Chair Patterson, Vice Chair Hayden, and members of the committee,

For the record, my name is WInsvey Campos, and I represent Senate District 18, which includes Beaverton, Hillsboro, and Aloha. I am here today to express my strong support for **SB 1181**, a bill prohibiting the use of pre-existing conditions to deny coverage or raise premiums for a Medicare Supplement insurance policy– also known as Medigap.

As a legislator, one of my core goals is to ensure that all Oregonians have access to quality and eventually universal healthcare – **SB 1181 helps us take another step toward this goal.** It will give those on Medicare **the ability** to choose the appropriate health insurance to meet their medical needs.

You see colleagues, to a lot of Oregon's seniors, traditional Medicare isn't much use without a supplemental plan, and Medicare Advantage creates barriers to seniors when they seek care. Medigap is a plan provided by a private insurer that fills the gaps in Medicare coverage. However, in all but four states, beneficiaries may be denied a Medigap policy if they have a pre-existing condition outside of their initial enrollment period at 65. For half of Oregonians who chose Medicare Advantage, they'll always face medical underwriting if they switch back to traditional Medicare.

This hurts communities, providers, and hospitals. Without Medigap, seniors will face steep costs to cover their care– if they get care at all. And those on Medicare Advantage face narrow networks and prior authorizations that make seeing a doctor difficult. Our hospitals and providers have to spend staff hours to follow-up and get approval for procedures and reimbursement.

We don't lock 26-year-olds into the health insurance they pick at that age – why would we do that for 65-year-olds?

Yes, those 26-year-olds change health insurance plans during qualifying events. For this bill's target population, terminations of insurance are their only true qualifying event. Are we telling our aging population that once they hit 65, they have to make a choice and live with it?

Think about the seniors at Samaritan or St. Charles who just lost the ability to see their doctor because they are no longer in network with their Medicare Advantage plan. Their only recourse today is to call 1-800-MEDICARE to file an appeal and switch to Medigap. We are telling our seniors that if they have a problem with a decision they made in the first six months of this period of their life that they need to take their concerns to a phone line and "*hope*" they have their case heard. This is unacceptable.

With SB 1181, we are not seeking continuous open enrollment, like how several states have been **successfully** implementing for decades. What we are seeking is an annual enrollment period that would provide our seniors with agency as they venture into their sunset years.

We know seniors are risk-averse, especially when they are on a fixed income. You will certainly hear a lot about how much this will raise rates— some of these concerns are valid. The reality is that more comprehensive insurance costs more money. We also know that, for these seniors, it is better to know what their monthly payment will be, rather than dealing with a high, unexpected medical bill. Access to Medigap represents such a guarantee— no prior authorization, out-of-pocket costs, no narrow network— all the things that make care at this age such a headache.

In closing, 86 percent of people aged 55 to 64 have a pre-existing condition. For people on or interested in Medicare Supplement insurance, this will continue to be a barrier to access. Please consider what this bill is truly about–giving Oregon's seniors agency and the opportunity to access better quality of care.

I urge your support, and thank you for your consideration.

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Winsvey Campos

State Senator, District 18