

How Employee Advocacy Helps With Surprise Medical Bills

by Corporate Synergies' Experts

Surprise medical bills have always been a major pain point for employees and employers. Before the No Surprises Act (NSA) took effect in January 2022, 1 in 5 insured adults faced unexpected charges, often totaling thousands of dollars according to one U.S. News report. These charges create financial stress and administrative headaches for HR teams, who often receive distressed calls from employees when a surprise medical bill is due. Employee advocacy provides essential support for HR and staff.

What Is the No Surprises Act?

The No Surprises Act (NSA) is a federal law designed to protect patients from unexpected medical bills in situations where they have little or no control over provider choice. It bans surprise bills for emergency services; bans out-of-network charges for certain non-emergency services at in-network facilities in all situations; and bans other out-of-network charges without advance notices. It also requires good faith estimates for uninsured or self-pay patients and providers must disclose patient protections and follow strict billing and dispute resolution rules.

In the three years since NSA became law, one study suggests that there has been an 18 % decline in out-of-pocket spending for adults with private insurance in states newly covered by NSA protections. Families also saved an average of \$600 in yearly out-of-pocket expenses. However, premiums have not decreased and the number of Americans spending 10% or more of their income on healthcare has not improved. This situation highlights ongoing concerns for employers and their staff.

Why Employee Advocacy Matters

A strong employee advocacy program can help plan participants navigate a high medical bill and work to ensure that a participant only pays what they should.

These specialized benefits advocates can also help participants review their insurance plan before a procedure to determine what the plan will pay. Figuring out who is and who isn't in network ahead of time is critical to keeping the cost down.

Advocates can “pre-educate” employees on what care is covered and which facilities will take their insurance. They can help employees get an estimate of the cost of medical treatment before it's delivered. Many carriers have online cost estimator tools where employees can see how much they'll be responsible for. Doctors can also provide an estimate and detail the specifics of a procedure, as well as answer patient questions ahead of time. It's a good idea for the employee to gather written cost estimates in advance.

If the bill comes in much higher than expected, the benefits advocate can investigate. The bill could be coded improperly. The insurance payment may not have been credited appropriately, or the bill itself may run afoul of the NSA. Benefits advocates research a surprise medical bill and cut through the red tape to get answers from carriers and providers faster than employees. Employee advocacy teams often have a direct line to carrier decision-makers and providers that an employee wouldn't have access to.

The healthcare landscape continues to get more complex, all while putting more responsibility on individuals to understand their insurance options and make educated decisions. Employee advocacy can turn insurance users into savvy insurance consumers, long before they pass through the sliding doors of an emergency room.

So while the No Surprises Act has significantly reduced surprise medical bills, affordability challenges persist. Employers should focus on educating their employees, and leveraging advocacy programs to ensure a smooth benefits experience.

Citations:

[BMJ](#), "Patient healthcare spending after the No Surprises Act"
[Kaiser Family Foundation](#), "Surprise Medical Bills are Ending, But Controversy Continues"
[U.S. News & World Report](#), "New Law Curbed 'Surprise' Medical Bills for Patients"

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