MaineHealth

MaineHealth Local Health Systems

Franklin Community Health Network
LincolnHealth
MaineHealth Care At Home
Maine Behavioral Healthcare
Memorial Hospital
Maine Medical Center
Mid Coast-Parkview Health
NorDx
Pen Bay Medical Center
Southern Maine Health Care
Synernet
Waldo County General Hospital
Western Maine Health

Part of the MaineHealth Family

MaineHealth Accountable Care Organization

MaineHealth Affiliates

MaineGeneral Health
New England Rehabilitation Hospital of Portland
St. Mary's Health System

Testimony of Penelope St. Louis, MaineHealth
In Support of LD 945
"An Act Regarding Notice by Health Insurance Carriers of Policy Changes"
April 6, 2021

Senator Sanborn, Representative Tepler and distinguished members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services, my name is Penelope St. Louis, Assistant Vice President of Payor Contracting at MaineHealth, and I am here to testify in strong support of LD 945, "An Act Regarding Notice by Health Insurance Carriers of Policy Changes."

Payors offering products in the state of Maine use varying methods and formats to notify providers of policy changes or additions, including electronic bulletins, newsletters, websites, and letters to a limited subset of providers (skilled nursing facilities (SNFs), home health agencies, hospice agencies, and labs). Over the last year, I have been involved with trying to track down and monitor all of the varying policies put forth by payors in all of these differing locations. I can attest that it is virtually impossible to maintain an up-to-date account of all the policy changes put out by all the payors currently contracted with MaineHealth (upwards of 21 payors). It is highly inefficient and expensive to track when the forms of notice are so disparate. By way of example, over the last three months, for the top five largest payors in Maine we have identified over 33 different policy changes or additions. There could be more. In addition, the 33 identified do not include policy changes or additions affecting SNFs, home health, labs, behavioral health or hospice.

Given the significant financial and administrative impacts of these payor policy changes, and in order to ensure we did not miss any, MaineHealth recently engaged an outside programmer to develop a "web crawler" which searches various payor sites each day to identify whether new policies or changes have been published. However, this "web crawler" has its limits. It is unable to identify policies enacted relative to SNFs, home health, hospice and labs. And it is expensive. If we include all 21 payors, it can cost us upwards of $120,000 per year to use a "web crawler" to identify these policy changes. It should not require a financial investment on the part of a provider to stay up-to-date on arbitrary policy changes being made that significantly affect reimbursement and increase administrative burden mid-contract.

With that said, we strongly support the legislation before you today, but urge the Committee to consider amending the legislation by inserting "<u>by certified mail return receipt required</u>" in Line 18, so that it reads:

110 Free Street • Portland, ME 04101 Phone: 207-661-7001 Fax: 207-661-7029 mainehealth.org

"The notice required by this subsection must be provided in writing, by certified mail return receipt, to each provider, and the notice must be the only subject of the written communication." This addition ensures that the significance of the policy additions or changes would be made known. There would be no need to pay for a web crawler in order to identify policies from websites, newsletters or bulletins. Only by receiving proper notice will providers across the health care spectrum know of and better track such policies, and, when warranted, raise timely objections.

Thank you for your time and attention and I am happy to answer any questions.