I owe how much? Surprise medical bills a growing headache for consumers

Written by: Monica Robins and Susan Moses, May 11, 2016

OHIO - "It's a rip off," said Abel Foster of the health care loophole known as "surprise billing".

He's asked us to conceal his identity, but he could be any one of us who has ever opened a medical bill, only to find charges we didn't expect.

Two years ago, Foster underwent neck surgery for a cervical decompression.

It's the same neck surgery that sidelined Super Bowl quarterback Peyton Manning several years ago.

And just like Manning, Foster, too, had a game plan.

But his involved researching the surgery and getting everything approved through his insurance company.

That included making sure the hospital, surgeon and anesthesiologist were all in network.

Everything went according to plan. That is, until the bill arrived.

"All my costs were covered except that there was now one additional doctor added to the bill. I didn't recognize that doctor," said Foster.

How did it happen? His surgery was performed at the OSU Wexner Medical Center.

But little did Foster know another surgeon was assigned to monitor his surgery from a remote site all the way in New York City. And that doctor was out of network.

"All that doctor was doing was sitting in a room in New York, looking at monitors, monitoring the nerve impulse in my spine. What was this doctor charging me $1,800" Abel said, sharing his frustration.

Misery loves company and Foster isn't alone.

One out of every 3 Americans has received a surprise medical bill in the last two years, according to the Consumer Union. Twenty four states have passed legislation to offer some consumer protection.

But Ohio isn't one of them.

"We should be demanding that our legislators pass a law that would hold the consumer harmless in a case where they go into a network hospital, choose a network surgeon and then get bills that they never expected," said Kathleen Gmeiner, who is the Ohio Consumers for Health Coverage Project Director.

The Universal Health Care Action Network is keeping close tabs on balance billing, and sees a ground swell among state lawmakers here.

Federal Lawmakers are moving, too, and introduced a bill last October in the House to make it illegal.

Texas Senator Lloyd Doggett authored the bill.

"It would require notice to patients in advance of these out of network surprise charges -- that they might face - so they know what they'll have to pay of out of pocket. If that can't be done, treat them if they were the same as in-network."

Armed with the work he did before-hand, Abel fought the charges -- and won. He didn't pay a dime.

His neck is now pain-free - from the surgery - and the hassle with medical billing.

"I'm not a physician. I'm not a lawyer. All I did was a little homework," Foster said.

Foster's homework saved him from paying $1,800.

Here are steps we can all take to avoid surprise medical bills:

1. Before the procedure get a list of all staff treating you, including any doctors, surgeons and anesthesiologists
2. Get written confirmation they will take your insurance.
3. Ask for an itemized bill after the procedure and look for any services you were billed for but did not receive. If find the bill tough to decipher, call the hospital for explanation.

Resources:

- Patient Advocate Foundation
- Families USA Health Action Network
- Information about Ohio's Balance Billing Laws

Ohio Protection:

This January, Ohioans gained more protection from surprise medical bills. The rule, put in place by the Ohio Department of Insurance, requires health insurance companies to update their directories of health care providers at least every three months.

And if a doctor or other health care provider leaves the network, the insurance company must update its directory within 15 days and notify consumers who have received health care services from that provider in the previous year.

Insurance carriers must also, upon request, give consumers non-binding estimates of how much it will cost to pay for care from an out-of-network provider.

And that's not all.

Carriers must also indicate in their directories whether a doctor or other provider is accepting new patients, plus geographic locations of where a doctor or another provider's care would be considered in-network.