



## Balance Billing

Health insurers have reduced reimbursements unilaterally on non-contracted healthcare providers providing emergency services for patients in an attempt to lower costs. Providers, in turn, have attempted to recoup these losses by billing the patient for the balance owed. In a growing number of states, this “balance billing” process has been deemed illegal – thus preventing the provider from recovering his or her usual and customary fees.

In states where the law is silent on the practice of balance billing or considers such practice illegal, significant disputes have occurred and failure to obtain adequate reimbursement is commonplace. This has resulted in a disincentive for providers, such as oral and maxillofacial surgeons, to take trauma call where they are forced to accept all patients and reduced reimbursement. In non-emergency situations, non-contracted providers also may be forced to accept lower reimbursement if they accept patients who have gone outside of their insurers’ provider panel. This leaves practitioners to bear an unreasonable portion of the financial burden of patient care and, in states where balance billing is illegal, leaves patients unaccountable for knowingly selecting a provider outside of their insurers’ provider panel. Such situations may dissuade providers from accepting out-of-network patients and may bring about access-to-care problems in areas where few other providers exist.

The American Association of Oral and Maxillofacial Surgeons (AAOMS) supports legislation that would require insurers in emergency situations to pay an out-of-network provider in accordance with the provider’s usual and customary fee or allow balance billing. AAOMS also supports legislation that would allow providers in non-emergency cases to bill out-of-network patients for any fees not fully reimbursed by the insurer.

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