2/10/25

RE: HB3439 - Pay Parity for NDs

Dear Legislation and Advocacy Committee,

My name is Alicia Hart, and I am a naturopathic doctor (ND). I would like to share my experience working in Oregon as a licensed ND and to ask you to please support HB3439.

I grew up here in the Willamette Valley, in a trailer park in McMinnville. My parents grew up in Douglas County and Klamath County. My grandparents grew up in Coos County and Umatilla County. I have always been one of your constituents and I have always been connected to this community. I want to be here, and I want to be part of the safety network for those who need me most.

As far as education, I have a bachelor's of science in biology from St. Martin's University and an ND from the National College of Natural Medicine, where I spent 5 years in training. I completed a 3 year residency in family medicine at Southwest Family Physicians, where my attending Cynthia Gulick DO is a conventionally trained physician.

I began working in primary care in 2016 with a patient panel that was heavily biased towards the care of medicaid patients because I wanted to give back to the community that I grew up in. I ran a gold level vaccines for children program for 5 years where I personally improved vaccine rates in vaccine hesitant communities with compassionate, careful communication.

When 2020 hit, I coordinated with one of the infectious disease fellows in charge of the covid response at Harvard, Christina Yen, MD; to create safe guidelines for my primary care clinic and for local businesses like SW Portland Martial Arts. When my small clinic went under due to inequitable compensation and the economic impact of the pandemic, I continued to serve my community at SW Family Physicians- another high medicaid panel.

As a primary care provider, I have made house calls to ensure that my diabetics with serious infections were tolerating their antibiotic routines with no issue. I have written letters to embassies to support family reunification for refugees devastated by war in the middle east. I have called all of the specialists involved in complex care and made sure that they were all communicating with one another. I've fought the preauthorizations to change forms of insulin when the pharmacy was out of a patient's normal medication. I've filled out the FMLA paperwork for post surgical recovery that the surgeon told my patient to bring to their PCP. I ordered the labs that the rheumatologist told my patient to bring to their PCP. I have refilled the medications that the gastroenterologist told my patient to have PCP refill. I have held people while they cried, cheered them on as they got well, and protected those among us who needed an advocate as best as I have been able to. I have mentored students who are now MDs, DOs, PAs, NPs, and NDs. I've written letters of recommendation, answered late night crises of faith, and helped people with their college accommodations.

I have done my best to follow evidence based standards of care, and to always treat the patient who has the diagnosis rather than only treating disease itself. Despite this, the state does not value my contributions to my community. The reimbursement discrepancy perpetuated from insurance companies which unfairly compensates me less than my colleagues makes primary care unsustainable. My student loans were given at the same rate as my MD and DO colleagues, my costs of doing business are the same as my conventionally trained colleagues, and yet it is still legal for insurance companies to pay me 40-60% less than they pay my colleagues- even if my colleagues consulted me for management help!

I recently transitioned out of full primary care- though I am still holding the gap in mental health treatment- primarily because I cannot pay for my loans, my costs of business, the cost of renting in Portland, the inevitable next set of shoes that my children need on this diminished rate of pay. This has been disruptive in care for the patients who cannot follow me due to cost-and heartbreaking to make this choice to ensure my own family is fed and housed.

I am here, still serving my community. I am here, asking for justice. Clearly a system reporting billions in profit while delaying, denying, and "defending" against paying providers will not choose to do the right thing on their own. Please help ensure that folks have access to care, and that providers that are doing the work are compensated the same across the insurance spectrum. Please support pay parity for NDs.

Sincerely, Alicia Hart OBNM License #3078 Portland, OR