

Kim Thomsen



My life changed on January 26th, 2010. As I lay in the emergency room afraid with little to no feeling from my neck down, I said to my parents, “You have to make sure all of the doctors participate in my network.”

My mom replied, “**Don’t worry about it because no-fault will cover it.**” At that moment, one fear was lifted and I was able to focus on the next steps and recovery. It has been a challenging journey, but no fault has been with me every step of the way. From the moment I left the hospital, I have been able to gain my life back bit by bit. Even before I was able to return to my house, help was essential.

My Caregivers help me with daily tasks that others take for granted (dressing, showering, toileting, safely transferring, turning in bed, walking/mobility, safely exercising, etc.) I have been able to continue to work as an educator, and volunteer with 4-H and church while also being able to live a quality life because of no-fault.

If the rates are not adjusted, I would lose access to the resources that allow me to live my life. **There are no substitutes for quality care.**

SOLUTIONS

- Continuing the percentage formula of Medicare as outlined in SB1/PA21 (as is).
 - Provide language similar to our MI Worker’s Compensation & Disability Act for Home Health Care Providers shall be reimbursed either at the providers usual & customary charges or reasonable payment, whichever is less.
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- This assures critically needed care & services would continue.
 - The addition of Medical Utilization Review, in the 2019 Statute, assures cost controls & sustainability.
 - Shouldn’t drivers who purchase Unlimited Lifetime PIP coverage options, and therefore pay the MCCA fee, expect a robust Post-Acute network?