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**To:** [CFPB\\_consumerreporting\\_rulemaking](#)  
**Subject:** FW: Consumer Reports - SBREFA  
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Dear CFPB,

We sincerely appreciate the opportunity to provide our input on the Consumer Reporting – Small Business Advisory Review Panel.

First and foremost, we wish to express our concerns regarding the language used by the CFPB. We respectfully disagree with the characterization of "inaccuracies" and patients being billed "erroneously." We kindly request that the CFPB share their evidence supporting these claims, or consider refraining from making such statements. It's essential to note that the complaint database offers a limited perspective, often lacking the medical provider's side of the story. We believe that these isolated "complaints" should not be generalized to imply widespread inaccuracies in medical billing. Such generalizations only serve to create unnecessary divisions among patients and the dedicated professionals striving to offer life-saving services.

Secondly, we would like to highlight the predictive nature and overall benefit of medical debt within the credit ecosystem, as demonstrated by the 2014 CFPB study titled "Data point: Medical debt and credit scores." We acknowledge the need for updated research post-implementation of the recent credit bureau industry changes, specifically after the removal of balances less than \$500 after March 31st. We encourage a thorough examination of alternative approaches that would address concerns from all stakeholders effectively.

In addition, we kindly request your understanding of the challenges faced by small physician offices. Timely payments are crucial for our ability to deliver quality healthcare services, and any delays can significantly impact our operations. Many medical providers operate on tight budgets, making it difficult to absorb additional costs. Any disruption in our cash flow may force us to consider options such as raising prices, requiring upfront payments, or even denying care, all of which would affect consumers negatively.

Furthermore, we believe that reporting to credit bureaus fosters fairness among patients who consistently fulfill their financial obligations. It helps distinguish between individuals facing genuine financial hardships and those neglecting their responsibilities. Without this reporting mechanism, responsible payers may bear the burden of higher healthcare costs due to the increased likelihood of bad debt.

We also want to draw attention to the broader accountability created by credit bureaus. This accountability plays a role in encouraging healthy Americans to have health insurance, ensuring timely responses from medical providers, and facilitating necessary communications, such as coordination of benefits and financial assistance paperwork. Removing this accountability could disrupt these essential processes, impacting both patients and healthcare providers negatively.

Lastly, we urge you to consider a comprehensive approach involving all stakeholders, including governmental regulators, payers, medical providers, employers, and patients. Addressing the issue holistically, rather than through fragmented regulations, would reduce complexity and prevent further inaccuracies and erroneous billing. Additionally, we kindly request that the actual proposed regulation, in line with SBREFA requirements, be shared with small businesses before proceeding further.

In conclusion, we respectfully urge you to postpone any considerations of proposed rulemaking until a new study can be conducted, using data gathered after the recent industry changes. It is crucial to weigh the secondary consequences on medical providers and the entire patient population, considering increased costs not only for those with medical debt but for everyone involved. Moreover, we emphasize the importance of accuracy in credit information and its impact on the overall cost of lending in the credit ecosystem.

Thank you for your attention and understanding.

Warm regards,

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