



Rebecca Principle, ND
Kwan Yin Healing Arts Center/NE & NW
Portland
drprinciple@kwanyineast.com

Chair Prusak, Vice Chairs Hayden and Salinas, members of the committee, my name is Dr. Rebecca Principle and I'm here representing the Oregon Association of naturopathic physicians, in favor of house bill 4006.

We are back for a third session asking you to pass a bill which will level the economic playing field for NDs. Our pay parity bill, allows for licensed naturopathic physicians to be optimized in this time of provider shortage - now and into the future.

Naturopathic doctors have been licensed here in Oregon since 1927, and enjoy an excellent patient safety record. Like all provider types there may be outliers, but the vast majority of us provide scientific and evidence-based care and help address an increasing demand for both primary care and integrative medicine.

Like the other provider types that are already paid equitably, Naturopathic doctors are licensed as primary care providers and are eligible to hold a DEA license. We are unique in that our training affords us an additional set of tools in our toolbox, and our patient-centered approach to modern medicine is Individualized, holistic and truly preventive. We are by and large family practitioners, we are not medical specialists and we thus cultivate a robust referral network of other medical providers.

Every single day I am thanked by my patients for the time I take to listen, the options that I offer, and their feeling of empowerment in their health. I am also told how grateful they are that Oregon, leading the nation, allows them the chance to use their insurance benefits to see a provider like me.

Sadly, I feel increasingly uneasy with these effusions. The unfortunate reality is that the unfair reimbursement of Naturopathic doctors by insurers, threatens not only the sustainability of doctors' small businesses, but it also threatens patient access to a provider type that is remarkably popular.

As compared to the other primary care providers we average 50-cents on the dollar. These unsustainable rates span a jarring range from 20-cents on the dollar with one insurer, up to a max of 80-cents with one - just one. That's for the same diagnosis code and the same service provided. Same code, same service.

This disparity continues to force local clinics out of business and it is driving students to practice outside of the state. Medical School loans and a lack of employment opportunities, because who can afford to hire an ND with these reimbursement rates, means they simply can't afford to stay here. Can't afford to work within the state healthcare system that we are all working so hard to bolster.

What this really means is that insurance companies get to dictate care for patients, and patients are losing their doctors. I myself am holding on for some patients that I know want and need my care, losing money on those hours. I didn't become a doctor to make a ton of money, but do deserve to survive and took an oath to be of service to my patients, my family and my community.

We've been here before so we know what some arguments are going to be. I'm going to address as much as I can right now with the precious time I've been granted.

HB 4006 is modeled after a successful bill passed by the physician assistants and nurse practitioners in 2013. Other provider types were ensured pay parity by the legislature and their education was deemed fit,

although not all other provider types go through the rigors of the four-year accredited medical program we attend.

HB 4006 does not lock us into a fee-for-service model. There's language written into the bill that allows flexibility to move into whichever payment structure the state desires. We are asking for equitable treatment now - and then.

Paying NDs at parity will incur a cost to the state, as their plans will be included in the bill. Past OHA analyses indicates the increased cost is a little over \$1 million per year to the plans. This is a tiny fraction of the agency's overall budget - let alone the state's.

And we thoughtfully acknowledge that this cost actually leads to long term cost-reductions due to the addition of preventive and primary care services. Naturopathic doctors don't gouge the system, this is not where great percentages of spending happen.

Our goal is to keep patients healthy so they don't end up at more expensive care services down the line. And we're good at it. That sentiment is mirrored amongst many of your colleagues, and every naturopathic doctor could give you a hundred of them.

Finally, Oregon has an ongoing shortage of healthcare providers in primary care and behavioral health. More than \$100M in financial incentives has been dedicated to recruit licensed healthcare workers to live and practice all across the state. There are 1100 licensed NDs here and ready to contribute. Oregon NDs across the state don't need expensive incentives to become an instant part of the healthcare workforce — all they need is Fair Pay from health plans.

Please pass HB 4006.