

PRUDENT LAYPERSON FACT SHEET

Background

Anthem Blue Cross Blue Shield (BCBS) has announced it will not pay for emergency visits in Georgia, Kentucky and Missouri, based on a secret list of diagnoses (nearly 2,000 in Missouri from a list that ACEP was able to obtain). Other insurance companies could follow. Anthem has been warning patients it will deny coverage after the fact if they determine it was not a medical emergency even if the patient thought it was an emergency.

ACEP says this action violates the “prudent layperson standard,” which is part of federal law, including the Affordable Care Act, and 47 state laws. The standard requires health insurance companies to pay for emergency care based on a patient’s symptoms, not the final diagnosis.

In Georgia, a patient fell on a previously injured knee. She tried to go to an urgent care center but was told they didn’t take Anthem insurance. So she went to the emergency room. Anthem refused to cover the visit, and she is now responsible for a \$2,000 bill.

In Louisville, Kentucky, a patient, with history of chronic IBS and diverticulitis, could not keep anything down, had constant diarrhea, fever and severe cramps, and then got dehydrated. His primary care physician was unable to see him, and his gastroenterologist told him to go to the emergency room. In the emergency department, the patient was given a CT scan and some medications. He was later informed by Anthem that they considered his visit an “abuse of emergency services” and they refused to pay. After multiple phone calls, the patient obtained a letter from his gastroenterologist. Finally, after 7 months, Anthem paid the bill, saying "we are making a one-time exception"

- **Health insurers are disagreeing with your decision to visit the emergency department — and refusing to pay.**

—Anthem has developed a secret list of diagnoses (nearly 2,000 diagnoses in Missouri) that they will not pay for, such as chest pain associated with breathing, blood in the urine and severe headache with vision issues, even if the patient thinks it is an emergency.

—More than two-thirds of Americans oppose Anthem’s policy, according to a new Morning Consult poll.

—More than 8 in 10 (83 percent) said that if a doctor orders a medical test, the patient’s insurance company should pay for it.

—One-fifth of those polled said their insurance companies refused to cover a visit they’ve made to a doctor, or hospital, or other medical service in the past 2 years.

—Health insurance companies have a long history of denying care for emergency patients and using scare tactics to prevent people from seeking emergency care.

- **Anthem’s policy violates the law.**

—The “Prudent Layperson Standard” means that insurance companies must cover emergency care based on a patient’s symptoms, not the final diagnosis. This standard is codified in federal law, including the Affordable Care Act, and in 47 states.

—Eight in 10 people (79 percent), once they understood what the prudent layperson standard is, indicated they supported it.

—Six in 10 people said that insurance companies are interfering with patient/doctor relationships.

- **Anthem's policy is dangerous for patients.**

—Four in 10 (43 percent) reported they delayed or avoided seeking emergency care out of fear their health insurance company would not pay for the visit. Nearly half of them had their medical conditions worsen as a result.

—People with identical symptoms – such as severe headache with vision issues may have a life-threatening medical condition, such as a stroke, or a non-urgent medical condition, such as a migraine

- **Patients should NOT diagnose themselves out of fear their insurance companies won't cover the visit.**

—Burning chest pain, for example, may be heartburn, but it can also signal a heart attack. We can't possibly expect a non-medical person to know the difference.

—Symptoms of emergencies and non-emergencies overlap (JAMA 2013). If a triage nurse were to redirect patients away from the emergency department based on what could be *non-emergent* complaints, a significant percentage of those would actually be having medical emergencies.

—It's not your job to know the difference and you shouldn't risk your life trying to tough it out because your insurance company won't cover you.

- **If you think you have the SYMPTOMS of a medical emergency, seek emergency care.**

Poll Methodology:

This survey was conducted by Morning Consult with 2,201 adults as a national tracking poll on September 5-8, 2017, on behalf of the American College of Emergency Physicians. There is a margin of error of ± 2 percent. For complete poll results, please click [here](#) or contact Mike Baldyga at mbaldyga@acep.org.