



PRESS RELEASE

Thursday, August 11, 2016

LEGISLATION TO STOP SURPRISE MEDICAL BILLS HEADS TO SENATE FLOOR VOTE

- *On a 5-0, the Senate Appropriations Committee Passes AB 72 (Bonta, et al) to Prevent Surprise Medical Bills So Californians Aren't Charged with Unfair Out-of-Network Costs When Going to In-Network Hospitals & Facilities.*
- *Heavily-Lobbied Legislation Now Heads for a Vote on the Senate Floor. A Similar Measure Nearly Passed Last Year; AB72 Needs to Pass by August 31st to Protect California Families from Another Year of Surprise Medical Bills.*

SACRAMENTO, CA—Today, the Senate Appropriations committee gave the green light to a bipartisan proposal to protect patients from surprise medical bills, AB 72 (Bonta, Bonilla, Dahle, Gonzalez, Maienschein, Santiago, and Wood). Labor and consumer groups strongly support the bill which would protect patients from unexpected bills when they go to an in-network hospital or medical facility.

"When patients follow the rules of their plan and goes to an in-network hospital or other facility, they should not be hit with a surprise bill of hundreds or thousands of dollars from a out-of-network doctor they did not meet or ever choose," said Anthony Wright executive director for Health Access California, the California's health consumer advocacy coalition, and co-sponsor of AB72 with the California Labor Federation. "These unexpected bills are not just unfair, they can mean fiscal calamity for many low-income families."

AB 72 seeks to resolve the logjam around last year's attempt at a solution, AB 533 which was headed to the Governor's desk but stalled by just three votes on the last night of session after heavy lobbying by some physician organizations. If AB72 isn't passed by the end of August, California consumers will continue to receive surprise medical bills of hundreds or thousands of dollars from out-of-network providers after using in-network medical facilities. After months of negotiations among lawmakers, advocates, and insurers, the revised legislation will include even stronger consumer protections to stop these surprise bills while paying doctors 125% of Medicare rather than 100% of Medicare as proposed in AB533, the previous iteration of the bill.



"Consumers should not get stuck unfairly in the middle of these reimbursement fights between insurers and physicians," continued Wright. "With this new, improved, and bipartisan proposal, we hope that real relief for California patients is on the way. We can't allow lobbyists to again stall these critical patient protections, and put California families' finances in jeopardy."

The bill now goes to the Senate floor for a vote. All legislation must be passed by the legislature and sent to the Governor by midnight on August 31st.

Reference materials:

[AB 72 fact sheet](#)

[Surprise medical bills consumer stories](#)

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About Health Access California

Health Access California is the statewide health care consumer advocacy coalition, advocating for the goal of quality, affordable health care for all Californians. We represent consumers in the legislature, at administrative and regulatory agencies, in the media, and at public forums. For more information, please visit www.health-access.org.

