

Voters Want to End Surprise Medical Billing: Insights from Voter Researchⁱ

Receiving a surprise bill for out-of-network medical care is a common experience. Our national survey found that 44% of voters have received surprise bills for out-of-network care, and they said it was difficult to pay these bills (68%) or that they couldn't pay the bills at all (11%). In a focus group of nine rural voters in Steelville, Missouri, we found seven had received surprise medical bills, and for some, their bills totaled in the thousands of dollars. Most could not pay their bills, and this damaged their credit.

The majority of focus group participants understood what “out-of-network” meant. In fact, many of these voters checked beforehand to make sure their doctors and hospitals are in-network but still ended up with bills from out-of-network specialists or labs. They were mad that health care providers did not tell them up front about whether their care would be billed as out-of-network.

The Steelville voters mostly blame doctors and hospitals for the surprise bills. They felt greed is driving high costs and that providers send surprise bills “because they can.” In our national survey, 86% of voters said that hospital and doctor fees are too high, and another 84% believed the rates that hospitals and doctors charge are inflated above their actual costs. In addition, as part of any legislation to protect consumers from surprise medical bills, 82% supported “doctors and hospitals that do surprise billing being paid less by insurance companies than they are now.”



Story From Steelville

One woman told how her husband received knee surgery, got an infection, and was in and out of the hospital for the next 5 months. After his treatments, the family received bills totaling many thousands of dollars. Even though the hospital and original surgeon were in-network, an out-of-network specialist was consulted and a lab that was subcontracted by the hospital was also out-of-network. The family was never told by the hospital these were out-of-network providers and was surprised when they received such high bills for those providers. The family tried to fight the bills, lost, and then tried to pay the bills, but eventually, they defaulted on the payment. They now have a large amount of debt and their credit is damaged.

ⁱ Families USA and PerryUndem conducted a national survey of 1,000 voters October 16-19, 2019, and a focus group in Steelville, Missouri 11/06/19, with rural conservative voters to hear about their views and experiences with surprise medical bills.

What Voters Want

The overwhelming majority of voters want elected officials to pass legislation to protect them from surprise medical bills. In the survey, 87% of voters said they feel it is “important” that their elected officials support legislation to protect patients from surprise medical bills. Those saying it is important include 97% of Democrats, 88% of Independents, and 74% of Republicans. Also, all 9 of the conservative Steeleville voters in the focus group supported their state passing legislation to protect people from surprise medical bills.

Voters prefer, by more than 9 to 1, a bill that would require doctors and hospitals to be paid based on what doctors in the area are typically paid and would be less likely to lead to higher premiums. Survey respondents were told Congress is considering two bills. After reading brief descriptions of both bills, they preferred the bill that proposes to pay doctors and hospitals that send surprise bills the “market rate” over the bill that would allow doctors and hospitals to still charge fees that are well above the market rate (73% vs 8%). Voters in the Steeleville focus group agreed: They preferred that doctors and hospitals get paid market rates versus the much higher fees they are allowed to charge now.

The overwhelming majority of voters are not concerned about doctors and hospitals being paid less money. In the survey, 86% of voters said health care provider fees are too high, and another 84% believe the rates that hospitals and doctors

charge are inflated above actual costs. Steeleville voters also did not indicate much concern about doctors and hospitals making less money — they feel providers will still make enough money even if the law requires they are paid the market rate.

Steeleville voters also want legislation to require transparency in provider pricing. “They should have to show their real costs,” said one voter. In addition, most felt hospitals and doctors should be mandated to tell patients if there are out-of-network providers involved up-front, before they treat the patient.

Messages in support of legislation should focus on protecting patients “who are trying to follow the rules” from unfair medical bills. The Steeleville voters have a strong sense of injustice when it comes to surprise medical bills. They feel these bills are fundamentally unfair — and extremely harmful to their families — because patients are not warned in advance that out-of-network providers will be involved in their care. Messaging is stronger when it can tap into these feelings of injustice and outrage.

Tell personal stories. Steeleville voters offered many stories from their own experiences receiving surprise medical bills; and these stories were powerful. Everyone could relate — they knew they could be the next victim of surprise medical bills. Use storytelling as a way to show how unfair these surprise bills are and to highlight the financial pain these bills can cause families.

“Out-of-network care can literally ruin your life plan when thousands of dollars are billed multiple times.”

– A focus group participant in Steeleville, Missouri

Doctor Patient Unity attack ads don't deter voters (even if they seem to make some politicians pause).

In the survey, we asked voters about the Doctor Patient Unity ad campaign that attacks surprise billing legislation and “government rate setting.” We showed images from the ads and then explained their message. We also explained that corporations that “buy up doctor practices” funded these ads. In response, survey respondents used words like “disgusting,” “corrupt,” “angry,” and “expected” to describe their feelings about this campaign. And, 86% agreed that advertising campaigns funded by corporations that buy-up doctor practices should not influence what Congress does to address surprise medical bills. Also, 74% of respondents said they would be concerned if Congress failed to pass surprise billing legislation because of this ad campaign.

The conservative Steeleville voters had the same response: They did not find the message credible that “hospitals will shut down” as a result of providers getting paid the market rate to be credible.

While some politicians may be swayed by provider organizations who are worried about being paid less, most voters are not. They feel out-of-network surprise medical bills are unfair and motivated by provider greed.

The Steeleville voters felt there was no recourse on surprise bills other than to pass legislation.

As one participant said, “There are some areas like this where you just need government protection.” This group was made up of conservative Republicans — one participant acknowledged that getting the government involved is not something he would normally support. But he and the other voters in the group felt they had no choice or power on their own to fight these bills. The national survey also showed that the overwhelming majority of voters (89%) support “Congress passing federal legislation to protect patients from surprise medical bills.”

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