

Submitter: Elizabeth Denny  
On Behalf Of:  
Committee: House Committee On Behavioral Health and Health Care  
Measure, Appointment or Topic: HB2029

To the dedicated representatives,

I am writing in support of legislation that imposes requirements and restrictions on insurer and coordinated care organization (CCO) audits of behavioral health claims. As a therapist and concerned advocate, I have seen how unregulated and overly aggressive audit practices harm not only providers but also the clients we serve. Implementing clear standards for these audits is essential to protecting therapists, ensuring client care is not disrupted, and preventing the abuse of power by insurance companies.

Therapists and behavioral health providers operate under rigorous ethical and clinical standards to ensure high-quality care for their clients. However, when insurers and CCOs conduct audits without clear regulations, they often do so in ways that are arbitrary, excessive, or unfairly punitive. Audits can result in sudden demands for repayment of previously approved claims, which can devastate small practices and nonprofit organizations. Without restrictions, insurers may use audits as a means to delay or deny payment rather than as a legitimate tool for ensuring compliance. This places an unsustainable burden on providers, many of whom already work under low reimbursement rates and high administrative demands.

Unregulated audits do not just harm therapists—they ultimately impact clients as well. When providers are subjected to unpredictable financial losses, some are forced to reduce services, stop accepting certain insurance plans, or even close their practices entirely. This reduces access to mental health care, particularly for clients who rely on insurance or Medicaid for treatment, which is already a pressing concern with OHP's recent unfounded move to eliminate associate therapists from their approved care providers. Furthermore, excessive audits can interfere with continuity of care, causing stress for clients who depend on long-term therapeutic relationships for stability and healing.

Insurance companies wield significant power in determining access to mental health care, and without proper oversight, they may use audits as a cost-saving measure rather than a means of ensuring appropriate care. Providers often have little recourse when facing unjust audits, as insurers set their own rules with little transparency or accountability. Establishing clear requirements for audits—such as setting reasonable timeframes, defining fair documentation standards, and ensuring due process for appeals—helps level the playing field and ensures that audits serve their

intended purpose rather than becoming a tool for financial exploitation.

Behavioral health providers play a crucial role in addressing the growing mental health crisis, yet they face increasing administrative and financial pressures that make it difficult to sustain their work. By imposing fair and reasonable restrictions on insurer and CCO audits, we can protect therapists from undue hardship, preserve client access to care, and ensure that audits are conducted with integrity rather than used as a mechanism for profit-driven decision-making.

I urge you to support this critical legislation to safeguard the future of behavioral health care.

Thank you for your time and consideration.

Sincerely,  
Your local therapist and concerned community member