

Chair Pham and members of the House Behavioral Health Committee

My name is Larry Conner. I am a Licensed Professional Counselor in Private Practice in Lake Oswego, Oregon. I have been in practice for 39 years. As the founder and Past President of COPACT, I have been a political activist for mental health providers and consumers for 19 years. I have been involved with passing nine bills in the legislature to support mental health. Most recently I was the Legislative Chair for the Oregon Mental Health Providers PAC, which has been the sponsor for the last attempts to pass this legislation. I ask you to support HB 4028.

I feel the need to address some of the distorted testimony I have heard repeatedly from the Insurance Lobby on this issue.

Each time this bill has been in committee, we have heard lobbyists complain about how the bill means there will be different requirements for commercial vs CCO audits. They make it sound like that would be an overwhelming burden on them. Let us be frank: health insurers deal with multiple requirements and limitations for health policies all the time, whether they be employer-provided, purchased on the Insurance Exchange, emanating from a self-insured entity that is using the insurer as an administrator, or include differences between coverage based on whether the insured is in management of a company or an hourly employee. Insurers are more than capable of handling different rules for different policies. For the lobbyists to argue that having two different audit requirements creates an unreasonable burden on their business practices, strains credulity.

I have repeatedly heard lobbyists cite the immense need for insurers to stay vigilant for fraud and abuse in mental health care. They seem to justify the punitive nature of their audit procedures based on that argument. I agree with the need to address fraud and abuse and that is included in HB 4028, but you have heard testimony for years that fraud and abuse in mental health services in Oregon is extremely rare. In my 39 years of experience, I have never heard of one case, and I was in settings where I would have been aware of such cases. The disciplinary records for the licensure boards bears out how rare fraud and abuse in mental health care actually occurs in Oregon. Yet if you were to believe the insurance industry, it is rampant. That is just their justification for having abusive audits, so the insurers have a better bottom line, nothing more.

They warn that limiting current insurance audit procedures would inevitably lead to increased premiums to consumers. That is an attempt to manipulate the committee through fear. But are they not also admitting that audits are an income stream? They are admitting to using clawbacks for revenue, not really seeking out fraud and abuse.

Balance that out with the egregious audit abuses that are putting practitioners out of business or driving many therapists away from taking any insurance. Those results have a direct impact on access to care for suffering Oregonians. I have never once heard an Insurance Lobbyist state that they see their actions as a problem that is limiting access to care even though we have shared

evidence for years about how their actions are harming Oregonians by driving providers away from accepting insurance and leading quite a few to leave the profession outright. Furthermore, I have never heard any lobbyist give anything other than lip service to the fact that we are on or near the bottom of measures of mental health care in the nation. To them, that is not their problem.

Fortunately, I did not hear this year the ongoing drumbeat of denial that insurers have more than adequate support for providers who have problems with claims or audits, but I need to say something about that because it is likely to come up in private conversations. I know their assertions to be largely false. For many years, numerous insurers have moved their provider support networks offshore, so when there is a problem with a claim or audit, a provider spends hours speaking to someone in another country with no knowledge of mental health procedure codes and who barely speaks English, only to give up in frustration. That is not adequate provider support to manage or avoid audits.

I was happy to hear the PacificSource lobbyist state that his company does not pay auditors based on the outcome of audits. That is good, but it does not address the fact that other insurers do and that is a serious conflict of interest. The cost of audits goes up enormously when an auditor gets paid more based on the size of the clawback.

In order to get Oregon off the bottom of national mental health access measures, the health insurance industry's instinct to restrict care must be limited. HB 4028 is an attempt to do that in order that we providers can continue our dedicated work to improve the lives of our suffering citizens.

I ask you to please pass HB 4028 to the floor with a do pass notice.

Thank you for your attention to this issue.

Larry Conner MA LPC