### Office of Affordable Health Care 2023 Public Hearing Comment Solicitation – <u>Payers and Providers</u>

Written comments are due by midnight on Friday October 6<sup>th</sup>, 2023. Comments may be emailed to <u>meg.garratt-reed@maine.gov</u>, and should be attached as a word document or PDF. Please note that comments are not confidential and will be posted publicly.

### Submitter Information

Organization: Family Vision Solutions Individual submitter's name: Dr. William Gove Title: Optometrist

### **Comments**

1. Please identify and briefly describe the top (2-3) concerns of your organization in reducing health care cost growth and promoting affordability of health care for consumers.

One of the main issues with skyrocketing health care costs is the difficulty with insurance carriers not providing timely or accurate payment. The amount of admin time it takes to rectify the situation takes time away from my schedule of seeing patients. To make payments of rising costs elsewhere, that drives up costs to patients. In larger practices, they have to hire specific billing individuals simply to deal with billing insurances, thus driving up the costs of healthcare exponentially as the size of the practice grows.

2. Of the concerns described in question one, are there characteristics specific to Maine

## (geographically, economically, demographically) that contribute to the significance of the issue here?

MaineCare and Anthem are the worst. I personally do not partake in MaineCare as a provider specifically because dealing with them is difficult. For example, when you call them, MaineCare restricts that you only talk about three patients before they hang up on you and force you to call back and wait on hold for over another 30 minutes. At one point, they de-credentialed an optometrist within our state and denied several claims but then were unable to provide a list of all the patients that were denied. The lack of accountability from our own state's Medicaid program is disparaging and reflective of how many providers do not want to partake as credentialed - a travesty to our existence.

# 3. Please identify and briefly describe the top strategies your organization is pursuing to address these concerns, as well as metrics for success and any results observed.

I have reached out to our national advocacy group to begin possibly discussing a method of quality measures that could be enacted to quantify the relationship between providers and insurance carriers. Currently, NCQA does a great job maintaining health plan grades for quality measures between providers and patients and patients and carriers but currently nothing exists for carriers and providers. It would be great if Maine was the first to enact and implement a quality measure system.

4. With as much specificity as possible, please identify and describe the top state health policy

### changes your organization would recommend to support your efforts to address those concerns.

Possible quality measures could include: how quickly carriers pay providers, how accurately carriers pay, how quickly providers submit claims compared to DOS, how quickly carriers resolve issues, etc.

### 5. Please share any additional comments.

If our state's federal elected officials could remove sequestration at the federal, that would be helpful.