AUSTIN, TEXAS—Texans are facing costly "surprise" medical bills when they visit emergency rooms – even at hospitals that participate in their insurance plans – according to a new report from the Center for Public Policy Priorities (CPPP). The report comes just ahead of today's Texas Senate State Affairs Committee hearing on medical price transparency, and it blames regulatory loopholes for these surprise bills.

"Too many Texans receive expensive medical bills after visits to emergency rooms they think are covered by their insurance plans," said Stacey Pogue, Senior Policy Analyst at the Center for Public Policy Priorities. "Most of us will end up in an emergency room at some point, and lawmakers should close loopholes that leave Texans vulnerable to surprise medical bills."

The surprise bills, or "balance bills" as they are known, occur when out-of-network doctors treat patients at in-network hospitals. Patients receive a bill for the (often large) balance charged by the hospital physician because that individual doctor is not in the network for that person's insurance policy.

The report, Surprise Medical Bills Take Advantage of Texans, analyzes data from Texas’ three most popular insurers: Blue Cross Blue Shield, Humana and United Healthcare. According to the analysis, it is common for Texans who receive care in an in-network emergency room to receive treatment from an out-of-network doctor. There are some hospitals, in fact, where zero emergency room doctors at the facility are in-network under the popular insurance plans accepted by that hospital.

The report outlines several policy recommendations that could improve medical price transparency. These include protecting consumers in emergencies, when they can’t select their provider, by guaranteeing that they receive in-network rates at in-network hospitals.

To speak with concerned Texans who have received surprisingly high bills, or for more information, please contact bernstein@cppp.org.