



## Testimony in Opposition of SB 13

January 26, 2021

Senate Committee on the Labor and Business

Deborah Riddick JD, RN

Good morning Chair Riley, Vice-Chair Hansell, members of the committee. My name is Deborah Riddick. I am the Director of Government Relations for the Oregon Nurses Association (ONA). We represent 15,000 registered nurses throughout the state, as well as our member organization, the Nurse Practitioners of Oregon (NPO). The ONA and NPO membership oppose SB 13, which would prevent, via covenant, patients from receiving continuity of care, with the provider of their choosing, once that provider has left current place of employment.

The ONA and NPO believe the limitations advanced in SB 13 are outdated and contrary to the state's efforts to transform its health care delivery system. Passage of SB 13 would prevent our nursing workforce to meet our state's goal of providing accessible health care to patients by the broadest array of qualified providers possible. Under the bill language section 1(b), has the unintended consequence of infringing upon the sacred relationship between the patient and provider by preventing the previous "products, processes or services" providing by a former employee of the employer from having to patients after leaving their employment. This limitation is the antithesis of our health system reform strategies.

As evidenced by our current pandemic, it is vital that providers be able to reach patients without the restrictions imposed by these noncompete agreements not simply in the short-term but in the long-term, as well. In addition, our members believe that the use of these agreements, in provider settings, result in an inequitable distribution of networks within systems and exacerbate the access disparities between urban and rural communities all across the state. The Oregon Center on Nursing has reported that Oregon, unlike most states, does not have a nursing provider shortage, rather we have a maldistribution problem. Eliminating the use of noncompete agreements in nursing practice has the potential to open opportunities for providers and increase access for patients within these communities.

Oregon has historically led the country in both health care innovation and in broad scope of practice in nursing. Both have resulted in national recognition and serve to hold our state as leaders in the efforts to provide accessible, quality care that puts patients' needs and outcomes first. In its current form, SB 13 would limit access, constrain providers, and would thwart our progress in achieving our triple aim. **Please withhold support unless this section is removed or amended.**