

Jeremy McAllister, MA, LPC
4230 SE King Rd #374
Portland, OR 97222

Written Testimony in Support of House Bill 2029

Dear Representatives Nosse and all committee and board members involved with this bill,

My name is Jeremy McAllister, and I am a licensed professional counselor (LPC). I've been in private practice since 2013 and navigating insurance in Oregon since 2017. I am now paneled with 10 insurance companies after terminating a contract with one.

For the most part, this has been a seamless process.

My Personal Audit Experience

One particular insurance company in Oregon did conduct continuous audits on my claims for over a year.

When asked why each consecutive claim was flagged for audit, they could not tell me. They said their computer chooses the audits, and they could not say why one provider might be targeted over another.

When responding accordingly and within all of their given parameters – which changed each time I called – they either found technical issues with the responses or said they did not receive them at all, though my third-party fax company confirms they received my faxes on time.

They simply denied multiple review processes.

Any payments that did come through (less than 50% of my claims) were in the form of virtual credit cards, which they had coded incorrectly, so they could not be cashed. They also refused to send checks, saying they were not allowed to do so due to paper reduction.

Every department simply referred me back to another department, each department claiming they either know nothing or could do nothing.

Every Oregon agency I called said they were aware of this company but could do nothing.

I was not paid for over a year while still seeing their members weekly during that time. So, without payment, I eventually canceled the contract, citing their breach of contract. Though I documented thoroughly and referenced clearly, providing good-faith transparency, sent to

multiple departments at this company, I never received any response. My clients informed me of my end-of-contract date, which landed six months later, though the insurance contract gives a termination period of 90 days.

I lost thousands of dollars, and because these clients continue to see me, they now carry the burden of navigating their insurance using the superbills that I provide them. While I offered to code for the full hour sessions I provide them, they ask me to continue to bill for lesser time, knowing this company refused to pay me for full hour sessions, which goes against industry standard. So even now, when I am no longer contracted with this insurance company, my clients still suffer, feeling subject to their employer-sponsored insurance.

This particular company, known to many therapists, ended payments for one of my clients and simply never paid claims for other clients, under the guise of failed audits.

Empowering Oregonians in Need

I am writing this letter in support of HB2029 and any future bills to reign in those insurance companies that actively work against parity and against Oregonians that seek care. Insurance audits, as I have experienced them, have proven entirely unfounded, abusive, unfair, manipulative, and anything but transparent as targets remain in motion or altogether undefined.

Many highly qualified clinicians have left or avoided insurance panels, leaving many high-need Oregonians with no options for mental health care. Many newer clinicians, fearing the intimidating process of taking on big insurance, avoid paneling altogether, changing the therapy landscape gradually to self-pay and leaving a large portion of lower-income Oregonians with no options at all.

This practice by some companies (though most have been fair and reasonable, in my experience) directly harms Oregonians seeking care, and it should be illegal. Please help stop this practice.

Thank you for supporting this bill.

Sincerely,
Jeremy McAllister