

Submitter: Kara Hayden  
On Behalf Of:  
Committee: House Committee On Behavioral Health and Health Care  
Measure, Appointment or Topic: HB2357

I am writing in a neutral position regarding HB 2357. This Bill would establish Oregon as a member state in the interstate compacts for the fields of occupational therapy, speech language pathology, and audiology. It is true that enabling Oregon to participate in these compacts would increase access for patients, clients, and students to a wider variety of providers particularly via telehealth or in person in areas near state borders such as Portland and its proximity to SW Washington. It would also enable greater continuity of care for folks in rural regions to obtain follow up care from their preferred specialist provider via telehealth when they live many states away, such as folks who travel to our medical centers from other states (e.g. folks from Alaska or Washington who travel to OHSU). It would be beneficial for professionals who move frequently due to circumstances outside their control such as spouses of military members. As a speech language pathologist I am always a proponent of increasing access to services and have seen the need for this, particularly when I lived in rural eastern Oregon where the need in the community far outweighed the number of professionals able to serve.

However, I do caution that entering Oregon into these compacts also has very serious potential negative impacts on our local professional workforces. As an employee of a nonprofit that is attempting to conduct a joint venture with an out of state private equity owned for-profit healthcare organization, I know first hand some of the opportunities corporations will exploit when they learn about these compacts. There would now be the ability for employers, particularly regarding for profit employers, to hire remote out of state workers to perform teletherapy in our state at lower wages than what our state would pay to in-state providers due to different costs of living in other areas of our country. It could also lower the barrier for particularly productivity driven, profit driven entities based in our state to recruit remote employees outside of our state to provide services within our state instead of hiring more expensive local in person providers.

In the instance of home health and hospice and outpatient clinics or even large hospital systems with locations across state lines, it would enable employers to easily force employees to work in SW Washington even if those employees weren't hired for those positions to begin with or want to work there.

As for union represented clinicians such as those in school systems and healthcare systems, entering Oregon into an interstate compact would make it much easier for employers to recruit a strike breaking workforce as there wouldn't be the hurdle of

making their employees obtain Oregon licenses to practice.

There are many benefits and potential harms that entering an interstate compact can bring to a profession and to the community the profession serves. I urge caution in approving HB 2357. If approved, I hope that these concerns will be considered and addressed in edits to the Bill language so that all parties can benefit and be protected. We need to expand our patients, clients and student access to services while also protecting our skilled Oregon workforce, and protect the autonomy of our Oregon Boards.