

April 22, 2025

To: Senate Committee on Health Care

RE: House Bill 2789, Relating to Reimbursement for Registered Nurses

Dear Committee Members:

Good afternoon, Chair Patterson and members of the committee. My name is Melissa Isavoran with Vibe Health Solutions, and I am submitting this letter of testimony in support of House Bill (HB) 2789 that will prohibit the Oregon Health Authority under specified circumstances from requiring, as a condition of reimbursing the cost of the service, a primary care provider to order a covered care management service provided by a licensed registered nurse to a medical assistance recipient. Oregon's 2023 Health Care Workforce Needs Assessment highlighted access to health care in rural and underserved communities and called for innovative models to improve access and workforce satisfaction. Registered Nurses (RNs) are truly at the center of person-centered health and supporting these providers can improve the health and well-being of individuals *across* Oregon, while reducing strains on the health system.

RNs are a critical component to access to care. Nurses have long brought health care to vulnerable communities, but their value has been forgotten and the services they provide are rarely compensated directly. Many nurses will tell you that they have been "relegated to bed sheets," meaning their services are only reimbursed through facility billing fees. Registered Nurses can practice independently and are required to carry their own liability insurance. Despite that, Registered Nurses are forced to work within facilities under physicians to care for individuals where they lack flexibility and suffer from burn-out due to operational complexities, intense workloads, and the inability to provide quality person-centered care. Currently, the American Nurses Association is working to elevate the role of Registered Nurses and its Foundation funded a community nursing program with Oregon Health and Sciences University and Adventist Health that has shown great success but has no sustainable path forward due to reimbursement challenges.¹ Also important to note, OHA does have a Long Term Care Community Nursing Program for Home and Community-based services under long-term care that allows for direct RN reimbursement, but this does not extend past the long-term care program for acute care of which is a much larger Medicaid population. HB 2789 integrates RNs as independent providers in the health care system and will allow for reimbursement of these valuable services that contribute to person-centered care population health and reduce costs overall contributed to access to care issues and exacerbated and more costly care.

¹ American Nurses Foundation. Reimagining Nursing Initiative: Making Nursing Visible for Healthy Communities. Accessible at: <https://www.nursingworld.org/foundation/rninitiative/direct-reimbursement-nursing-model/making-nursing-visible-for-healthy-communities/>

Put simply, the RN workforce improves health outcomes and can reduce the total cost of care. RNs, as independent providers, deserve a better pathway for health system integration and reimbursement in Oregon. Please pass HB 2789 to remove reimbursement barriers for direct RN services to allow for better utilization of this critical workforce and their valuable and cost saving services they can provide for Oregonians.

Sincerely,



Melissa R. Isavoran
Founder and Principal Consultant
