

Submitter:

Sarah Alexander

On Behalf Of:

Committee:

Senate Committee On Health Care

Measure, Appointment or Topic:

SB61

I am a licensed mental health professional who owns a group private practice employing 10 therapists. We see clients who have trauma, eating disorders, substance abuse, depression, and/or anxiety. You would think our training to work with people who have these issues is challenging (and it is), but in fact it is nothing next to how challenging documentation is. I'm a writer and teacher, too, so (for me) writing is not the hard part about documentation. The hard part is due to the lack of clarity in rules, the differences in interpretation of rules between insurance companies, and the ever-present threat of having money clawed back years after it's spent because documentation isn't perfect. The work is done; the work is good. Nearly 25 years in the field now, I know what I'm doing clinically. None of that matters if my documentation doesn't say what each insurance company wants it to say (which changes all the time). I might have to declare bankruptcy if I don't do it right and there's no training on how to do it right. Oftentimes it's not even a clinician doing the auditing. This is what stresses me out all the time. This is why I'm considering closing my practice and changing professions. We need clarity around what is required, we need recourse when insurance is financially punishing rather than adequately training providers. The mistakes people are making in documentation are not because they are not doing the work; these mistakes could be solved with better training for providers.