

In 2013, newly retired, our car was hit from behind and thrust into other vehicles. Immediately I experienced difficulty breathing and was transported to a level I trauma center. Almost immediately, Kaiser Permanente erroneously informed the hospital that I was not their insured. The next morning at 6 am I was informed of my discharge, with 8 to 10 broken ribs and multiple other injuries, which had not been investigated. I was not permitted speak with my physician.

For six months, Kaiser “could not identify” me as their insured; I was threatened with collections. It also took about six months to diagnose all of my injuries, and my care was delayed, as the family doctor coordinating my care was obsessed with “resource allocation”. My injuries included PTSD; a traumatic brain injury; neck, shoulder, hand, back and abdominal injuries; and a fractured tooth.

Early in 2015 we were able to move to Oregon, and about a year after that, while trying a new medication for the head injury-induced headaches, I became dizzy and fell off a concrete staircase, breaking my knee, hands, teeth, and eyeglasses, and injuring my spinal canal. I spent six days in a nursing facility. I had surgery on my shoulder and hand. I went to pain clinic, pain classes, physical therapy, and more than 100 medical visits and scans. I had multiple severe adverse drug reactions.

We then filed suit against the driver, who had excellent liability coverage with Farmers’ Insurance and did not contest fault. Kaiser delayed the release of my medical records to the court for almost 2 months. Similarly, they delayed and all but obliterated the responses of my doctors to information requested by my lawyer. Then one of Kaiser’s lawyers lied about it to my lawyer. Kaiser’s surgeon refused to admit that my shoulder had been injured in the accident, citing “professional integrity”, though the records I had had transferred for him clearly stated otherwise.

Farmers’ Insurance hired an “expert witness” who made excellent use of my delayed diagnoses to claim, preposterously, that *all* of my injuries, except for the 8 to 10 broken ribs and one drug reaction, had been preexisting! For example, headaches from 20 or 30 years previously were clear evidence that my head injury was preexisting; it had taken 4 months to get a head injury diagnosed in Kaiser. My lazy, disinterested and ill informed attorney was not at all up to the task, as the injuries were “all over the map”, and I wound up giving up on the suit. He negotiated a settlement for the rib fractures and one drug reaction *only*, as Farmers’ dictated. He negotiated \$85,000 (of which \$40,000 was for him and his costs). Kaiser immediately billed me thousands of dollars for 54 visits for which I had already paid. I considered leaving Kaiser, but as I receive good care from many specialists there, I did not. I was scheduled to have total shoulder replacement surgery last week.

Two days after the deadline to change Medicare plans, Kaiser called me to inform me that they were going after my settlement if I had the shoulder surgery. This is the same injury, which their doctor insisted was not caused by the accident, from the lawsuit, which Kaiser tried so hard to block! Of my \$45,000 settlement share, half has already been spent on medical bills. I still need care for my PTSD, traumatic brain injury, chronic pain, neck, hands, teeth, and especially for my shoulder and spinal canal injuries, which continue to worsen rapidly. The shoulder surgery costs \$42,736. Kaiser now says they are going to cover that surgery, but their entirely verbal cost estimates are never binding. (For example, one month after an arthrogram in radiology, I received a bill for a surgical suite, though I had never been near one!) I was left to wonder what might happen if I did have the surgery: will Kaiser then put a lien on me to pay for it? So I cancelled my surgery, but I still need it!

Current law in Oregon is allowing Kaiser Permanente to deny paying for my care, and even to block my access to Medicare, for which I contributed my entire life. I do not want to have to move out of Oregon. Please put a stop to this insurance company overreach by passing SB 421.