



February 27, 2025

Chair Nosse, Vice Chairs, members of the committee, thank you for having me. My name is Dr. Rebecca Principe and I'm here representing the Oregon Association of Naturopathic Physicians (OANP), in favor of House Bill 3439.

We are here asking you to pass a bill which will level the economic playing field for naturopathic doctors (NDs) and allow licensed NDs to be optimized in this time of provider shortage.

Naturopathic doctors have been licensed here in Oregon since 1927, and enjoy an excellent patient safety record. Like all provider types there may be outliers, but the vast majority of us provide scientific and evidence-based care, and support the state's public health goals.

Like the other provider types that are already paid equitably, naturopathic doctors are licensed as primary care providers and are eligible to hold a DEA license. Our training includes a four-year post-bachelor at an accredited medical school and, for some, a residency. We have the flagship university in the nation, my alma mater, right here in Portland. Our education provides us with both conventional and complementary tools, and our patient-centered approach to modern medicine is individualized, holistic and truly preventive.

In my visits with patients, I am thanked over and over for the time I take to listen, the options that I offer, and the added empowerment they feel in their health. I am also told how grateful they are that Oregon, leading the nation, allows them to use their insurance benefits to see a provider like me.

Sadly, I feel increasingly uneasy with these effusions. The unfortunate reality is that the devastatingly low reimbursement of naturopathic doctors by insurers threatens not only the sustainability of doctors' small businesses, but also patient access to a provider type that is remarkably popular. The record currently shows over 500 letters of support for this bill.



The issue at hand is that, compared to the other primary care providers we average about 50-cents on the dollar. That's for the same diagnosis code and the same service provided. Same code, same service. And this disparity is worsening over time.

These unfair reimbursement practices continue to force local clinics out of business and it's driving students to practice outside of the state. Astounding school loans, that some of you might be familiar with, combined with a lack of employment opportunities are driving new grads out of the state. They simply can't afford to stay and work within the state healthcare system that they were trained in, and that you are all working so hard to bolster.

This is worsening the lack of primary care providers, at a time when we are desperately needed. This is not just about clinic owners, it is about employability. It is very difficult to hire an ND with these reimbursement rates. We have a doctor who submitted testimony to the record that was recently let go from an integrative clinic because, as much as they needed doctors and as much as his patients appreciated his care, the clinic couldn't afford to keep him with how poorly they were reimbursed for his visits. His name is Dr. Gibran Ramos so please refer to his uploaded letter for his full story. This is a clinic of Nurse Practitioners who are paid so much more than Dr. Ramos that he lost his job. And when doctors lose their jobs, patients lose their doctor. So what this really amounts to is that insurance companies get to dictate care for patients. A patient shouldn't lose their doctor because insurance won't pay them fairly.

We've been here before, so we know what the arguments are going to be. I'm going to quickly address as much of these as I can...

HB 3439 is modeled after a successful bill passed by the physician assistants and nurse practitioners in 2013. Other provider types were ensured pay parity by the legislature and their education was deemed fit, although not all of these provider types go through the rigors of the four-year accredited medical program we attend.

This bill does not expand the scope of naturopathic doctors. We're already considered primary care providers and practicing as such. This is not a scope bill.



HB 3439 does not lock us into a fee-for-service model. There's language written into the bill that allows flexibility to move into whichever payment structure the state desires. We are asking for equitable treatment now - and then.

Paying NDs at parity will incur a cost to the state, as their plans will be included in the bill. Past OHA analyses indicated the increased cost to be a little over \$1 million per year to the plans. This is a tiny fraction of the agency's overall budget - let alone the state's.

And we thoughtfully acknowledge that this cost actually leads to long term cost-reductions due to the addition of preventive and primary care services, as these are the services NDs provide. A 2023 report from the Oregon Health Authority cites research demonstrating that every dollar spent on primary care homes yields \$12 in savings to the system. Investing in primary care and preventive medicine is not something we can't afford. I propose that we can't afford not to!

Naturopathic doctors don't gouge the system; our offices are not where great cost to the system is happening. Our goal is to keep patients healthy so they don't end up needing more expensive intervention down the line. And we're good at it!

Finally, Oregon has an ongoing shortage of healthcare providers in primary care and behavioral health. Hundreds of millions in financial incentives have been dedicated to recruit licensed healthcare workers to live and practice all across the state, and those programs are poised to expand. There are almost 1200 licensed NDs here and ready to contribute. Oregon NDs don't need costly incentives to remain a part of the healthcare workforce — all we need is fair pay from insurers. Please pass HB 3439.

Thank you,
Rebecca Principe ND, Chair
OANP Legislative & Advocacy Committee