

February 13, 2024

The Honorable Representative Rob Nosse
Chair, House Committee on Behavioral Health and Health Care
State Capitol
Salem, Oregon 97301

Re: HB 3439 Relating to Naturopathic Physicians

Dear Chair Nosse and members of the House Committee on Behavioral Health and Health Care, Providence Health Plan (PHP), a not-for-profit, regional health insurance provider, rooted in Oregon, is committed to ensuring that Oregonians have access to high-quality, affordable health care that meets our members' diverse needs. To this end, PHP partners with providers across the state to create provider networks that offer high-quality, affordable care that is responsive to the needs of our members and the communities we serve.

PHP recognizes and appreciates the role Naturopathic physicians (ND) play in the care continuum. However, we oppose policies that would compromise our ability to create and maintain provider networks that are both cost effective and responsive to our members' diverse healthcare needs. As such, we are opposed to HB 3439, which institutes payment parity between NDs and MDs.

PHP varies reimbursement rates among providers to reflect differences in licensure type, education, training, and geographic area served. This variance is appropriate to ensure that we have sufficient high-quality providers to meet the diverse needs of our members. Although NDs may perform many of the same services as MDs, they are not able to perform all of the same services. Further, MDs have additional training, education, and residency requirements that gives them a deeper expertise than NDs, whose licensure does not have the same requirements.

Among PHP's members, MDs are needed to care for higher acuities. PHP members seen by naturopaths have 13.6% lower acuity and receive 30% fewer guideline-based cancer screenings. Mandating fee for service payment rates that fail to account for patient complexity or the comprehensiveness of care our patients require would contravene our efforts today to ensure that our members receive the right care, at the right time, and for the right price. We anticipate that such efforts would further contravene future efforts to provide access to such care in the future. If parity were to become available for the less rigorous credential, it is likely that

aspiring providers would pursue an ND, rather than an MD, reducing the number of MDs available in the community to support patients with more complex needs.

In addition to the expertise that MDs offer our members, MDs have administrative costs that exceed those of NDs. MDs are required to carry malpractice insurance, pay licensing fees, pay Oregon medical board fees, board certification fees, and society fees. NDs are not held to the same level of malpractice and license coverage. Therefore, if paid the same, MDs will earn less than NDs.

For these reasons, we oppose HB 3439. We thank you for the opportunity to provide comments and we look forward to further discussion.

Sincerely,



Laurel C. Soot, Chief Medical Officer
Providence Health Plan