

Submitter: SARA CARMONA  
On Behalf Of:  
Committee: Senate Committee On Health Care  
Measure, Appointment or Topic: HB4028

Dear Chair Patterson, Vice-Chair Hayden, and Members of the Senate Committee on Health Care,

My name is Sara Carmona, LCSW, PMH-C, and I am a reproductive mental health therapist in private practice in Oregon. I am writing to respectfully ask you to prioritize and support HB 4028.

I have been practicing in both group and private settings since 2017. Currently, I operate a practice that is primarily insurance-based because my clients, who are navigating complex and often expensive reproductive health journeys, rely heavily on their insurance benefits to access the specialized care I provide. However, I find myself in a state of constant ambivalence regarding my continued participation in insurance networks due to the persistent threat of audits and clawbacks. This environment creates a layer of chronic anxiety that interrupts the clinical process. The fear that an insurer could arbitrarily recoup funds for services already rendered - often based on minor clerical nuances or after-the-fact changes to medical necessity determinations - is a significant deterrent to remaining in-network. For me to continue serving this vulnerable population, I need the security of a system that operates with fair, predictable boundaries.

I support HB 4028 because it provides critical protections that allow small practices like mine to remain sustainable. By reducing the window for insurers to claw back money to 12 months, this bill provides the financial stability necessary to run a business without the threat of unexpected debt from years prior. Furthermore, I believe it is essential to prohibit recoupment based on simple clerical errors when the service was legitimately provided and medically necessary. I also strongly support the requirement that audits be reviewed by behavioral health professionals who understand specialized care and the mandate for insurers to report their medical management practices to state regulators. These measures are vital for holding insurers accountable to mental health parity laws and ensuring that administrative processes do not override clinical expertise.

Currently, my decision to remain an in-network provider is one I must re-evaluate on a year-to-year basis. For me to continue offering accessible care to my reproductive health clients, I need to feel that the insurance system is a stable partner in care rather than a liability to my professional livelihood.

Thank you for your time and for your consideration of this vital legislation. I strongly

urge you to support HB 4028 to protect the stability and accessibility of Oregon's mental health workforce.

Respectfully,

Sara Carmona, LCSW, PMH-C  
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