



February 9, 2017

Representative Alissa Keny-Guyer, Chair
House Committee on Human Services and Housing
Oregon Legislative Assembly
900 Court St. NE
Salem, OR 97301

Re: HB 2211 – Regarding quarterly reports on implementation of requirements to reimburse cost of child abuse medical assessments conducted by community assessment centers.

Dear Representative Alissa Keny-Guyer and Members of the Committee:

HB 2234 was passed in the 2015 session as an effort to solve a serious and growing problem in Oregon. Child Abuse Intervention Centers across the state serve over 6500 children each year when there are concerns of abuse. While many centers have been billing insurance providers for the billable portions of child abuse assessment for some time, **for the 75% of the children who are medicaid-covered patients, centers have historically only received on average 24% back in reimbursements.** Even when billing private health benefit providers, centers had to write-off 46% of the amount they billed. Furthermore, some aspects of the child abuse assessment were not billable before HB 2234. All Oregon CAICs serve children regardless of their ability to pay, making it especially difficult for small and rural centers to sustain these services with limited staff and resources.

This law requires private and public health benefit providers to reimburse centers for child abuse assessments (including but not limited to the forensic interview), and to ensure that these **reimbursements are proportionate to the scope and intensity of services provided.** HB 2234 was created to provide a consistent support across the state to ensure that these services will be available for all children for whom there are concerns of abuse.

Unfortunately, two years later, the response has been anything but consistent. I have personally spent countless hours scheduling and attending meetings, trying to help our partners at OHA and private insurance providers understand the intent of the law and how it could be implemented, exploring billing codes and rates, and working with individual centers to

tackle barriers as they arise in their efforts to obtain better agreements. It has been a drain on our small staff of three when there is no shortage in work to be done for the centers and kids in our state.

Centers across the state are reporting a variety of experiences in their efforts to improve their reimbursements since the bill passed. We have seen some success from CCO's who have acted as leaders in working with their local center to negotiate better case rates. We applaud these CCOs and appreciate their leadership in responding to child abuse. However in other parts of the state, we are hearing that centers are not hearing back from their CCO, can't connect to the right person in their CCO (or even identify who that is), or are being told that their CCO can't or will not renegotiate a better rate.

HB 2221 is an opportunity to clarify the law, to more clearly define the expectation for reimbursements, and to ensure there is accountability for following the law, ultimately making sure kids have access to these critical services. **I would encourage this committee to define that a reimbursement that "fully takes into account the scope and intensity of the services provided by the child assessment center"(as defined in HB 2221) means 100% coverage.** Centers are billing insurance providers for the true cost of providing these services; services that are required and absolutely critical to helping us stop abuse when it's occurring, and to help kids heal so they can grow up to be healthy productive adults. Defining the reimbursement expectation will help provide consistent coverage for these services across the state, while giving OHA and CCOs guidance on what's expected.

Center leaders need to put their energy into serving the children in their communities, not trying to navigate a complex system of medical billing. We need help from OHA to ensure that the law is having the intended impact for centers in the state, and we need CCOs to be leaders in demonstrating successful partnerships with their centers by establishing reimbursement rates that reflect the true cost of these critical services while recognizing the cost value in investing in early intervention. Oregon's children deserve access to these critical services, and it's imperative that we ensure the sustainability of these services by improving our reimbursement rates.

Sincerely,

A handwritten signature in black ink, appearing to read "Patty Terzian". The signature is fluid and cursive, with a small dash above the "i" in Terzian.

Patty Terzian
Executive Director
Oregon Network of Child Abuse Intervention Centers