Legislation that protects doctors will hurt patients

To the editor:			

"Caveat emptor" is wisdom that holds true in most consumer-oriented businesses, unless you are a consumer of health insurance.

In these final weeks of session, New York State Legislature continues to debate a bill to regulate "out-of-network" charges. The common example, an individual undergoes a routine surgery at a hospital that is part of the insurer's network of providers, only to be billed after the fact for the services of anesthesiologist, who is not part of the network. Surprise billing certainly must be reformed.

A proposal aimed at providing greater transparency about out-of-network policies- S.5068A/A.7489B - fails to address this problem. The legislation protects the income of doctors, but fails to include basic consumer protections, i.e. requiring medical providers to disclose their network status before a treatment is provided and prohibiting doctors from balance billing consumers for charges not covered by insurance. In addition to not fixing the problem, it could create another one — higher out-of-network costs that will result in higher prices for insurance coverage.

Many small employers are already struggling to afford health insurance. If Legislators fail to address premium shortcomings now, small business consumers will again be looking at higher premiums in the future.

Sincerely

Jeff Subra

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