

OIC Rules Coordinator

From: Dr. Darryl Roundy <drroundy@atlaschiro.com>
Sent: Tuesday, July 29, 2025 4:25 PM
To: OIC Rules Coordinator
Subject: Re: R2025-05 First Prepublication Draft Comment

External Email

Sorry, for got to change [City/Region] University Place, WA:-)

Regards,
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Dr. Darryl Roundy

On Tue, Jul 29, 2025 at 4:20 PM Dr. Darryl Roundy <drroundy@atlaschiro.com> wrote:

Dear Commissioner Kuderer,

I am writing to express my deep concerns regarding the use of the **FAIR Health database by auto insurers in Washington State** and its troubling implications for both patients and healthcare providers. As a practicing provider in [City/Region], I have directly witnessed how this opaque reimbursement tool is being used to systematically undercut medically necessary treatments—leaving patients vulnerable and providers unfairly penalized.

The crux of the issue lies in **the complete lack of transparency around how FAIR Health determines its payment benchmarks**. Insurers routinely cite it as justification for slashing reimbursements, but neither providers nor patients have access to the actual methodology or underlying data. This leaves us powerless to challenge arbitrary payment reductions and often forces patients to absorb the cost difference for care they rightfully assumed would be covered under their policy.

It is **unacceptable** that auto insurance companies—who collect premiums under the promise of covering necessary medical care—can turn around and use a private, unregulated pricing database to deny fair payment. The result is a system of “cookbook medicine”, where reimbursements are capped based not on the complexity of a patient's needs, but on a vague average that fits no one particularly well. Health care is not a one-size-fits-all industry, and using FAIR Health as a blanket pricing tool undermines individualized care, recovery, and clinical judgment.

In my own practice, I have seen treatment plans tailored to post-accident injuries—particularly involving spinal and soft tissue trauma—cut down arbitrarily to **80% or less of billed charges**. This not only disrespects the clinical expertise required to design these plans, but also places significant pressure on my patients, many of whom are already physically and emotionally vulnerable. In several cases, patients have had to delay or forego treatment simply because of unexpected out-of-pocket expenses created by these insurance reductions. In others, my clinic must consider shifting the financial burden elsewhere in the health care system—often leading to increased long-term costs.

We urgently need the Office of the Insurance Commissioner to take the following actions:

1. **Require full transparency and public oversight of how FAIR Health data is calculated and applied.**
2. **Prohibit the use of unregulated, proprietary databases to unilaterally cap provider reimbursement.**
3. **Ensure that insurers are held accountable for honoring the full scope of care outlined in patient policies.**
4. **Recognize and protect the right of patients to receive the care they pay for, and the right of providers to be paid fairly for medically necessary services.**

If this issue is not addressed, Washington's patients and providers will continue to bear the financial and ethical weight of a reimbursement system designed without their input or oversight.

Thank you for your attention to this critical matter. I strongly urge your office to revise the proposed rule under **R2025-05** to include **concrete measures for transparency, fairness, and accountability** in insurer payment practices.

Sincerely,

Dr. Darryl Roundy

Atlas Family Chiropractic, PC



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