



May 31, 2022

Office of Stakeholder Management
Consumer Financial Protection Bureau
1700 G Street NW
Washington, D.C., 20552

Dear CFPB Staff,

Thank you for your email and for your ongoing engagement with ACA International. ACA is always happy to engage with the Consumer Financial Protection Bureau (CFPB) and provide information to help the agency carry out its statutory duties to enforce federal consumer financial laws to ensure that all consumers have access to markets for consumer financial products and services that are fair, transparent, and competitive.

On Tuesday, May 24, we received the below questions from the CFPB requiring a response by close of business on Tuesday, May 31.

1. How do your institutions typically share information and requirements on the availability of charity care and how is it delivered to patients?
2. What are the 'downstream' effects of charity care for patients? Does charity care impact how a patient receives additional care?
3. Who or what types of entities believe that credit reporting is a useful tool and how important is it to them?
4. Are there specific types of treatments or medications that are the focus of, or which are most impacted by, debt collectors furnishing this history to the NCRAs?
5. What types of training do your billing departments/debt collection components receive on the availability of charity care?

As you know, ACA represents approximately 2,100 members, including credit grantors, third-party collection agencies, asset buyers, attorneys, and vendor affiliates. Most ACA member debt collection companies, however, are small businesses. The questions you have posed would yield a large volume of diverse responses from our 2,100 members, especially because they work with more than 6,000 hospitals, 20,000 small-practice doctor clinics, 1 million physicians, 200,000 dentists, and 70,000 chiropractors. To garner responses representing all of these groups, it would require a formal survey and other data collection efforts to ensure ACA is accurately representing the majority of our members. As such, we will be unable to provide data-driven, and comprehensive, responses within the six days you have asked for them—especially including a holiday weekend. Since we would hope the CFPB is only interested in a data-driven response, rather than anecdotal information from a small number of stakeholders to use to formulate policies, it is critical to bring all stakeholders to the table and for the Bureau to provide transparency about what its interests are in this area.

The recent changes by the National Credit Reporting Agencies (NCRAs) are already having unintended consequences by forcing more upfront cash payments and limiting medical options for consumers, often harming those with the fewest resources and options for care. Large insurance companies are the main beneficiaries of these changes, since consumers will not be able to understand their payment obligations in a timely manner and as a result miss deadlines to submit claims. The CFPB, when urging the NCRAs to make these changes, provided no research about the benefits to the insurance companies and likely was unaware that many contracts will now work to enrich these companies, rather than provide any additional benefits to those seeking medical care.

If the CFPB had engaged in a transparent process involving those with expertise in health policy, these and other unintended harms could have been mitigated, since all stakeholders would have been able to provide data and research to inform the process. Americans pay approximately \$480 billion a year in copays and deductibles now. Yet, many of these Americans are now confused about whether they actually have to pay their medical providers because of the CFPB's rhetoric demonizing those working to ensure medical care is compensated. Critical-access hospitals and physicians, as well as other small providers such as mental telehealth services, rely on compensation to stay in business and to be able to continue to provide care. However, the message to the American public from the CFPB has been advising them not to pay their bills and misleading them to believe that anyone asking them to pay legally owed debt is a bad actor. This is very dangerous for the American health care system.

To that end, we would greatly appreciate the opportunity to meet with you in the near term to discuss the purpose of this information collection and learn about the other stakeholders involved in this process. Ultimately, in our experience, the burden of information collection from our members can be reduced if we have a better understanding of what you are looking for and why. ACA would also like to learn more about what areas of the health care sector the CFPB believes it has jurisdiction over, and what expertise CFPB staff has to develop health care related policies. We also did not see a Paperwork Reduction Act notice and would like to learn more about the scope of this information request. A transparent process that publicly outlines what the CFPB's interests are in this area, particularly explaining how they are related to consumer financial products and services, would help us better work with the Bureau to provide any material information for your efforts.

Thanks again for your outreach and please let us know when the appropriate Bureau staff might be available for a meeting on these matters.

Sincerely,

A handwritten signature in black ink, appearing to read "Scott Purcell". The signature is fluid and cursive, with the first name "Scott" written in a smaller, more compact style than the last name "Purcell".

Scott Purcell
Chief Executive Officer