

## UNDERSTANDING THE

# PATIENT MEDICAL DEBT PROTECTION ACT

### PROBLEM

### EXAMPLE

### SOLUTION

Hospitals send patients unnecessarily **confusing and duplicative bills**.

Chandak G. went to the hospital for kidney stones and got **27 different bills** from the ER, radiologist, and many others.

**One itemized bill**, written in plain language, delivered within 7 days after every hospital visit. [Part A]

Non-profit **hospitals sue patients** for outstanding bills long after a hospital visit, **charging 9% interest rates**.

John C. was sued five years after his hospital stay for \$18,000; the hospital lawyer got a default judgment of \$25,000 that included \$7,000 in interest.

Reduce the statute of limitations for medical bills from six years to two years and **reduce the maximum interest rate** to 3%. [Part F]

Patients are still on the hook for **surprise bills** that result from provider and plan misinformation.

Claudia K. scheduled what she thought was an in-network visit because her provider directory told her the doctor was in-network, and she was **stuck with a \$101,000 medical bill**.

**Hold patients harmless** for provider and plan misinformation. [Part G]

Patients are charged for hospital overhead, known as **facility fees**.

Sintora S. went in for a mammogram, expecting to be charged a co-pay, but then received a **surprise \$149 facility fee**.

**Ban facility fees**; patients should not be charged for hospital overhead. [Part B]

There is **no uniform hospital financial aid form**, forcing financially needy patients to jump through hoops to get the assistance they need.

With no standardized form, patients must go through **different financial aid processes and forms** when they go to different hospitals, creating confusion and barriers to access.

**One uniform hospital financial form** to be used by all hospitals in New York. [Part E]

**Waiver forms leave patients responsible** for unspecified and unanticipated expenses.

Patients are on the hook for expensive medical care when **their rights are waived**.

**Standardize patient financial liability waiver forms**. [Part C]

To control costs, NY seeks to establish a **consumer-friendly website** to search and compare prices on common procedures, known as an all payer database.

Some hospitals claim insurance companies cannot report cost data saying it's "proprietary," **leaving patients disempowered** to make well-informed choices.

Require hospitals to **allow insurance carriers to report cost data** and allow patients to easily compare prices on common procedures. [Part D]