

Senate Committee on Health Care
The Honorable Senator Laurie Monnes Anderson, Chair

March 27, 2019

RE: Support for Senate Bill 887

Dear Chair Monnes Anderson and Members of the Senate Committee on Health Care,

Thank you for an opportunity to share with you information about acupuncture and Chinese Medicine and current problems with prior authorization/insurance.

As a Chinese Medical provider and acupuncturist for over 20 years, I have provided relatively low-cost services to a variety of people for varying diagnoses. In addition to providing pain relief with positive side effects, acupuncture can also be an adjunct treatment for other illnesses including cancer, GI difficulties, respiratory illnesses, mental health and stress reduction. I have seen these results first hand and am constantly amazed by the change in a person's overall wellbeing following treatment.

Most of my patients use their insurance to pay for services – and to enable them to use their insurance, I have to be a provider in-network and have to do the paperwork to bill for services. As most of us are small one-two person offices, this in and of itself takes a great deal of time that is not billable or reimbursable. This is especially true when the insurance company does not pay or states that they never received the claim – yes, we too sit on the phone for hours to try to talk with someone re: claims. Again this is not billable or reimbursable, nor can we put this burden of collecting insurance monies onto the sick patient. Nor do we want to! And I won't even begin to address the reimbursement rates, especially from ASH, that we have to accept if we want to be in-network.

I do, however, want to address the rules of preauthorization that is being required by some – although not all – insurance carriers. Acupuncture treatments actually lead to long-term savings in our healthcare costs and should be supported by our government. Asking for preauthorization creates unnecessary burdens and uses more of my time that could be spent with patients, researching treatment options, taking classes, etc. At this time, I spend an average of 30 minutes per patient requesting preauthorization. This is not sustainable over time. Every layer of paperwork cuts into our very narrow margins of livelihood, and threatens our small practices.

Most insurance limits the amount of acupuncture or number of visits that a patient can use during the year. This should stand alone as patients pay for their insurance and should be allowed to use it without discrimination or burden. SB 887 would help this issue by allowing patients to use their acupuncture benefits as a low-cost treatment for care.

In the current opioid crisis, the Joint Commission of Hospitals are requiring non-pharmacological approaches for pain-relief. SB 887 would also help in this crisis by providing support for the very people who are treating these patients.

If you would like to hear stories of dropped requests for preauths, computer systems down for hours at a time, approval of only 3 visits with no requests for treatment plans, etc., I would be very happy to talk with you or anyone on the committee.

Thank you again for supporting SB 887 and for supporting all of us in our healthcare!

Warmly,

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