

## **VOTE YES on Senate Bill 901**

The Oregon Psychological Association (OPA) asks you to join us in our support of Senate Bill 901 which clearly specifies that insurance companies shall send claims reimbursements directly to providers. Many patients expect that once they offer their co-payment and insurance card, the provider's business office will take care of billing and reimbursement, so that the patient is not burdened by attending to financial aspects of care that they little understand. Most health care provider offices are equipped to offer that service to the patient, as it is a win-win with the patient relieved of an unpleasant burden and the provider placing claims reimbursement in the hands of skilled staff.

When a patient receives a reimbursement check, it is often confusing to them. They may deposit the check and spend the funds, not realizing it was intended for their provider. If the patient's treatment is concluded, the patient may not follow through and reimburse the provider and may then be burdened by reimbursement demands from the provider. This unnecessary step creates unneeded and unwanted burdens on the patient.

When the provider has to take extra steps to obtain reimbursement, the staff time devoted to that process drives up health care costs.

Please join us in supporting this very worthy bill, to simplify and clarify the reimbursement process for providers and patients, so that providers and their patients can focus on getting the patient healthy rather than on getting the provider reimbursed.