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# Nevada Alliance *for* Retired Americans

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March 13, 2003  
Senate Bill 171 (BDR 57-243)

Senator O'Connell

**Requires managed care organizations to establish a system for independent review of final adverse determinations concerning allocations of health care resources and services.**

Chairman Townsend and Committee members,

My name is Scott Watts, and I am the President of NARA. I am speaking today **in support** for Senator O'Connell's bill that will lessen some of the confusion for our retired members.

Too many times health care organizations seem to think that our senior citizens have lost their intellects as they age. They set up policies and procedures that would confuse mental giants. Health care is the most important issue that faces our members today. As we age, we find that we need more medical care than ever. In many cases, health care determinations and what procedures are covered under our medical plans are made by risk managers and not health care providers. This leads to many adverse determinations of what services the health plan will pay for. Many of these claims are challenged, but everything has always been under the control of the health plan administrators. Setting up some type of an "**independent review panel**" could assist many of our members. Because many claims are turned down for interesting reasons, seniors are faced with ever growing medical bills

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that eventually affect their quality of life. Our members are retirees. They live on a very specific amount of money on a monthly basis. When our medical costs go up, we have to cut out other things. In some instances, the choices that are cut are food or medication. That certainly affects our "quality of life"

As I said on AB 79 - having the reviews done in a timely basis also will make a difference. We hear horror stories about medical claim disputes going on forever, with virtually no resolution and continuous threats of collection actions to be taken. We are a different generation; we have always paid our bills and continue to want a good credit history. So, in many cases, I am sure our members just get tired of fighting the system and end up paying for the medical services rather than continuing to fight. This plays into the hands of the large medical organizations plans that should have paid the claim.

Although this legislation will affect all Nevadans, this will benefit seniors and retirees much more. We hope you will be able to get the 2/3 majority needed in the Senate and Assembly to pass this legislation.

Thank you for your attention.