

# U.S. Rep. Moore: Introduce legislation to provide patients a continuity of care for treatment of serious and complex conditions

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**Congresswoman Moore** and **Congressman Schweikert** introduced *HR 5816, the Continuing Care for Patients Act of 2020*, legislation to ensure patients can continue to receive treatment if contractual agreements between their providers and health insurance change and their provider is no longer in network. This legislation has been included in a larger bipartisan, package (*Consumer Protections Against Surprise Medical Bills Act*) unveiled by the House Ways and Means committee to address surprise billing. In response, the Members released the following statement:

“As a cancer survivor, I know how important it is to have sustained access to high quality health care and providers you trust and have worked with can be to having good health outcomes. I am pleased to join my colleague from Arizona, Congressman Schweikert, in introducing the Continuing Care for Patients Act as part of bipartisan committee effort to address surprise billing. For too long, patients have been squeezed by hospitals, physicians and insurers for out-of-network charges. Balanced billing, or surprise medical bills, as they are known colloquially, undercuts our health care system and harms our society’s wellbeing. I applaud the Committee for finding a bipartisan solution to the surprise billing crisis by protecting patients from the financial harm they face when they are treated by an out-of-network physician or in an out-of-network hospital.

Additionally, while health care can already be costly, especially for those with serious and complex conditions it can be disruptive and even costlier when, through

no fault of their own, the agreement between their health insurer and their health provider changes. The Continuing Care for Patients Act helps ensure that patients with serious conditions are able to transition from service providers smoothly, if treatment lasts longer than 90 days after the network change. In cases where a patient requires treatment for less than 90 days after the network change, this bill allows the patient to retain their same provider.

“Receiving long-term treatment already takes a financial, emotional and physical toll. I know this on a personal level. This will ensure that patients already facing difficult health battles can know they won’t have to switch providers or facilities in the middle of that night or for others, create a transition period to allow them to more easily transfer to another provider that is covered by their health insurance without facing unexpected costs or delays.”

“It can be a terrifying situation for patients when suddenly and unexpectedly they have their previous provider go out-of-network,” **said Congressman Schweikert.** “Be it for a pregnancy, or an acute condition, this bill will allow patients to finish their course of care and give them time to find a new provider. This is an important fix to be included within the surprise billing package, and I am proud to be a part of the effort to provide much needed stability for Americans within the healthcare system.”

## **Background**

*HR 5816, the Continuing Care for Patients Act*, provides protections so that patients in the middle of a course of treatment won’t be left in the lurch if their doctor or hospital is terminated from their health plan’s network. Under this bill, patients must be notified on a timely basis if their doctor or hospital is terminated from their health plan’s network and of their right to elect to continue to see the same provider for 90 days (or until the treatment is complete, if that occurs before the 90 day period elapses). If the patient elects continued transitional care, the patient maintains the same plan or coverage benefits through the transition period and is subject to the same terms and conditions.