
House Bill 388
Testimony of Dr. Ryan Squier
May 5, 2020

Co- Chairman Oelslager and Callender, Vice Chairman Scherer, Ranking Member Cera and members of the House Finance Committee, Ohio ACEP would like to re-iterate our opposition to House Bill 388. On November 20, 2019, our association gave comprehensive testimony voicing our specific concerns with the legislation as currently before you. We ask that you re-review those remarks.

We are not going to re-state those concerns, they have not changed. In fact, our opposition is only exacerbated by all that has occurred in Ohio and across the world as a result of the COVID-19 pandemic. We are only submitting written comments today because our schedules do not offer us the opportunity to be in attendance. In the current healthcare environment, our focus is truly our patients and communities. We are struggling on a daily basis to make sure that our patients and our staff are practicing in the safest environment. As we have navigated this ever-changing landscape over the past 2 months, we have invested great time and effort on a daily basis for the benefits of society, for the benefit of you and your constituents. We are problem-solvers and have been relied upon heavily within our own Emergency Departments, Hospital Systems, and Communities to address this pandemic. We have run into this fire head-on, and it is hard to not feel like our efforts will be taken advantage of heavily during this time with attempts at cutting our legs out from under us.

While we have tried not to focus on the financial implications we and other physicians are facing due to COVID-19, they are very real. The cancelation of non-elective procedures, patient fear of seeking care in a hospital, time devoted to increasing our capacity for a surge, and other factors are financially harming our healthcare system. We are not immune from the economic devastation this pandemic has also caused. House Bill 388 would only further cripple our ability to fairly negotiate with insurers. Passing a legislatively mandated reimbursement cap that benefits insurers, would devastate us even further. These insurance companies are not directly providing care for patients. They are not struggling to work under the uncomfortable PPE or lack of appropriate equipment. They are not worried about returning home and potentially presenting their spouse, children, or loved ones to a disease they came into contact with while trying help their fellow man. They are not the ones who are uninvited from meetings because of the fear of contamination that we bring from the bedside care that we have devoted our lives toward. We suspect they are one of the few industries who are not seeing a significant downturn in their bottom line because of COVID. In fact, insurance corporations have posted first quarter earnings ABOVE projections as patients have been deferring medical care, at times to deleterious effects.

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Ohio ACEP Testimony
Dr. Ryan Squier

Last week the world of emergency medicine mourned the loss of 49-year-old colleague Lorna Breen, MD, FACEP, who died by suicide after treating COVID-19 patients and contracting the virus herself. The stress of caring for patients with limited resources was overwhelming. In the past two weeks, University Hospitals in Northeast Ohio closed 5 emergency departments, a casualty of deeply cut patient volumes as Ohio's hospital prepared for the inevitable COVID-19 surge, and a sign of the razor thin margins under which emergency departments operate. Further financial barriers that would surely be created by House Bill 388 will only lead to fewer emergency physicians left to care for patients, a shortfall which will only be further exacerbated as they try to make preparations for future COVID-19 surges.

Emergency physicians support protecting patients by waiving cost-sharing and mandating coverage by insurers for COVID-19 tests and testing-related services, but as yet insurers have not been required to reimburse providers for COVID-19 related treatment. This is yet another example of the advantage that insurers take of physicians.

Ohio ACEP has worked with legislators in good faith for several years to develop a solution for out-of-network billing disputes between insurers and providers, and we remain committed to finding a fair and equitable approach that takes patients out of the middle. Ohio ACEP's singular focus over the past several weeks and today is ensuring that emergency physicians have the resources they need to stay safe and continue to provide care for the many COVID-19, and other emergency patients that are coming into our emergency departments (EDs).

On behalf of the Ohio Chapter, American College of Emergency Physicians (Ohio ACEP) and our 1,600 members, thank you for your continued efforts to respond to the novel coronavirus (COVID-19), both in terms of its public health and economic impacts. As you know, emergency physicians are on the front lines of this pandemic and continue to work around the clock to ensure that our patients receive the high-quality lifesaving care they need and deserve. As emergency physicians continue to risk their lives every day trying to manage and stop the spread of COVID-19, we ask that you support our health care workers as we battle the most significant public health crisis our country has experienced in more than a century. Just like emergency physicians, Ohio's General Assembly should focus for the time being on dealing with the crisis at hand.

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