

Testimony submitted via email.

I am writing to you to urge you to pass Bill HB2778. I am a Licensed Massage Therapist in Oregon working as an independent contractor working in a small office of massage therapists. While I am thrilled in the increase of coverage of CAM services covered by some group policies and the accessibility to massage therapy it gives people, the practice of using third party authorization requirements is a step in the wrong direction for policy holders and providers like myself. My clients have had to wait to get pre-certification for treatment that is covered under their policy. Yes, they have to wait in pain to find out if their insurance company will cover the cost of visits that are a part of their policy. The process of finding out if, or how many visits the insured is able to apply to their condition involves a provider like myself spending time navigating an unclear and ever-changing website where I enter as much information as I can to support the need for treatment of the client/Insured. The results are inconsistent and arbitrary. I have spent countless hours trying to figure out how to better use this website so I can better serve my clients. Even with conferring with other massage therapists and calling to get clarification from the authorizing company itself, I still feel the results are unpredictable.

My clients are frustrated that they are not able to use the coverage offered in the plan they chose and have paid for. Many of them need to meet deductibles so they are still paying out of pocket for the massage, they are just hoping to pay down their deductible while getting treatment.

Please help your fellow Oregonians get what they pay for when using their insurance policy.

Thank you for your time.

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