Kerry Read Paris LD 1883

Senator Bailey, Representative Kristi Mathieson, and members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services. My name is Kerry Read and I live in Paris.

I am testifying in support of LD 1883. I am retired, living on social security and insured by a Medicare Advantage plan. I am extremely fortunate to be healthy, with only an occasional need for prescription drugs or medical care. Yet our healthcare system is so broken, that even I have spent many hours this past week, online and on the phone with my insurance company and doctors' offices. I reactivated an old injury and knew that I needed a few physical therapy sessions to support my healing process. My primary care physician agreed and wrote the referral and then the mess started. The first facility no longer had the specialist that I needed. The second, couldn't give me an appointment for many weeks, but were kind enough to connect me with their affiliate that could see me in 2 days. I was thrilled. Then the next day, the physical therapist's office called me and said my insurance denied my coverage and all of my appointments were cancelled. After hours on the phone with my insurance company, including holding while they called the therapists that they listed as "in network", I was unable to find a therapist that offered the care that I needed in a reasonable time frame that my insurance would pay for. So, I am left to see if I can get better on my own or if it gets bad enough that some other, more expensive, more invasive treatment is required. At the same time that this was going on I received a text message from my dentist that my appointment for this week, which I had scheduled 6 months ago, needed to be rescheduled and the earliest available appointments are in February, 2026. This "inconvenience" is due to a reduction in staff. So then I spent more hours on the phone, trying to find a new dentist. The only one I could find does not participate with any insurance companies, so I will be paying out of pocket, even though I have insurance. Clearly, there is something wrong here! I need my healthcare to be between my doctor and me-not prevented, delayed, denied and obstructed by a for-profit insurance company.

My case is the simplest example of our broken system. My partner has complex conditions. He is bounced between insurance and providers, referrals and denials, constantly. Trying to keep up with it is exhausting and detrimental to his health. On his best days he is sleep deprived and in pain. On the worst, he is suffering with debilitating migraines and barely able to get out of bed. No one should have to fight with their insurance company to get the care that they need. To have to navigate this system in a fog of pain and sleeplessness is cruel and inhumane. And then there is my friend who is younger, still working, putting her kids through college and also has complex conditions. She is overwhelmed by medical debt on top of the same issues that my partner and I experience and does not have enough hours in a day to begin to address the pile of medical bills and denials on her desk, or to be on the phone searching out the care that she needs.

My partner and I have a lot of years left; to contribute to our community; to help our child; enjoy our grandchildren, friends and neighbors and the streams and forests of the place we call home. We need to be free of the oppressive and regressive for-profit insurance system. We want to spend our days pursueing healthy living, not struggling with time and life sucking, insurance companies devouring our social security benefits while actively and intentionally preventing us from receiving beneficial healthcare. Will you do this "now" so we can see the benefits in our lifetime and our grandchildren never have to know this misery that we currently call a healthcare system? Please vote "ought to pass" on LD 1883 and get this show on the road, now.