



January 24, 2024

Representative Greg Murphy, MD

U.S. House of Representatives
407 Cannon House Office Building
Washington, D.C. 20515

Representative Ami Bera, MD

U.S. House of Representatives
172 Cannon House Office Building
Washington, D.C. 20515

Representative Derek Kilmer

U.S. House of Representatives
1226 Longworth House Office Building
Washington, D.C. 20515

Representative Morgan Griffith

U.S. House of Representatives
2202 Rayburn House Office Building
Washington, D.C. 20515

Representative Mariannette Miller-Meeks, MD

U.S. House of Representatives
1034 Longworth House Office Building
Washington, D.C. 20515

Representative Kim Schrier, MD

U.S. House of Representatives
1110 Longworth House Office Building
Washington, D.C. 20515

Subject: Support for the No Fees for EFTs Act

Dear Representatives Murphy, Griffith, Bera, Miller-Meeks, Kilmer, and Schrier,

On behalf of the Regulatory Relief Coalition ([RRC](#)), a coalition of national physician specialty organizations seeking to reduce regulatory burdens that interfere with patient care, we are pleased to support the *No Fees for EFTs Act* (H.R. 6487). The RRC applauds your leadership on this legislation as it would protect consumers from fees charged to their providers for use of more efficient payment processing technology.

The *No Fees for EFTs Act* would prohibit health plans from imposing fees on health care providers for electronic funds transfers (EFTs) and health care payments and remittance advice transactions. Under the Affordable Care Act, insurance carriers must offer providers the ability to receive reimbursements electronically. However, many insurers partner with third-party vendors that charge between two to five percent per EFT. According to the Medical Group Management Association (MGMA), nearly 60 percent of medical groups report being charged fees they did not agree to by insurers to receive electronic payments.

If a medical practice chooses not to use EFTs, their only other options are virtual credit cards, including fees, or checks by mail. Many providers report fees of up to \$1,000,000 annually, and one in five report that MA plans are also charging EFT fees. These financial burdens are ultimately passed down to the patient as medical practices — particularly private practices contending with record-high inflation — are fighting to remain open. The risks of closing due to unnecessary fees for EFTs can lead to a decrease in timely access to care, negatively impacting short and long-term health outcomes, according to MGMA.

Reps. Murphy, Griffith, Bera, Miller-Meeks, Kilmer and Schrier
RRC Letter re No Fees for EFTs Act
December 15
Page 2 of 2

Thank you for introducing this important legislation to reduce regulatory burdens imposed by insurers. The RRC and its members stand ready to work with you to secure passage of the *No Fees for EFTs Act*. For further information, contact Peggy Tighe at Peggy.Tighe@PowersLaw.com.

Sincerely,

RRC Members & Allies

American Association of Neurological Surgeons
Congress of Neurological Surgeons
American Osteopathic Association
American College of Cardiology
American Gastroenterological Association
American Association of Orthopaedic Surgeons
American Academy of Ophthalmology
Medical Group Management Association
American Academy of Neurology
American Academy of Physical Medicine and Rehabilitation
American Academy of Dermatology Association
American College of Rheumatology
North American Spine Society
American College of Surgeons