

Dear Behavioral Health Committee,

I live in Aloha, Oregon and am a certified life coach and certified clinical hypnotherapist. I'm also on a steering committee made up of alternative and complementary practitioners. The committee is called the Oregon Health Freedom Access Coalition.

Like you, I'm very concerned about the welfare of Oregonians as well as the practices of alternative and complementary practitioners.

While I applaud the Oregon legislature for working hard during these difficult times, I have the following serious concerns about HB 2394:

1. This bill takes away the right of Oregonians to choose their own alternative or complementary practitioner.
2. The passage of this bill would put many Oregon alternative and complementary providers out of work during difficult times.
3. A similar bill was introduced in 2017 and was tabled because there was a huge outcry against it -- because we don't want or need more regulations and an oversight board.
4. The bill labels the current situation as an emergency situation and threat to public safety. But there has been no documentation that there has been a public safety threat.
5. Complementary and alternative practitioners don't practice medicine or mental health counseling and should not be regulated in the same way as medical and mental health counselors are regulated by professional boards. Most of us spend a great deal of time training initially and also spend a lot of time in continuing education.
6. It is not in an alternative or complementary provider's job description to assess, diagnose or treat a mental, emotional, or behavioral disorder.
7. The definition of alternative well-being provider is too vague. Care givers, certain types of ministries, and other professions fall under the given definition. Too many professions that have no relationship with each other have been lumped together into one category.
8. Alternative and complementary providers have no say as to who is to govern them. There is no provision to put alternative or complementary providers on the governing boards.
9. We don't want to face this every few years -- and have a better approach that 11 other states use as their model of legislation. Its formal name is the Oregon Consumer Access and right to Practice Complementary and Alternative Health Care Act. (Working name: Safe Harbor Exemption for short) Many other states are introducing or preparing to introduce this type of legislation. It has guardrails that practitioners need to stay within and includes disclosures about what training and experience a practitioner has. If a practitioner violates these, then there is legal recourse with laws that already in place. Let me know if you would like to see a copy of our proposed bill.

Sincerely,

Bela Friedman, Oregon Health Freedom Access Coalition