

Submitter:

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On Behalf Of:

Committee:

Senate Committee On Health Care

Measure, Appointment or Topic:

SB61

As a small private practitioner in Portland, Oregon I have always made it a point to serve the OHP population. While larger organizations are very valuable to the community, I think some client populations are daunted by the larger clinic processes and prefer to see a private practice therapist and develop a one-on-one relationship with that therapist. I specialize in working with marginalized communities— folks who have experienced trauma, LGBTQIAA+ populations, and young people who are trying to find their footing.

While working with OHP and the CCOs associated is a passion, it is also a paperwork challenge and a billing challenge. Often billing and paperwork requirements vary from CCO to CCO and change without adequate training or communication to providers.

I worry all the time that despite my best efforts I will be audited and a small detail of my paperwork or billing practices will be cited as a reason for a massive clawback. This has deterred many colleagues of mine from engaging with serving the Medicaid population, despite having a skillset that would be very valuable to this population. Without the protections and limitations listed in this bill I too may have to let go of seeing this population in the future, because the risks are just too high of human small error leading to me losing my income post-facto.

While I support oversight and assurances that appropriate care is being delivered to this vulnerable population, I also think there needs to be some protections and offers of training rather than a financially punitive response to the outcomes of lack of information and human error discovered in audits. Thank you for taking the time to consider my testimony in support of this bill.