Chairman Barta, Vice-Chairman Boehm, members of the Senate Industry and Business Committee:

My name is Susan Finneman. I live in Bismarck, ND. I was born and raised in North Dakota. My husband, Mike, was born and raised in Golva, ND. My mother was a nurse. I have two siblings and one brother-in-law that are physicians. I worked for 20 plus years as a Purchasing and Production Planning manager at a manufacturing firm.

My personal values regarding healthcare choice started when I was young. My first-grade teacher suspected that I had hearing issues. It was discovered that I had 0% hearing in one ear and

10% in the other. Our insurance allowed us to seek out and use specialists to identify and treat the problem. My parents did not have to jump through hoops to find and obtain the necessary care and restore my hearing to normal levels. I did not lose ground in school.

In March of 2015, I had surgery in Colorado to repair a disc in my spine. This surgery initially seemed to work but in April I started to have pain and numbness in my lower body. By the end of June, I was no longer able to get in and out of bed without assistance. I had to bend over a walker to get around and had to crawl up and down the steps of my home. My pain was usually 9 or 10 on a scale of

10. Throughout this period of time, my physician repeatedly asked for preauthorization for MRI and CAT scan imaging. The insurance company did not respond.

When I lost control of my bladder and bowel, I went to the ER. Due to the emergent situation, preauthorization was not required for the imaging. It was discovered that I had an infection in my spine.

The infection had destroyed all the repaired disc, 50% of the vertebrae above it and 30% of the vertebrae below it. If I had fallen or moved incorrectly, my spinal cord could have been severed. Reconstruction surgery was now necessary.

Additionally, I began what would become a 6-month course of two IV antibiotics that needed to be infused twice a day. That course was followed by a year on oral antibiotics. I was on oxycodone and morphine to manage the pain. The consequences of use of these drugs are well known.

On October 30^{th,} my reconstruction surgery was scheduled for Monday, November 16th. The surgeon's office immediately began working on obtaining authorization from the insurance company. On Friday, November 13th I received a call from the surgeon's office. They had still not received authorization from the insurance company. They were told that it was on the Medical Director's desk.

The surgery would need to be rescheduled. The next spot on the schedule was not until March of 2016.

I went to the insurance company's web site and found the name and phone for the highest-ranking MD on their executive staff. I made one phone call and had authorization within 30 minutes. I was able to do this because I have medical and system knowledge.

Within a day of the surgery, I was able to walk upright with little pain. Within a week, I no longer needed the walker. I firmly believe that had I not forced the issue, I would not be standing here today.

Senators: This happened ten years ago. Things are far worse today. Insurance companies have increased time delays and are requiring physicians to spend an increasing amount of time and energy on this type of problem. This becomes time that is not devoted to patient care and outcomes. I do not believe that a patient should have to go to these lengths to obtain necessary care. I wonder what happens to those who do not have the resources and background that I have.

As a manager in a manufacturing firm, I learned that having benchmarks and standards of performance are absolutely necessary to assure good outcomes.

It makes sense to hold insurance companies accountable for the timing of their decisions.

I encourage you to vote <u>DO PASS</u> on SB 2280 which allows me as a health care consumer to obtain care in a timely fashion from providers that I know and trust.

Thank you for your time.