



## **EDPMA ACTION ALERT: Massachusetts Out-of-Network (OON) Reimbursement**

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The Massachusetts House and Senate have passed different versions of its funding bill and legislators are currently negotiating a final bill which must pass before the end of the month. The Senate version of the appropriations bill (SB2076) includes problematic language: Section 184 would cap reimbursement from private insurers for emergency care at 80th percentile of a database. Therefore, insurers can pay any amount under this – even an unreasonably low amount. Section 98 would require physicians to inform patients of the network status of physicians to whom they refer patients. Last week, EDPMA asked the legislators charged with negotiating a final bill to remove or amend these provisions (EDPMA's letter is available [here](#)). Please call these legislators and reiterate this request. Contact information is at the bottom of this alert.

### **Talking Points for Your Telephone Calls and Emails:**

- Tell the legislator or health staffer your name, your group or company name, the Massachusetts address linked to the business, which Massachusetts hospitals you serve, and how many Massachusetts patients your group/company serves each year.
- **Explain that you are calling to ask the conferees for the Appropriations bill to remove or amend Sections 184 and 98 in the Senate version (SB2076).**
- Section 184 in the Senate bill would cap the amount of money an insurer pays for emergency care. So, insurers could pay any amount under this - **even an unreasonably low amount that has no relation to usual and customary reimbursement**. Legislation should set a MINIMUM payment, not a maximum. The Obama Administration is on record saying that the patient protections in the Affordable Care Act will not work unless insurers are required to pay a reasonable amount for emergency care. So, we ask you to remove this cap and replace it with a payment FLOOR. Insurer's must pay, at minimum, 80th percentile of an independent transparent database. This minimum payment standard has been established in the State of Connecticut and is working well.
- Section 98, which requires physicians to disclose the network status of physicians to whom they refer patients, should be removed or amended to

exclude emergency physicians. Even if the emergency physician were able to comply and spend the time looking up this information, emergency care would be delayed and wait times in Emergency Departments would likely skyrocket.

Here is a list of members of the conference committee and their phone and email addresses. Any calls or emails are appreciated:

First Name	Last Name	Party	House Phone	Legislative Email
Brian	Dempsey	D	617-722-2990	<a href="mailto:Brian.Dempsey@mahouse.gov">Brian.Dempsey@mahouse.gov</a>
Stephen	Kulik	D	617-722-2380	<a href="mailto:Stephen.Kulik@mahouse.gov">Stephen.Kulik@mahouse.gov</a>
Todd	Smola	R	617-722-2100	<a href="mailto:Todd.Smola@mahouse.gov">Todd.Smola@mahouse.gov</a>
Karen	Spilka	D	617-722-1640	<a href="mailto:Karen.Spilka@masenate.gov">Karen.Spilka@masenate.gov</a>
Sal	DiDomenico	D	617-722-1650	<a href="mailto:Sal.DiDomenico@masenate.gov">Sal.DiDomenico@masenate.gov</a>
Vinny	deMacedo	R	617-722-1330	<a href="mailto:Vinny.deMacedo@masenate.gov">Vinny.deMacedo@masenate.gov</a>

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