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August 12, 2024

Rohit Chopra
Director
Consumer Financial Protection Bureau
Attention: CFPB-2024-0023/RIN 3170-AA54
1700 G Street NW
Washington, DC 20552

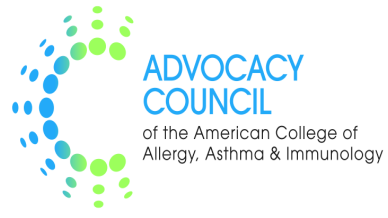
RE: Comments on Proposed Rule Entitled, “Prohibition on Creditors and Consumer Reporting Agencies Concerning Medical Information (Regulation V)”

Dear Director Chopra:

The Advocacy Council of the American College of Allergy, Asthma and Immunology (“ACAAI”) together with its sponsoring organization, the ACAAI, appreciate the opportunity to provide comments to the Consumer Financial Protection Bureau (“CFPB”) in response to the proposed rule (“Proposed Rule”) that would remove an exception to Regulation V, prohibiting creditors from obtaining or utilizing medical debt information when making credit eligibility determinations. The Advocacy Council and the ACAAI represent the interests of over 6,000 allergists/immunologists and allied health professionals. ACAAI’s members provide patient services across a variety of settings, ranging from small or solo physician offices to large academic medical centers.

We appreciate the CFPB’s interest in addressing the hardships of medical debt; however, we believe that the Proposed Rule does not contain sufficient guardrails to protect the viability of small or rural practices. The Proposed Rule fails to acknowledge that many practitioners already have flexible post-service collection processes and work diligently with patients to find a reasonable payment solution. During this process, practices often absorb medical debt costs. For a large provider—such as a hospital—this may be a sustainable process. However, this process may impose a considerable burden on small or rural practices.

Small and rural practices are already disproportionately impacted by workforce shortages, high inflation rates, and reduced reimbursements from both private and public payers. These practices also have been increasingly subject to predatory practices by payers that result in payment delays, drawn out audits, and improper denials of claims. We are concerned that the Proposed Rule would construct an additional barrier for small and rural practices to obtain reimbursement for high-quality, elective care. Removing patients’ incentives to pay medical bills will have an undue financial impact on small and rural practices.



Accordingly, we urge the CFPB to carve out an exception for medical debt owed to small and rural practices. We believe that the CFPB should not indiscriminately shift debt to all providers. The CFBP must take a more nuanced approach in addressing the hardships of medical debt.

We appreciate your consideration of our comments and recommendation. If you have any questions regarding this letter, please contact Susan Grupe, Director of Advocacy Administration, at suegrupe@acaai.org.

Sincerely,

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President, ACAA

Travis A. Miller, MD, FAAAAI
Chair, Advocacy Council