

Submitter: Jessica Teigland
On Behalf Of: Western Oregon Mental Health Association - WOMHA
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: SB824

Dear Chair Patterson, Vice-Chair Hayden, and Members of the Senate Committee on Health Care,

I am a Licensed Professional Counselor practicing in Salem, and Treasurer of the Western Oregon Mental Health Alliance (WOMHA). I am writing in support of SB 824 with the -1 amendment to allow the Department of Consumer and Business Services to continue collecting important data from insurers on behavioral health parity as required by HB 3046 (2021).

In years passed, reimbursement rates from several insurance companies became stagnant. Some insurers even decreased rates, which leads me to wonder if it is worth staying in-network with these insurers as the cost of living, continuing education and training, and business operations only continue to increase. Some rates were unnecessarily impacted not by the level of care I provided, but by arbitrary guidelines and practices, such as whether or not a client was being provided services in their home (e.g. video appointments), vs. in my office. My services and level of care do not change based on my clients' locations, and allowing DCBS to collect data from insurers would increase accountability for insurers to provide fair compensation for services rendered. Furthermore, without the help of DCBS to monitor things like insurance audits, data collection, and other important information that can directly impact providers and consumers, providers are often left in the dark on how to fight insurance companies, as there is never enough time to do so, with managing a full caseload and maintaining quality care. Providers need this help to have a fighting chance.

Since the passage of HB 3046 in 2021, I have seen reimbursement increases for the first time in many years. These increases have made it more sustainable to stay in-network and provide services to clients with varying financial means. Because every insurer reimburses at different rates, I am able to see clients with plans who reimburse at 50%, whereas other insurers reimburse closer to 85%, which helps me offer services to a wider range of clients who have insurance plans that don't reimburse at acceptable rates. This burden should not be on the consumer, but rather the insurer, as rates are determined in a room I have not been in nor will likely ever be invited into.

Allowing the HB 3046 reporting requirements to end would allow some insurers to return to their previous practices of undervaluing behavioral health services and

operating with inadequate behavioral health networks, which effectively discriminates against their members with behavioral health conditions. Please pass SB 824 with the -1 amendment to keep insurance company practices transparent and protect access to behavioral health care. Your constituents and I trust that you hold our interests and needs with high value and priority, and I thank you for it.

Respectfully,

Jessica Teigland, MA, LPC