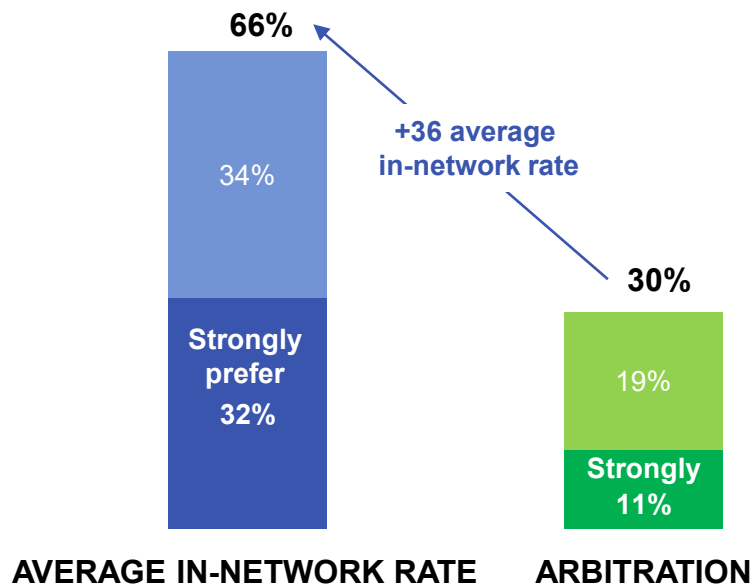


(ARBITRATION) Eliminate surprise medical bills that exceed a patient's in-network co-pays and deductibles, and require insurance companies to pay out-of-network providers an amount determined by an arbitration process, which will almost always be higher than the in-network rate.



When Asked to Choose, Voters Strongly Prefer the Average In-Network Rate Approach

Which proposal do you prefer?



(AVERAGE IN-NETWORK RATE) Eliminate surprise medical bills that exceed a patient's in-network co-pays and deductibles, and require out-of-network medical providers to accept the average in-network rate negotiated by providers in that community.

(ARBITRATION) Eliminate surprise medical bills that exceed a patient's in-network co-pays and deductibles, and require insurance companies to pay out-of-network providers an amount determined by an arbitration process, which will almost always be higher than the in-network rate.

Voters Across the Political Spectrum Express Strong Support for the Average In-Network Rate

	Average In-Network Rate	Arbitration	Advantage
All voters	66%	30%	+36
Democrats	67%	30%	+37
Independents	63%	32%	+31
Republicans	67%	29%	+38

Voters are Concerned About Limiting Providers' Ability to Charge Excessive Rates

Which would be a greater concern for you about a plan dealing with surprise medical billing?

Plan won't do enough to prevent providers charging excessive rates on out-of-network care



75%

Plan will go too far in cutting payments to hospitals and doctors in my community



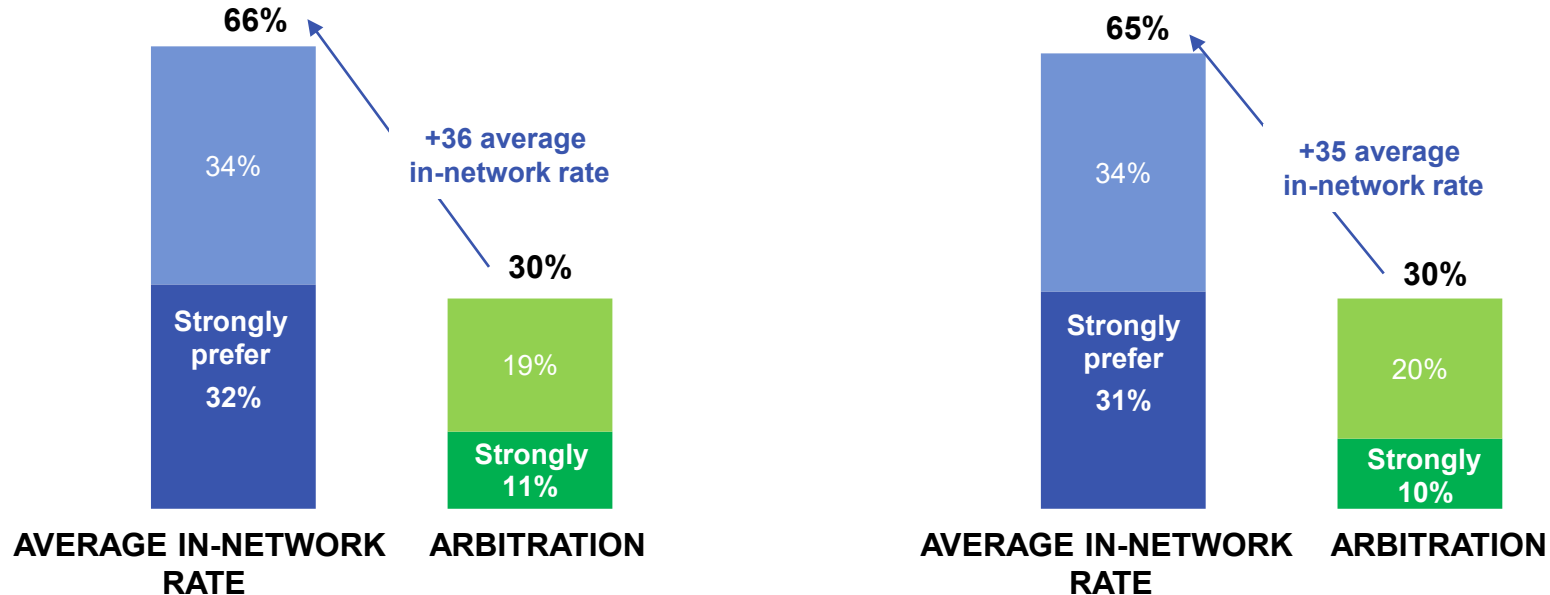
17%

Voters Continue to Prefer Average In-Network Rate After Seeing Common Arguments for Each Policy Approach

Which proposal do you prefer?

Initial preference

Post-messaging preference





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