



Credentialing Requirements – HB 3400

Background:

The Oregon Health Policy Board's Healthcare Workforce Committee's 5-Year Strategic Plan for Primary Care Provider Recruitment in Oregon recommended the following:

“Increase access to primary care provided by Naturopathic Physicians (NDs) by removing coverage and credentialing barriers. In some locations, NDs are an underutilized and immediately available primary care workforce.”

In keeping with this recommendation, the legislature passed HB 3301 in 2015, which created a pathway for insurers to credential naturopathic doctors as primary care physicians.

The Problem:

While some insurers complied quickly with HB 3301, many insurers found loopholes that allowed them to create credentialing criteria that are unattainable by 99% of naturopathic doctors. Months of negotiations with individual carriers failed to change policies.

Months of discussions with the Oregon insurance division eventually led to recognition that there are “inconsistencies” in how carriers apply their credentialing criteria to NDs. However the insurance division has yet to provide guidance or enforcement for HB 3301.

Meanwhile, patients encounter the same barriers to care that HB 3301 was designed to address. When carriers refuse to contract with naturopathic physicians as “primary care providers,” and instead categorize NDs as “specialists,” patients experience:

- Higher co-pay & co-insurance.
- Denial of payment for preventive services when performed by a ND, including preventive screenings, vaccinations, etc.
- Delay in care or denial of care if the plan requires a referral from a designated “PCP” in order to see a naturopathic physician “specialist.”
- Delay of care or lack of care for patients who are not interested in changing doctors or seeing a conventional doctor for preventive services.

The Solution:

HB 3400 provides more specificity to the language in HB 3301, to provide insurance carriers and the insurance division clear guidance on credentialing criteria. While establishing credentialing criteria is an acceptable norm for insurers, that criteria cannot exceed the education standards that are required by the state of Oregon to license naturopathic doctors, nor can it be designed to specifically and intentionally exclude naturopathic doctors.

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PARTIAL REVIEW OF WHY HB 3301 (2015) NEEDS HB 3400

June 5, 2015: HB 3301 passes with January 1, 2016 effective date.

August 20, 2015: Met with Moda to discuss equitable credentialing criteria and implementation.

August 25, 2015: Met with insurance division to request that division consider rule-making to articulate clear expectations for implementation vis a vis federal provider non-discrimination laws.

October 5, 2015: Insurance division indicates they won't develop administrative rules for HB 3301.

September 2015 – May 2016: Moda establishes requirement that NDs must have 3 year residency, commensurate with MDs/DOs, but not required for Nurse Practitioners. Many email exchanges between OANP and Moda with OANP explaining that less than 1% of NDs have access to a 3-year residency. In November, Moda confirms they will not change their policy.

November 3, 2015: Met with insurance division and expressed concern about Moda's criteria.

December 2015: Insurance division says they are communicating our concerns to Moda.

December 2015: HealthNet issues notice that they will begin credentialing NDs as PCPs. Regence issues FAQ that NDs can already credential as PCP with 1 year residency. Lifewise advises that they already credentialed NDs as PCPs based on who the member designates.

January 2016: OANP follows up with insurance division to see if Moda has responded.

February – May, 2016: Various meetings and email conversations with Providence, whose policy requires a 1 year residency. Providence states that any profession that has a residency available to any of its providers must have a residency to credential as PCP. Nurse Practitioners have residencies available to them, but Providence waives the residency requirement for Nurse Practitioners. May 19, 2016 email from Providence they will not change policy.

March 2016: Various correspondence with Regence government affairs liaison and OANP, seeking clarification on their credentialing criteria requiring a 1 year residency. OANP is told the credentialing team will reach out to us "very soon," and hears nothing.

July 11, 2016: Met with insurance division regarding dissolution of Oregon Health Co-Op. Expressed concern that Co-Op members with ND PCP would find difficulty replacing their PCP because of credentialing barriers of other carriers.

August 17, 2016: Met with insurance division which agrees that discrepancies in credentialing criteria is not equitable vis a vis NDs and begins plans to take action.

September 28, 2016: Met with insurance division which indicates intent to draft a bulletin that focuses on credentialing issues of HB 3301.

November 9, 2016: Met with insurance division and discussed additional research the division is doing to understand various certification programs and training requirements across professions. Indicates possibility of pulling together stakeholders before legislative session.

February 24, 2017: Insurance division advises that their process has been put on hold by changing federal landscape and Oregon legislative session, and that language clarification would help.

<1% of NDs Able to Obtain Criteria	~<10% of NDs Able to Obtain Criteria	Criteria Attainable by all of NDs:
		