## Testimony to Senate Committee on Health Care Chair: Senator Deb Patterson

Vice-Chair: Senator Cedric Hayden

Members: Senator Winsvey Campos; Senator Diane Linthicum, Senator Lisa Reynolds

March 3, 2025

Chair Patterson, Vice Chair Hayden, and members of the Senate Committee on Health Care:

I am writing in strong support of Senate Bill 951, the proposed bill to enhance Oregon's Corporate Practice of Medicine (CPOM) doctrine. This legislation is crucial to address the alarming exploitation of loopholes in our current CPOM regulations by multi-billion dollar corporations and private equity firms. SB 951 will help stabilize Oregon health care quality and access in Oregon by helping prevent a further corporatization of the practice of medicine in our state.

The rapid acquisition of independent clinics by these entities is drastically altering our healthcare landscape, leaving Oregonians with fewer options for community-based care. Over time, corporate entities and their legal teams have devised sophisticated methods to circumvent CPOM laws, undermining their original intent.

The health care "system" as we know it is crumbling. Everyday Oregonians are suffering as a result. We need our hospitals and providers but we don't need insurance plans and conglomerates calling the shots that affect patient care and access.

The risk of a lack of access and services has been a close call or full on reality for patients served by PeaceHealth in Eugene; the Corvallis Clinic; the maternity ward at the Saint Alphonsus Medical Center in Baker City; Bay Area Hospital in Coos Bay; and at the U.S. Renal Care dialysis facilities in Tillamook, to name a few.

Time and time again, corporations and private equity groups see our longstanding, mature healthcare clinics and systems as an investment opportunity. The true north behind the actions and management decisions once these investors gain control is profits, not people.

And when the shareholders or other executive leaders decide they aren't making enough money, reductions in services and or closures happen - which causes a lack of access and the need for Oregonians to travel much farther for care. For someone in labor, this can cause great risk to the mother and baby. For someone needing emergent care, this can jeopardize their likelihood of surviving and/or impact their clinical outcome in other ways. For the patients needing dialysis multiple times a week, this resulted in what one patient at the Tillamook clinic called "a death sentence." And still for others, it may result in them choosing to deprioritize seeking care and experiencing worsening chronic conditions; missed work; an inability to lead a healthy, thriving life; and reduced life spans.

Although I am submitting testimony on behalf of myself as an individual, my perspective is rooted in my experience as a Native Oregonian who has spent his life in Oregon outside my eight years serving abroad in the US Army; as a leader at the Department of Veterans Affairs; as Deputy Director of the Multnomah County Health Department, Oregon's largest county public health department; as President of the Oregon Chapter of the American College of Healthcare Executives (ACHE), a 501c(6) that serves one of the leading professional societies for healthcare leaders in our state and internationally; and as President of Health Care for All Oregon (HCAO), a 501c(3).

I am a Board Certified Fellow in the American College of Healthcare Executives (ACHE) with 30 years of healthcare experience. As the Immediate-Past President of Oregon ACHE, I have been in conversations with fellow health executives, CEOs, and other senior healthcare leaders who are also frustrated with the state of health care in Oregon today.

I am in conversation with leaders around the state who see the impacts of the corporatization of medicine and the (sometimes delayed) second and third order effects of mergers, acquisitions, and the influence of private equity groups (often outside the state).

This consolidation of health care, resulting in more and more smaller systems and/or private practice groups being acquired and controlled from outside interests often results in a lack of services to Oregon communities once those outside controlling interests deem the organization no longer in service of their profit-margins or bottom line.

This bill is a critical step towards closing these loopholes and ensuring that medical practices in Oregon prioritize patient care over corporate profits. It will help preserve the independence of our healthcare providers and maintain the quality and accessibility of healthcare for all Oregonians.

I urge you to support this important legislation to protect our communities' health and well-being.

I implore you to please vote yes and support Senate Bill 951 to help mitigate the harmful effects of unchecked corporate practice of medicine in Oregon. Thank you.

Respectfully,

Valdez G. Bravo, FACHE US Army (1995-2003, OEF) Lake Oswego, Oregon (HD-38, SD-19)