



March 22, 2023

TO: House Health Care Committee
FR: Maribeth Guarino, Health Care Advocate, Oregon State Public Interest Research Group (OSPIRG)
RE: In Support of HB 3320 and Charity Care Requirements

OSPIRG is a statewide public interest organization representing thousands of Oregonians, and we support HB 3320.

Federal law requires hospitals to post their financial aid policies and provide time for patients to apply for that aid after receiving a medical bill. Oregon law requires nonprofit hospitals to screen patients for this financial assistance, or charity care, before sending a bill to debt collections. However, in September, a [New York Times investigation](#) revealed that nonprofit hospitals were actively attempting to collect payments from patients in Washington, California, and Oregon who would qualify for charity care. A recent [report from Dollar For](#), a nonprofit that helps patients reduce or eliminate medical debt based on financial assistance policies and laws, indicated that “4 in 9 patients sued for medical debt [are] entitled to have their bill written off.”

Even when patients know about charity care policies, it’s difficult for them to apply. Though the only information required for financial assistance applications is income, applications have been returned to patients as incomplete for not filling out optional sections of the application regarding assets like a savings account, stocks, other property and investments, or monthly household expenses. Many hospitals also reject attempts to submit applications electronically.

This is unacceptable. Patients should be able to go to the doctor without fear of a crippling medical bill. One woman I spoke to just yesterday said that despite being on a payment plan, her medical debt has caused her to wipe out her savings, and she refuses to get dental care and other treatment for new ailments that have arisen in the last few months because she is terrified of adding to that financial burden.

Other Oregonians suffer when those debts go to collections despite qualifying for financial assistance. Creditors, lawyers, and other sophisticated entities who have time and resources pose very real threats to patients’ livelihoods and wellbeing when they employ harassment tactics, unclear or ineffective notices of debt collections, and attempts to collect the wrong amount of debt. In all honesty, consumers don’t stand a chance in the face of hospital policies and procedures that seem designed to give patients the runaround until they pay an undue bill or are handed over to a debt collector.

In order to reduce wrongful medical debt and collections practices, HB 3320 will require screening patients for financial assistance before a bill is ever sent. It also will remove the burden on patients to find, understand, and attempt to apply for financial assistance. For these reasons, I urge you to support HB 3320.