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Title: Third Party Payer Responsibilities

Introduced by: Domenic Federico, MD, for the Kent County Delegation

Original Author: Patrick J. Droste, MD

Referred to: Reference Committee A

House Action: AMEND

Whereas, insurance companies and third party payers have a long standing history of sending reimbursement checks directly to their client, not to the physician providing the services, and

Whereas, federal health care reform changes have caused many patients to choose health care coverage with high deductibles and increased “out-of-pocket” obligations in order to afford their monthly premium, and

Whereas, many patients do not understand the concept of “high deductible” and are not aware of their responsibility to pay for services “out-of-pocket” until their deductible requirements are fulfilled, and

Whereas, many insurance companies do not inform or fail to reinforce the deductible policy with the patient, resulting in unpleasant encounters in the office, and

Whereas, third party payers seldom assist physicians and other health care providers in trying to obtain reimbursement for unpaid services; therefore be it

RESOLVED: That MSMS strongly encourage third party payers to provide a summary of their insurance benefits outlining, up-front, deductibles, co-pays, and preventative coverage in simple terms that take into account recommended reading grade levels and that is provided in the patient’s primary language within 30 days of policy activation.

WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE