

End Georgia's Surprise Coverage Gap

A growing number of Georgia patients are receiving surprise medical bills for care they thought was covered by insurance. Why? Insurance companies are forcing doctors and providers out of their narrow and tiered networks. This coverage gap leaves patients without options and leads to surprise bills, often in emergencies when people need insurance the most.



Georgia Insurance Companies are narrowing their networks, creating coverage gaps for patients.



One large Georgia insurance company is refusing to cover emergency visits by retroactively denying claims.



Insurance companies are refusing to negotiate in good faith, leaving patients stuck in the middle with the status quo.

Georgia patients can't continue to bear the cost of inaction. More than 22% of Georgia residents have medical debt in collections, and healthcare costs are the number one reason people file for bankruptcy. While the status quo is easier--and more profitable--for insurers, Georgians need a comprehensive solution that will protect them and ensure they have access to needed medical care.

SB 359: A Comprehensive Solution

Lawmakers have introduced SB 359, a comprehensive solution that takes patients out of the middle, boosts transparency, and ends surprise billing, while ensuring long-term access to quality care. The bill incentivizes insurers to negotiate in good faith with physicians and would result in adequate healthcare networks for patients.

SB 359 is a Comprehensive Solution That Will:



Ensure patients will not be financially penalized for emergency out-of-network care.



Provide an appropriate and fair reimbursement standard for emergency services by leveraging an independently recognized and verified charge-based database.



Require enhanced transparency so patients can determine their provider's network status and cost of care.



Outline strong penalties for insurance companies and physicians that violate the law.



Establish a transparent and appropriate dispute resolution process for those situations where an unexpected event arises during out-of-network, non-emergency care resulting in a surprise bill to the patient.

End the Surprise Insurance Gap is a growing alliance of physicians associations, patient advocates and consumer groups fighting to improve patient protections, promote transparency and increase access to care. We represent more than 70,000 physicians caring for over 50 million patients in more than 3,000 facilities nationwide.