

# Insurer Abuse Is Endangering Patients and Providers

## EXPOSED: The “Shared Savings” Kickback Scheme

Recently, *The New York Times* published a [blockbuster exposé](#) detailing how some corporate health insurers are making billions of dollars in additional profit while exposing employers and patients to costly surprise bills. Providing shocking examples, the *Times* article underscores what many have already concluded: insurer abuse since implementation of the *No Surprises Act* (NSA) is contrary to anything passed or intended by Congress.

The New York Times

*Insurers Reap Hidden Fees by Slashing Payments. You May Get the Bill.*

### The New York Times is right – and Documented Evidence Proves It

As detailed in prior [Impact Alerts](#), some insurers have been manipulating the *No Surprises Act* to accelerate their “Shared Savings” Kickback Scheme. Specifically, they are [slashing](#) payments and [terminating](#) provider contracts, resulting in a [sharp rise](#) in out-of-network care. Why would they do this? **Because pushing care out-of-network enables insurers to make even bigger profits.** Here’s how they’re pulling off this scheme:

- Insurers push care out-of-network, where rates have historically been higher than discounted in-network rates. *This deprives patients of access to in-network care and results in higher out-of-pocket costs.*
- Insurers tell employers costs will go up because the care their members need is no longer in-network. *This obscures the fact, however, that the insurers rarely, if ever, pay the out-of-network provider charge.*
- Insurers then charge employers a kickback fee ranging from **30-50%** of fake “savings” the insurers claim by reducing out-of-network rates – *which insurers never intended or expected to pay in the first place!*

### The “Shared Savings” Kickback Fee Must Be Stopped

The end result is corporate health insurers are using this scheme to keep providers out-of-network and low-ball claims in order to line their pockets with billions in additional profits. This destructive practice reduces access to in-network care, exposing patients to costly surprise bills, increasing employer expenses, and causing already [struggling](#) medical practices to lose direct access to patients and fair payment.

**Congress, immediate action is needed to protect the *No Surprises Act* from insurer abuse. Please:**

- ***Investigate corporate health insurers’ “Shared Savings” Kickback Scheme***
- ***Call on the Administration to Stop the “Shared Savings” Rebate Scam***