

Please Vote Yes on House Bill 3160-A
Joan and Gerry Weaver
Corvallis
May 8, 2013

Chair Shields and members of the committee thank you for having us here today. My name is Joan Weaver. My husband Jerry and I live in Benton County just outside Corvallis. I'm taking time off from work today because we both feel so strongly about doing what we can to make sure insurance companies are held accountable. Too often people like us, pay their premiums and then when they need it, are falsely denied that coverage.

Jerry has been a professional timber faller all his life. I'm a Quality Assurance Coordinator at a medical facility, and am familiar with medical and insurance documents. Jerry had been paying for his own disability insurance for over 5 years. \$85.54 per month. On May 3rd, 2011 Jerry was helping his partner fall a tree up on Green Mountain. The tree was caught up in another, so Jerry had to fall another to knock it loose. No one is 100% sure what happened, but the snag snapped like a slingshot and hit him square on the head as Jerry bent over to pick up his wedges. It hit him so hard that it shattered the entire top plate of his teeth and it threw him 200 feet down the hill, head over heels. His partner said when he got to Jerry, he asked to lay there for a few minutes because his arms were numb. But Jerry is one tough logger. He steadied himself and the two of them walked out of there together and went straight to Good Samaritan in Corvallis.

He was treated and diagnosed with a severe concussion, including a spinal cord concussion after they found gas bubbles in his spinal cord. He was immediately referred to a neurologist because his neck snapped back with such force that it fractured and chipped two vertebrae. He tore the rotator cuff in his right shoulder, it was only later, after coming out of some of the fog from the concussion, we learned of his injury to this arm and shoulder. The hospital released him the same day. The next day I found Jerry standing at the kitchen sink throwing up. He didn't even know all his teeth were gone. The first two weeks he was laid up on the couch with his eyes closed.

I knew to immediately contact our insurance agent and get the ball rolling. I supplied them with everything they needed for the claim. They started Jerry right up on disability and for the first 10 months all was well. Month 11 hit and with no phone call and no check, on the last day allowed by current law, a letter was mailed to Jerry letter saying it's over. No more disability. According to them on paper, Jerry should be good to go back to work. I got right on the phone to the adjuster and found out that she had sent Jerry's records for review. The adjuster mailed a release to Jerry to be filled out so that she could request all injury related records from his care providers. I'm very familiar with laws and releases and ask her why she did not use the release that was sent with the initial notice of claim being filed. She actually admitted, on speaker phone, that she had crossed out Jerry's initials to release specially protected information because she did not feel that she needed those records. This would have omitted all of his primary care records. The Facility rejected the release as being altered and since she had done this on the original she needed a new release. When I later asked to speak to her supervisor and told her I found that a HIPPA violation had happened and what I did for a living, all communication stopped.

This forced us to get a lawyer because we were not about to roll over. Our lawyer discovered that the doctor who the insurance company paid to “review” Jerry’s records is actually a Bariatric surgeon in Florida. He had no expertise in diagnosing Jerry’s types of injuries. He never examined Jerry. This is a tactic used on many unsuspecting, loyal premium paying consumers – delay, deny or lowball claims. Jerry is 62 and is in no way able to return to timber falling with the injuries to his neck and shoulder. This is an accidental injury that he cannot bounce back into the workforce with. Social Security deemed him disabled and has honored his original diagnosis from the start.

It’s clear that in Oregon, insurance companies can resort to any tactics they choose to not pay claims, leaving injured workers with no options other than taking them to court. We had a contract. They didn’t honor that contract. And we have no idea how long this will drag on. It is fortunate for us that our children are all grown, we do not have a have a family to support like so many others this has happened to. Please hold insurance companies accountable for their bad business practices by voting Yes on House Bill 3160A.