His \$109K Heart Attack Bill Is Now Down To \$332 After NPR Told His Story



Drew Calver, a high school history teacher and swim coach in Austin, Texas, had a heart attack at his home on April 2, 2017. A neighbor rushed him to the nearby emergency room at St. David's Medical Center, which wasn't in the school district's health plan.

Callie Richmond/KHN

A Texas hospital that charged a teacher \$108,951 for care after a 2017 heart attack told the patient Thursday it would slash the bill to \$332.29 — but not before a story about the huge charge sparked a national conversation over what should be done to combat surprise medical bills that afflict a growing number of Americans.

The story of Drew Calver was first reported by NPR and Kaiser Health News on Monday as part of the "Bill of the Month" series, which examines U.S. health care prices and the troubles patients run up against in the \$3.5 trillion industry.

In Calver's case, the 44-year-old father of two had suffered a serious heart attack in April 2017. A neighbour rushed Calver to the nearest emergency room, which happened to be an out-of-network hospital under his school district health plan. His insurance paid the hospital nearly \$56,000 for his four-day hospitalization and the procedures to clear his blocked artery. But the hospital, St. David's Medical Center in Austin, wasn't satisfied with that amount and went after within hours of the story's airing on the radio and publishing online, the hospital offered to waive nearly the entire bill and charge Calver \$782.29 instead.the high school history teacher and swim coach for an additional \$109,000. It's a practice known as "balance billing." By Thursday, St. David's lowered the amount it said Calver still owed even further. Calver says he paid the final \$332.29 bill over the phone, eager to put this stressful saga behind him. It's a relief, he says, that his family no longer faces a six-figure bill and threatening letters from the hospital's debt collector. But he worries about other patients hit with unjust medical bills — of \$10,000 or \$20,000, say — who don't catch the media's attention.

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He and his wife, Erin, say they were encouraged by the outpouring of support and attention they received after the story aired. Drew Calver gave local TV interviews after teaching class and fielded numerous calls from other national media asking about his experience. Just after paying off his hospital bill, Calver walked to the school cafeteria Thursday to grab lunch. One of the lunchroom workers approached him and shared that she, too, was facing a huge medical bill from the same Austin hospital. Calver says he plans to follow up with the woman and assist her in any way he can. "This is the next way I can be of help to others," he says.

The hospital system, St. David's HealthCare, continues to defend its handling of Calver's bill, saying it "did everything right in this particular situation." The company also points out that it informed the Calvers on several occasions that they could apply for a discount through a financial assistance program based on their household income.

Calver says he didn't fill out the financial assistance paperwork earlier because he didn't feel he owed the \$108,951 and had been contesting the validity of the charges all along.

His health plan said the \$55,840 it paid the hospital should have satisfied the hospital's claim. And Calver was already paying \$1,400 as coinsurance, which was the out-of-pocket amount calculated by his health plan. Nearly all the \$109,000 bill that St. David's sent Calver — the patient — was on top of all that.HCA Healthcare, the largest for-profit hospital chain in the country, and two nonprofit foundations own St. David's.

The chief executive of St. David's HealthCare, <u>C. David Huffstutler</u>, sent a memo Monday addressed to his board of governors about Calver's story. An employee at St. David's shared the memo with Kaiser Health News. When contacted by KHN, the hospital didn't dispute the memo's accuracy "I realize this is not the type of coverage any of us want for St. David's HealthCare," Huffstutler wrote in the <u>Aug. 27 memo</u>. "With this story, we had a number of circumstances that made it difficult to neutralize the coverage — a monthly news segment that seeks to empower patients to challenge their medical bills; a gap in the system that is affecting patients ... and, a compelling patient story. "Huffstutler also described the hospital's charges of \$165,000 as "reasonable and customary." He said that the school district and its health plan administrator, Aetna, chose to offer a narrow network plan that "can potentially place a heavy financial burden on the patient."

Consumer advocates say the hospital should have erased the bill completely after putting the family through so much stress for months.

The drastic reduction in the bill "shows that these hospital numbers are just made up," says <u>Bonnie Sheeren</u>, who runs Houston Health Advocacy and assists consumers with their medical bills. "It should be a zero balance and the hospital should pay for therapy sessions to help this family recover from the billing ordeal. "Several states have passed laws or introduced programs to help shield patients from surprise medical bills, particularly those stemming from emergencies.

But those state protections don't apply to many U.S. workers because they get their health coverage through employers that are self-insured — meaning the employers pay medical claims out of their own funds. (Federal law, which governs most of these health plans, does not include such protections.)

A Texas congressman, Democratic Rep. Lloyd Doggett, heard Calver's story on the radio Monday and immediately wrote the family a letter offering his support. Doggett was once a student at the high school where Calver teaches. Coincidentally, the lawmaker proposed legislation last year aimed at limiting surprise billing for patients, but he says it hasn't received a hearing in the current Congress.

"This is a nationwide problem and we need a nationwide solution," Doggett says. "We have a system where the patient — the most vulnerable person of all those involved — is caught between the insurer and the health care provider ... These problems are solvable." Zack Cooper, an associate professor of public health and economics at Yale University, has studied hospital billing practices extensively and says the \$109,000 bill was likely no accident. He notes that St. David's, like other hospitals, advertises short wait times for its emergency rooms to attract out-of-network patients like Calver.

Cooper says the teacher's case illustrates the need for better regulation of out-of-network billing at the state or federal level.

"The idea that a hospital would send a bill that will probably bankrupt an individual boggles the mind," Cooper says. "For me, that is emblematic of a fairly toxic culture."

"This was a remarkable story and it has done remarkable good for him," Cooper adds. "But we shouldn't be in a world where to avoid financial ruin you have to hope your story is featured in the popular press. We can do better than this."