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Chair Greenlick and Members of the Committee:

Thank you for the opportunity to provide testimony on behalf of the Oregon Nurses Association and the Nurse Practitioners of Oregon in strong support of SB 1503 A. During the 2013 legislative session the Legislature passed House Bill 2902 to ensure payment parity for Oregon's Nurse Practitioners and Physician Assistants. Passage of this law requires commercial insurance carriers to reimburse NPs and PAs working in independent practice the same rate as physicians when they provide the same **mental health** or **primary care** service and bill insurers using the same codes. This law did not change the scope of practice of any provider.

Across Oregon, Nurse Practitioners and Physician Assistants are a critical part of our health care delivery system, and in certain parts of the state an NP or PA is the only primary care provider in their community. Starting in 2009, some private insurance companies arbitrarily cut reimbursement rates for some NPs and PAs in independent practice. In these cases this reimbursement disparity—based on the type of the provider, not on outcomes—limited patient access to care and made it difficult for providers to continue to meet the primary care and mental health needs of Oregonians.

Oregon's payment parity law was the product of much discussion and compromise. After a multi-session effort, an agreement was reached that included amendments to address concerns that were raised throughout the process. Insurers were expressly prohibited from lowering physician rates to be in compliance with the new law, and the Legislature created a task force on primary care and mental health reimbursement that reported back to this Committee in 2014 and 2015. As of December of 2015, the co-chairs of the task force concluded—based on an informal audit conducted by DCBS, the passage of SB 153 during the 2015 legislative session, and robust health care reimbursement conversations happening through the Oregon Health Policy Board—that the task force fulfilled their mission and no longer needed to continue to meet. No concrete recommendations regarding HB 2902 were suggested, but the task force did encourage the legislature and the Oregon Health Policy Board to continue to explore broader payment reform options. ONA and NPO are committed to this mission, and as such supported the adoption of the -1 amendment in the Senate, directing DCBS to continue to look at the impacts of HB 2902 and report back to the legislature.

ONA and NPO strongly urge you to pass SB 1503 A and remove that sunset and ensure Oregon's payment parity law remains intact. As Oregon continues to transition to an outcomes based health care delivery system, changes in our health care system that prioritize primary and preventive care services help fulfill our mission to keep Oregonians healthy and limit costs. Oregonians rely in part on the services provided by NPs and PAs to achieve this goal and NPs and PAs rely in part on Oregon's payment parity law to ensure they are able to provide the care their patients need.