Surprise Medical Bills Are Not the Problem—The Network Is

Patients Are Forced Into Networks Because Congress Established Health Plans to Ration Care

ST. PAUL, Minn.—It’s an all-too-common problem many Americans have faced.

Patients visit a hospital or provider for a service or treatment they thought was “covered” by their insurance, only to receive a surprise medical bill weeks later with out-of-pocket costs totaling hundreds or even thousands of dollars.

Citizens’ Council for Health Freedom (CCHF) has an answer to the question: If patients are “covered” by insurance, why does this happen?

“Actually, surprise medical bills are not the main problem,” said award-winning author and CCHF president and co-founder Twila Brase. “The problem is the network. Surprise medical bills come from out-of-network doctors and facilities. In real health insurance, the indemnity kind, there are no networks. Surprise medical bills come because even though an insured patient may go to a network hospital, the emergency room doctor, radiologist or specialist may not be part of the health plan’s network.

“Patients then receive this unpleasant surprise because they have unknowingly gone outside the network and are facing a separate out-of-network deductible,” said Brase, “which could be higher than their in-network deductible. Patients have been forced into networks because Congress established and has now imposed through the ACA health plans for all Americans. Those health plans use networks to ration care.

“Instead of getting rid of health plans and these surprise medical bills, Congress is considering price controls that would cap payments to out-of-network doctors,” Brase continued. “California and other states are looking at legislation to limit what out-of-network doctors can charge in-network patients. This ill-advised attempt at price control would essentially make all doctors into network doctors, expanding health plan payment controls to doctors who haven’t agreed by contract to network pricing. If this happens, we expect many doctors to stop practicing altogether, reducing access to care.”

Telling doctors what they can and can’t charge when they are not in a network fits the socialist model, Brase added. In fact, in response to an article in National Review that outlines how socialist Sen. Bernie Sanders touts health care as a “right,” Brase recently tweeted:

1. There’s no such thing as “health care.” There is medical care and medical insurance.
2. A right to coverage is NOT a right to care.
3. A “right to care” (treatment) is the “right” to make doctors into serfs by government force.
4. There is a right to NOT be a doctor.
In the new book, “Big Brother in the Exam Room: The Dangerous Truth About Electronic Health Records,” which was recently named a first-place winner for the Reader Views Literary Awards, Brase writes extensively about government health care, socialized medicine, patient privacy, electronic health records, health freedom and how the Affordable Care Act has harmed patients and doctors since 2010. Find “Big Brother in the Exam Room” online wherever books are sold or at BigBrotherintheExamRoom.com.

Learn more about CCHF at www.cchfreedom.org, its Facebook page or its Twitter feed @CCHFreedom. Also view the media page for CCHF here. For more about CCHF’s initiative The Wedge of Health Freedom, visit www.JointheWedge.com, The Wedge Facebook page or follow The Wedge on Twitter @wedgeoffreedom.

###