

Submitter: Christine Reeh
On Behalf Of:
Committee: House Committee On Behavioral Health
Measure, Appointment or Topic: HB4028

I am a licensed clinical social worker with twenty-five years of experience in private practice, providing mental health care to Oregonians across both urban and rural communities, including many who would otherwise have little or no access to care.

I am here today to urge you to pass House Bill 4028.

Excessive and unfair insurance company auditing practices are discouraging mental health providers from working with insurance companies and are driving many out of insurance networks and, in some cases, out of practice altogether. This directly limits Oregonians' access to care.

In 2022, I underwent a lengthy and stressful audit by one of Oregon's largest health insurance companies. The insurance company ultimately recouped thousands of dollars of my income—not because of fraud, but because of a clerical error caused by a software glitch. That glitch incorrectly showed that I had provided fewer than fifty-three minutes of therapy, when in fact I provided sixty minutes for every session reviewed.

Despite clear documentation and explanation, the insurance company refused to consider the error or negotiate the recoupment. The financial impact was significant enough that I was forced to seriously consider ending my work with this insurance company's members. Many of the affected clients were ICU nurses, emergency department staff, and respiratory therapists—at a time when the need for mental health care among these Oregonians was rapidly increasing. I made the insurance company fully aware of this impact, but it did not change their decision.

I later learned that insurance company auditors are often compensated based on how much money they recover, effectively turning audits into an income stream and creating a strong incentive to pursue technical or subjective findings rather than actual fraud.

At the same time, publicly available data from Oregon tells a very different story than insurance companies' fraud narrative. Reports from Oregon's professional licensing boards show that confirmed billing fraud among mental health providers is rare, appearing infrequently in disciplinary records. The current scale of auditing simply does not align with the data.

I also want you to understand what this looks like on the ground. On a regular basis, I receive calls from people desperately seeking therapy- most that are already insured. Increasingly, I have to tell them I cannot see them—not because I am full or unwilling, but because their insurance company's auditing and clawback practices make it financially unsafe for me to take that coverage. These are people who have insurance, who are doing everything they are supposed to do, and who still cannot access care.

This is not a workforce shortage caused by a lack of providers. It is a workforce being pushed out by insurance company practices.

The result is fewer therapists able to accept insurance and patients being unable to access mental health care at all, while they continue to pay premiums. Please do not be misled by claims that these practices are necessary to prevent widespread fraud.

Thank you for the opportunity to share this perspective with the committee. Your support of House Bill 4028 has the potential to help thousands of Oregonians statewide.