

To Whom It May Concern:

My name is Bryan Lang, PT, DPT, MHA, CEO, and I am the owner of Whole Body Health Physical Therapy, with clinic locations in both Portland and Tigard, Oregon. We specialize in outpatient orthopedic care with an emphasis on chronic pain and pelvic health, serving approximately 325 patients per week. I am writing to express my strong support for HB 3134, which seeks to reform the prior authorization process for therapy services.

Our clinic sees patients who have exhausted nearly every other option—many come to us as a last resort to avoid surgery or long-term use of pain medications. For individuals dealing with chronic pain or pelvic dysfunction, our goal is not necessarily a full recovery, but meaningful improvements in daily function, quality of life, and, in many cases, a return to work. These gains can be life-changing.

However, the current prior authorization process actively obstructs this progress. Despite clear documentation of clinical improvement, I routinely receive approval for only two visits at a time. After each pair of sessions, I must submit another request—over and over again. This cycle is not only inefficient, it is demoralizing. It punishes providers who are invested in long-term, effective care and it delays progress for patients who are finally beginning to feel better. Most providers eventually give up, which seems to be the exact outcome utilization management companies hope for.

I refuse to give up, but it comes at a cost. I spend evenings writing extensive reports to justify care I know is working. Between myself and my administrative staff, we spend nearly 15 hours per week navigating prior authorization tasks. We routinely encounter inaccurate information online about whether a patient requires authorization, leading to additional phone calls and delays. Peer-to-peer reviews often pair me with non-practicing clinicians from entirely different fields, creating a disconnect that undermines clinical judgment.

This process drains time and energy that could—and should—be spent treating patients. It contributes to provider burnout, inflates administrative overhead, and most importantly, jeopardizes the timely delivery of medically necessary care.

HB 3134 is a necessary and overdue step toward restoring balance. It would allow providers like myself to focus on what we are trained to do: help people heal. It would reduce waste, improve patient outcomes, and support Oregon's healthcare workforce in delivering evidence-based care without unnecessary barriers.

Please support HB 3134. Let's ensure that patients can access the therapy they need without delay, and that providers can focus on care—not red tape.

Sincerely,

Bryan Lang, PT, DPT, MHA, CEO

Whole Body Health Physical Therapy

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