



**TESTIMONY OF  
CONNECTICUT HOSPITAL ASSOCIATION  
SUBMITTED TO THE  
INSURANCE AND REAL ESTATE COMMITTEE  
TUESDAY, FEBRUARY 7, 2017**

**PROPOSED SB 426, An Act Protecting Patients From Inappropriate Billing Practices  
PROPOSED HB 6436, An Act Concerning An Arbitration Process For Surprise Bills And Bills For Emergency Services**

The Connecticut Hospital Association (CHA) appreciates this opportunity to submit testimony concerning **Proposed SB 426, An Act Protecting Patients From Inappropriate Billing Practices, and Proposed HB 6436, An Act Concerning An Arbitration Process For Surprise Bills And Bills For Emergency Services.**

Before commenting on the bill, it's important to point out that Connecticut hospitals provide high quality care for everyone, regardless of ability to pay. Connecticut hospitals are finding innovative solutions to integrate and coordinate care to better serve patients and communities, as well as achieve health equity. These dynamic, complex organizations are working to build a healthier Connecticut. That means building a healthy economy, community, and healthcare system. By investing in the future of Connecticut's healthcare and hospitals, rather than continuing to cut away at them, we will strengthen our economy, put communities to work, and deliver affordable care that Connecticut families deserve.

SB 426 and HB 6436 appear to address aspects of Connecticut's "surprise billing" law. SB 426 requires that health carriers only charge a patient who received healthcare services from a healthcare provider at a hospital that is in-network, a cost that is level with the in-network level of cost-sharing by all healthcare providers who provide services at such hospital. HB 6436 requires the establishment of an arbitration process by which a dispute over a bill for emergency services or a surprise bill for healthcare services may be resolved. HB 6436 also details standards to be used in the arbitration process.

Connecticut is only one of a handful of states that have passed legislation concerning surprise billing. Effective July 2016, Connecticut established the rules and the process for addressing surprise billing. Among other requirements, General Statutes Section 38a-477aa provides that out-of-network providers who issue surprise bills will be limited to in-network reimbursement.

The new requirements and process have been in effect for only approximately seven months. CHA believes it is premature to make changes to a statute that is less than one year old.

CHA respectfully requests that the Insurance and Real Estate Committee not take action on SB 426 and HB 6436.

Thank you for your consideration of our position. For additional information, contact CHA Government Relations at (203) 294-7310.