



March 5, 2019

Chair Salinas and Members of the House Health Care Committee,

We appreciate the workgroup discussion preceding the proposal of HB 2845; however, we have serious concerns regarding new language mandating reimbursement to certain provider types we believe could present a safety issue for our members. The organizations listed above are supportive of nearly all the proposed language, with the exception of the forced reimbursement provision.

We support the extension of maternity care to include postpartum care for mother and child for 60 days following delivery. We also find the proposal to require good faith negotiations for facility fees a step in the right direction to allowing birthing centers a better opportunity to contract with insurers. The language regarding cost-sharing is unnecessary as most insurers do not have different member cost sharing (either in or out-of-network) for a hospital provider as compared to a nonhospital provider.

The primary issue of concern comes down to patient safety and our ability to credential providers. Certified Nurse Midwives (CNM) and Certified Midwives (CM) are trained to standards of the American College of Nurse Midwives and both are required to take a certifying exam. The importance of the certifying exam is that it forms the basis for a standard of care, which is nationally recognized and consistent across the country. We rely on that standard to credential providers and contract with clinics.

While Direct Entry Midwives in Oregon are now licensed, they have no such nationally recognized certifying exam, and their training is often by apprenticeship with CNMs and CMs. Therefore, their knowledge base and skill set will vary markedly from clinician to clinician, unlike CNMs and CMs. We believe the same is true for naturopathic physicians. Their training in obstetrics varies greatly from school to school and again, there is no nationally recognized certifying exam to ensure consistency of knowledge base testing. Therefore, we would have trouble credentialing these providers in order to provide reimbursement in line with the language of the bill, and we request that section be removed.

We respectfully encourage the committee to remove lines 23 through 27 on page one and lines 1 through 4 on page two, before moving this bill forward. We cannot support any mandated provider reimbursement that will lower the standard of care we believe protects patient safety.