



To: Maine Legislature Committee on Health Coverage, Insurance and Financial Services

Date: May 13, 2025

Re: LD 1785 An Act to Encourage Competition by Requiring Independent Health Care Provider Cost-of-living Adjustments in Health Insurance Contracts

Senator Bailey, Representative Mathieson and distinguished members of the Committee on Health Coverage, Insurance and Financial Services. My name is Jessica Brawn, and I am the Practice Manager and Billing Specialist at Holland Chiropractic Center in Bath, testifying on behalf of myself. My testimony is in support of LD 1785.

I began my employment at Holland Chiropractic in December of 2013. Between 2013 and 2017, I was the Front Desk Associate and became familiar with the reimbursable allowed amounts that major medical insurance companies put in place. In 2017, I became the practice's Billing Specialist, and I learned that we are bound to these rates for services when we agree to be in network with each company. Each year, I have seen most of these major medical insurance companies adjust their allowed amounts by mere pennies and rarely more than \$1.00, both in increases and decreases.

With the knowledge that insurance premiums, deductibles, co-pays, and out-of-pocket limits have increased drastically, one would expect that those increases would trigger modifications in the allowed amounts to better align with the sharp rise in the cost of living. Instead, these insurance companies have barely moved the needle with reimbursements while patients and practices alike struggle to keep up with increasing medical costs, overhead expenses, and salaries. The additional revenue that insurance companies have acquired by their increases are undoubtedly not benefiting anyone except these companies.

A stark example of how the companies have failed to work with providers to keep up with the increases is Anthem's reimbursement rate for CPT code 98941, Chiropractic Manipulative

Treatment for 3-4 regions of the spine. When I began my employment, the reimbursement rate was \$37.98. To this day, that rate has remained the same, as have the Anthem rates of all other procedures performed in our practice.

One detail that perpetuates this cycle is that when we agree to be part of the insurance companies' networks, we are also constrained by an evergreen clause, preventing us from negotiating any of our service reimbursements. That allows insurance companies to decide the value of our treatments at non-negotiable rates.

The effects that the lack of rate increases have had on businesses such as ours is that we've struggled to attract and retain employees with acceptable wages who are experiencing an unprecedented rise in basic daily needs such as housing, utilities, food, and transportation. It also impedes our ability to provide affordable care for patients who need it and to improve our services by adding new technology and equipment.

I believe that practices such as ours are at the mercy of legislation to affect change that would fairly distribute the premium, deductible, co-pay, and out-of-pocket increases enacted by these insurance companies to better serve the communities and businesses that major medical insurances directly profit from.

I thank the Committee for its time and energy and stand ready to provide answers to any questions you may have of the Association.

Jessica Brawn, Practice Manager/Medical Billing Specialist

Bath

Jessica Brawn
Holland Chiropractic Center Inc
LD 1785

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