

Physicians Should Not Pay To Get Paid

No Fees for EFTs *Support HR 6487*

Average employees don't pay a fee to receive their paycheck via direct deposit. Yet physicians are regularly subjected to such practices by health plans to receive payment for delivering health care to their patients.

Over a decade ago, the federal government established standards for paying physicians electronically via electronic funds transfers (EFTs), with the aim of increasing efficiency and saving money associated with the manual processing of paper checks. As a result, health insurers since 2012 have been required to offer EFTs to pay physicians.

The shift toward electronic payments was expected to save public and private payers, third-party administrators, hospitals, and physician practices \$3 billion to \$4.5 billion over 10 years.¹

Health plans are saving money through these standards, yet they still routinely take advantage of physician practices by charging them mandatory, percentage-based fees as a condition for receiving their payments electronically – and typically without consent. Those fees can range from 2% to 5% of a physician's payment.²

At a time when physician practices already operate on thin margins, these unfair fees act as yet another erosion of physician payment, practice viability, and ultimately patient access to care.

The bipartisan No Fees for EFTs Act (House Resolution 6487) would stop this practice by prohibiting health insurers from imposing such fees on physicians and health care providers.

Physicians should not have to pay to get paid.



**More than half
of medical practices
report being forced
to pay to receive
electronic payments
from health insurers.²**



Physicians Caring for Texans

1. [Centers for Medicare & Medicaid Services](#)

2. [Medical Group Management Association](#)