

**Testimony of Barbara Gerken  
On Behalf of the Ohio Association of Health Underwriters  
In Support of H.B. 388 (LSC -L\_133\_1962-15)  
Before the House Finance & Appropriations Committee**

**May 19, 2020**

Co-Chairs Oelslager and Callender, Vice Chair Scherer, Ranking Member Cera and members of the House Finance Committee, I am submitting this testimony in my capacity as Legislative Chair of the Ohio Association of Health Underwriters (OAHU). OAHU members are licensed insurance agents and are experts in the sale and servicing of health insurance products in Ohio's individual, small group (1-50) and large group (51+) markets.

Both OAHU and our national association, the National Association of Health Underwriters (NAHU) have been strong advocates for comprehensive legislation to protect consumers from "surprise" medical bills due to no fault of their own.

As we previously testified before this Committee, **surprise medical bills occur in both emergency and non-emergency situations**. When surprise bills occur today, there is an Undefined, protracted process that in many cases leaves our clients financially impaired.

In an August 12, 2019 analysis released by the Journal of the American Medical Association (JAMA) the authors concluded the following:

- In reviewing just under 5.54 million hospital inpatient admissions and just over 13.5 million emergency department admissions between 2010 and 2016, out-of-network billing increased from 32.3% to 42.8% of emergency room visits, and the mean potential liability to patients increase from \$220 to \$628.

42% and the mean potential liability to patients increased from \$804 to \$2,040.

**The conclusion of the research was as follows: "It appears that out-of-network billing is becoming more common and potentially more costly in both the emergency department and inpatient settings."**

In reviewing the LSC-L\_133\_1962-15 version of H.B. 388 that is before the Committee today, OAHU believes it will be a good start at protecting consumers from surprise bills.

**In conclusion, LSC-L\_133-1962-15 establishes a reasonable methodology that will increase the likelihood that providers and payors can come to a mutually agreeable payment.**

Thanks for your consideration of OAHU's testimony.