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To: CFPB_consumerreporting_rulemaking
Subject: Consumer Reporting – Small Business Advisory Review Panel
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Dear Consumer Financial Protection Bureau,

We appreciate the opportunity to respond to the Consumer Reporting – Small Business Advisory Review Panel. However, we find it imperative to express our deep concern and dissatisfaction with the direction the CFPB is heading. We demand immediate action and transparency regarding the proposed changes to medical debt reporting. Here are our grave concerns:

Evidence of Inaccuracies and Erroneous Billing: We vehemently dispute the CFPB's claims of widespread "inaccuracies" and "erroneous" billings. We demand concrete evidence to substantiate these allegations. The complaint database, a one-sided communication with patients, cannot be the sole basis for such damaging statements. Cease making these claims without substantial proof, as they only serve to create division and undermine the critical healthcare services we provide.

Outdated Data and Misrepresentation: The CFPB's reliance on outdated data from 2011-2013 is unacceptable. We demand an updated study reflecting the current landscape post the [March 31st](#) removal of balances less than \$500 by credit bureaus. Misrepresenting the predictiveness of medical debt is misleading and detrimental to the entire credit ecosystem. Review the alternative approach suggested in question 4 – Answer #1 to address the concerns of all stakeholders.

Impact on Small Physician Offices: Recognize the financial strain on small physician offices. Delays in payments severely affect our ability to deliver quality healthcare. Failure to address this issue promptly will force us to resort to measures such as increased prices, upfront billing, or even denying care, impacting consumers at large.

Unintended Consequences: Understand that this change, while benefiting a minority, will harm the majority. Reporting to credit bureaus ensures accountability, distinguishing between those in genuine need and those neglecting responsibilities. Without this mechanism, responsible payers will bear the brunt through increased healthcare costs, a burden they should not bear.

Secondary Impacts and Accountability: Acknowledge the ripple effects of removing accountability. It may lead to decreased health insurance rates, further complicating medical provider-patient communications. This lack of accountability hampers essential discussions on coordination of benefits, accident surveys, and financial assistance paperwork.

Comprehensive Regulation: We demand a holistic approach. The healthcare system involves multiple stakeholders, including governmental regulators, payers, medical providers, employers, and patients. Addressing only one aspect through fragmented regulations adds complexity and exacerbates inaccuracies and erroneous billings.

Transparency and Compliance with SBREFA: SBREFA mandates transparency. We insist on the immediate submission of the actual regulation with the proposed changes. Failure to provide this essential information undermines the integrity of the entire process.

Conclusion: We insist that any consideration of proposed rulemaking be halted until a new study using current data is conducted. The changes made by credit bureaus and the secondary consequences on medical providers and patients' increased costs must be thoroughly evaluated. The accuracy of information and the implications on lending costs within the credit ecosystem must be prioritized.

We expect a prompt response and immediate action on these demands. The future of affordable

healthcare and the financial stability of small physician offices hang in the balance.

Sincerely,

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