

## End Tennessee's Surprise Coverage Gap

A growing number of Tennessee 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, tiered networks, leaving patients uncovered, often in emergencies, when people need insurance most.



**Tennessee insurance companies are narrowing their networks, creating coverage gaps.**



**24% of Tennessee residents have medical debt in collections.**



**Insurance companies are working behind the scenes to pass legislation that protects their profits, not their patients.**

Insurance companies want to keep the status quo, charging patients more for less coverage. But patients and doctors need a fair solution. Without one, insurance networks will continue to cost more and cover less, and the unsustainable business environment will force Tennessee doctors out of business. This will create an access-to-care crisis in Tennessee, where 36% of residents live in a rural county and the state leads the nation with the most rural hospital closures.

### A Comprehensive Solution

Working together, doctors and patients can help Tennessee legislators bring about a better, fairer, comprehensive solution that takes patients out of the middle, boosts transparency, and effectively ends surprise billing while ensuring long-term access to quality healthcare.

#### Tennessee Should Enact Common-sense Legislation That:



Ensures patients will not be financially penalized for unexpected out-of-network care.



Creates an appropriate and fair standard for out-of-network services using a reimbursement schedule connected to an independently recognized and verified charge-based database.



Requires transparency from insurers, including through making provider directories accurate, up to date and easily accessible for both patients and physicians.



Prohibits insurers from providing false, misleading or confusing information about coverage.



Improves insurance network adequacy to protect patients from exploitative business practices and ensure greater access to care.



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

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 65,000 physicians caring for over 50 million patients in more than 3,000 facilities nationwide.