

OIC Rules Coordinator

From: Craig Ullman <drullman@midwaychiropractor.com>
Sent: Monday, August 4, 2025 12:24 PM
To: OIC Rules Coordinator
Subject: fair bilz

External Email

Dear Office of the Insurance Commissioner,

I am writing to express my deep concern about the use of the FAIR Health database by auto insurers to unilaterally reduce reimbursement for medically necessary care. As a licensed chiropractor with over 25 years of experience serving patients in Washington state, I've seen firsthand how this opaque and arbitrary practice is harming both patients and providers.

Despite patients paying high premiums for Personal Injury Protection (PIP) coverage, many are now being denied the care they need—or are forced to pay out-of-pocket—because insurers are slashing reimbursement based on FAIR Health's secretive algorithm. The database does not account for clinical necessity or regional cost variations in a fair way. Instead, it averages urban and rural data behind closed doors and allows insurers to cap payments at just 80% of billed charges, with no justification or appeal process provided.

This is not insurance—it's cost-shifting disguised as policy. It forces me as the provider to either write off legitimate charges or pursue the patient for the balance, putting me in direct conflict with the people I'm trying to help. Insurers often step in, not to resolve the issue, but to pit the patient against the provider.

This form of "cookbook medicine"—using rigid fee caps without regard for individualized patient care—undermines the provider's clinical judgment and diminishes quality of care. It's especially unjust when the treatment has already been delivered and documented as medically necessary.

These cuts are unsustainable. If my bills are arbitrarily reduced to 80%, it creates a ripple effect that raises overall health care costs, delays recovery, and

increases legal disputes. Providers cannot be expected to absorb these losses or compromise care.

We need full transparency in how FAIR Health data is used in Washington, and insurers must be held accountable for undermining access to care through unjustified payment practices.

Please take immediate steps to:

1. Require insurers to disclose how FAIR Health data is used and calculated;
2. Mandate a fair and open appeals process;
3. Prohibit unilateral fee reductions without clinical or geographic justification.

Patients and providers deserve better.

Sincerely,

Craig Ullman, DC

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