



Oregon

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TESTIMONY IN OPPOSITION HOUSE BILL 3060

House Committee on Behavioral Health and Health Care
February 20, 2025

Chair Nosse, Vice Chairs Javadi and Nelson, and Members of the Committee,

The Oregon Medical Board's statutory mandate is to protect the health, safety, and wellbeing of Oregonians by regulating the practice of medicine in Oregon, but HB 3060 prevents us from fulfilling this mission. Therefore, the Oregon Medical Board opposes House Bill 3060, which would enact the PA Licensure Compact in Oregon.

The nuances of compact bills can be difficult to parse through, and each compact is constructed differently. This testimony is directly applicable only to the PA Compact.

In a general sense, compacts aim to simplify multi-state licensure; however, **the OMB already streamlines the application process, provides exceptions to licensure for out-of-state PAs to treat Oregonians via telemedicine, provides immediate licensure for military personnel and their spouses or domestic partners, and issues licenses within one day of receiving a complete application.** We firmly believe that the Oregon Medical Board can continue to issue licenses faster, more affordably, and safer today, than through any compact.

- ***Faster.*** Unlike other states or boards, the **OMB has no delay or backlog in processing license applications** and can issue a license in one business day upon receipt of a complete application.
- ***More affordable.*** **The PA Compact will require additional fees** to sustain the PA Licensure Compact Commission. As a result, applications directly to the OMB will be more affordable than applications through the Compact.
- ***Safer.*** This point is most critical to the Oregon Medical Board. While the Compact sets minimum standards for a PA compact privilege, **the OMB would lose its ability to conduct and act on a background check before licensure.** Specifically, the OMB could not:
 - Conduct a criminal background check,
 - Review malpractice history,
 - Review employment history (including sexual harassment, discrimination, etc.),
 - Require an abstinence-based monitoring program for providers who need to be monitored to safely practice (HPSP), or
 - Require a re-entry program for providers with an extended absence from practice.

The mission of the Oregon Medical Board is to protect the health, safety, and wellbeing of Oregonians by regulating the practice of medicine in a manner that promotes access to quality care.

Patients rely on the State to ensure that their providers are qualified and competent to practice medicine. **While a PA would have a choice to get a license through the Compact or not – patients do not have a choice or a way to know whether their provider has been fully vetted by Oregon’s State regulatory board.** Until the above patient safety parameters can be addressed through the Compact, the Board cannot ensure patients’ medical providers are meeting our standards for licensure.

Health care regulation has been under state authority since the beginning of our nation, but compacts require states to cede this authority to third-party, interstate entities. This weakens states’ rights to regulate the practice of medicine.

Compact law supersedes state law; therefore, the Oregon Legislature’s adopted laws on standards for licensure, continuing education, and disciplinary procedures would be overridden by the Compact. For example, Oregon’s confidentiality statutes for investigations and health care records (ORS 676.150-180) are in opposition to compact laws. Oregon’s pain management (ORS 413.590) and cultural competency (ORS 676.850-855) continuing education statutes also conflict with the compact laws. Where these and other conflicts exist, compact law prevails.

The PA Compact would have a significant fiscal impact on the OMB and would strain existing staff beyond what can be absorbed. Based on other states’ experiences, the OMB anticipates a need to add staff to oversee the compact pathway to licensure, manually review and enter data, process paper checks, and participate in interstate meetings. The volume of investigations are projected to increase in number and complexity, and DOJ costs related to the Compact are expected to be substantial. With the PA Compact not yet operational, and because the OMB is an Other Funds agency, existing OMB licensees would be required to cover these expenses.

Finally, compacts do not solve workforce needs. Joining the PA Compact may increase the number of licenses issued, but it does not increase the national workforce. States that have implemented medical compacts have not solved workforce concerns.

The OMB remains focused on improving our efficient yet thorough application process, along with providing resources and support services to help retain our Oregon medical providers and allow them to provide Oregonians with the highest quality care.

The Oregon Medical Board respectfully requests that the Committee not move this bill forward.

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Oregon Medical Board