

Submitter: Eriko Onishi
On Behalf Of:
Committee: Senate Committee On Health Care
Measure, Appointment or Topic: HB2789
Testimony in Support of HB 2789
Submitted by Eriko Onishi, MD, MCR, PhD

Dear Chair and Members of the Committee,

My name is Dr. Eriko Onishi, and I am a primary care physician and a hospice and palliative care specialist. I write to you today in strong support of HB 2789 especially around Advance Care Planning practice.

As a physician deeply involved in Advance Care Planning (ACP), I have witnessed firsthand the critical role that registered nurses (RNs) play in facilitating meaningful conversations with patients about their values, goals, and preferences for medical care. These conversations are essential for providing patient-centered care—especially for individuals living with serious illness or nearing the end of life.

ACP is not a one-time discussion. It is a process that requires time, trust, and skilled communication. RNs are uniquely positioned to engage patients in these conversations due to their ongoing relationships with patients and their ability to listen deeply, explain options clearly, and ensure that care aligns with the patient's wishes. There is a growing body of evidence showing that ACP—particularly when led by primary care team and integrated into routine care—leads to significantly better outcomes. These include reductions in unnecessary hospitalizations and aggressive interventions at the end of life, improved alignment of care with patient preferences, and higher satisfaction among patients and families. ACP also contributes to cost savings in the healthcare system. All of these outcomes support the quintuple aim of healthcare: improving population health, enhancing patient experience, reducing costs, supporting care team well-being, and promoting health equity.

Currently, the inability to bill for RN-led ACP conversations presents a significant barrier. Despite the time and skill RNs invest in this vital work, their efforts often go unreimbursed. HB 2789 would allow for recognition and reimbursement of RN time spent on ACP, aligning payment structures with the realities of team-based, high-quality care.

This bill would support Oregon's commitment to person-centered care, expand access to ACP for more patients, and ensure that our health system truly honors the voices and choices of those we serve.

I urge your support of HB 2789. Thank you for your consideration.

Sincerely,

Eriko Onishi, MD, MCR, PhD

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