



KANSAS INSURANCE DEPARTMENT

Vicki Schmidt, Commissioner

FOR IMMEDIATE RELEASE
February 18, 2022

Contact: Tom Treacy
Thomas.Treacy@ks.gov

Budget-busting emergency medical bills are on the decline

Topeka, Kan. – During a medical emergency the sizable cost differential between in-and-out-of-network providers takes a backseat to the immediate concerns of the patient’s health. A weekend warrior cut using their saw; a student athlete hurt on the field; a farmer injured during harvest – these are all accidents that could require emergency medical assistance.

Prior to the January 1, 2022, rollout of the “No Surprises Act,” if an individual received medical services unknowingly performed outside their health plan’s provider network, the patient would have likely been financially responsible for an invoice often totaling tens, sometimes hundreds, of thousands of dollars.

The No Surprises Act financially shields individuals who, due to medical or logistical situations beyond their control, unknowingly received healthcare services by higher priced, out-of-network providers. Hospitals, ambulatory surgical centers, hospital outpatient departments and air ambulances can now only bill their patients for emergency services, and in some cases non-emergency services, at the lower in-network price. This change in the practice of healthcare billing will, in most cases, financially remove patients from expensive out-of-network pricing disputes, often referred to as “surprised billing.”

If Kansans have questions or concerns about a medical bill and whether it was properly billed, please visit the Department online at **insurance.kansas.gov/complaint** or call **800-432-2484**.

###