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To: Senate Committee on Health Care
From: Lorena Reynolds, Attorney at Law
Date: May 18, 2015
Re: Testimony in Support of HB 2758

Chair Monnes Anderson and the members of the Senate Healthcare Committee:

I am an attorney in private practice in Corvallis who specializes in family law. I handle many cases involving intimate violence. Because of my experience working with survivors of domestic violence, sexual abuse and assault, and stalking, I support House Bill 2758 to increase safety for survivors of violence and allow them greater access to services.

HB 2758 will strengthen privacy for survivors who seek services relating to their abuse. Many survivors have health insurance that is provided to them through the employment of a family member. Sometimes this is the very person who has abused them; other times it is a parent, stepparent, or spouse who is unaware of the abuse and who the survivor may not want to know of the abuse. As it stands now, whenever a survivor seeks mental health or medical care, the Explanation of Benefits (EOB) statement is sent to the person who holds the insurance policy, not to the person seeking services. This has at least two negative effects:

1. Survivors who are aware that the policyholder will be informed they sought services sometimes do not seek services.
 - If a woman has contracted a sexually transmitted infection or is pregnant as a result of being assaulted, she may delay obtaining prenatal care.
 - Teenagers and young adults may choose not to seek medical care or see a counselor because they don't want their parent, stepparent, or guardian to know of the abuse.
 - Someone assaulted by a spouse who holds the insurance may not go to the emergency room or urgent care for treatment of injuries because they fear further abuse by their spouse when the EOB arrives and the abuser finds out they sought medical care.

2. Lack of confidentiality endangers survivors who are unaware that the policyholder will be informed that they sought services.
 - o EOBs contain information that can be used to locate a survivor. For example, if a survivor regularly sees a counselor each week, the policyholder can see this pattern in the EOB. For survivors in hiding, this is a barrier to accessing services. It is also common for abusers to then use this information to try to access additional information from the counselor, to harass the counselor, or to intercept her on her way to the appointment. I have personally been involved in cases where a child was in counseling as the result of the abuse by a parent who then received information about counseling services from the EOB – including treatment codes and information about the child’s diagnosis – even though the parent was prohibited from having contact with the child or accessing the child’s records.

House Bill 2758 will require carriers to send insurance communications directly to the member rather than the primary policyholder. As we move forward with healthcare reform and the digitalization of medical information, it is critical to remember that, for many insured patients, lack of confidentiality protections is the same as lack of insurance.

Sincerely,



Lorena Reynolds
Attorney at Law

LR/sjl