

Evolutionary Recovery & Psychotherapy, LLC

“Creating Programs for Conscious Change & Development”

As a healthcare provider for over 35 years I have had to reduce my client caseload significantly since becoming a provider under that managed healthcare system. Time historically invested in the clinical relationship is now spent in non-billable administrative hours with the auspices of the insurance companies significantly impacting clinical efficacy. The consequences are life threatening as evidenced by children in kindergarten who are suicidal, the opiate epidemic, and the needless loss of lives from diseases of despair.

Who Am I:

1. Currently manage a small private practice as a licensed clinical professional counselor
2. Worked in New Zealand as registered psychologist under a national healthcare system
3. Began as a licensed clinical professional counselor in Maryland prior to implementation of managed healthcare. Clients paid me directly and submitted receipts to insurance company.
4. Professional profiles can be found on : Psychology Today and LinkedIn websites under Linda White, Camden, Maine.

Areas of Concern:

1. **Lack of oversight of insurance companies on behalf of healthcare providers.**
The Maine Insurance Bureau only advocates for subscribers of insurance.
2. **Impact of managed care/insurance companies on financial efficacy as a small business owner in private practice**
 - a. Non-billable provider hours invested with insurance administrative issues diverts from clinical hours with clients thus reducing size of caseloads.
 1. keeping up to date with all the policies, plans and procedures of various insurance companies.
 2. Time invested navigating various departments within insurance company
 3. Understanding relationships and affiliations between various companies:
Affiliation between Anthem/Availity/Behavioral Health Care Providers
and affiliation between United Healthcare/Optum as two examples.

Evolutionary Recovery & Psychotherapy, LLC

- b. Navigating fragmentation within insurance companies
 - 1. Offshore staff not adequately trained and language barrier contributes to communication challenges and incorrect information.
 - 2. Circular phone tree system repeatedly asks for information that it does not register and then disconnects. Reroutes calls back and forth.
- c. Senior clinicians reimbursed at same rate as those entering the profession.
- d. Deductibles of policy variance between in-network and out of network providers prohibit clients from working with an out of network provider. For example a client with CHO had a \$500 deductible for an inpatient mental health provider and a \$15,000 deductible for an out of network mental health provider.

3. Impact of managed care on clinical efficacy due to insurance claims issues

- a. Unpaid claims become a clinical concern within therapeutic relationship
- b. Clinical relationships have been terminated prematurely or compromised due to unpaid claims/remittances through no fault of client or provider.
- c. Time is invested in administrative and financial concerns than would be better invested in the clinical aspects of clients presenting concerns.

4. Specific Examples: Documentation available upon request

- a. Over a year of non-billable administrative hours were invested in the resolution of claim issues due to internal administrative issues. Companies involved were Anthem, Community Health Options and Harvard Pilgrim/Optum.
- b. February, 2021: \$3000 in past due invoices for six Anthem clients with two client accounts of outstanding invoices over \$1000. Decision was made, in collaboration with clients to not schedule sessions until invoices were paid. Last outstanding payment was received this weekend, May 8, 2020, for invoices billed for services rendered in November and December, 2020. Clients were willing to self pay for sessions until overdue invoices were paid by Anthem to maintain continuity of care. The provider agreement prohibits this thus clinical services

Evolutionary Recovery & Psychotherapy, LLC

were interrupted or terminated due to claims processing errors and delays

through no fault on provider or clients part. Providers we are not informed as to the reason for the delay in payment.

- c. Over 400 provider in Connecticut filed a complaint to Anthem. Their complaint, found in the link below, mirrors the concerns experienced by Maine providers:
<https://patch.com/connecticut/southington/connecticut-mental-health-providers-file-complaint-against-anthem>

In Summary: Why Universal Healthcare is needed:

Universal healthcare would over-ride the current concern of no oversight of health insurance companies on behalf of the providers. Clinicians focus could return to clinical care and return full case loads rather than spending valuable clinical time on non-billable administrative issues. There would be an immediate improvement in clinical and financial efficacy. The current alarming attrition rate of experienced clinicians would dissolve with a return to the profession.