



Testimony in Support HB 2468-A

**Senate Committee on Health Care
April 22, 2015**

My name is Dr. Jeff Clark. I practice naturopathic primary care in Tualatin, Oregon, in a clinic which I co-own with two other naturopathic physicians. I am on the board of directors and am the Legislative Committee Chair of the Oregon Association of Naturopathic Physicians. I am also the first naturopathic physician to be a member of the Oregon Health Policy Board's "Healthcare Workforce Committee". I am here today on behalf of my Association to testify in support of HB 2468-A.

By way of background, I'll explain a little about how I got here. I have been in practice for 6 years, and practice general primary care. I see everything from acute colds to chronic disease, from basic physical exams to managing complex conditions, coordinating care with a team of other providers, specialists, laboratories and hospitals. I am a contracted in-network provider for just about all of Oregon's insurance carriers.

I was invited to participate in the Insurance Division's Network Adequacy Advisory Workgroup on behalf of the OANP to help enact a vision of using all healthcare providers to the top of their license.

We appreciate that the Oregon Legislature included provider non-discrimination language in the bill that created Coordinated Care Organizations in 2012. This language mirrored language already codified in the Affordable Care Act so that our federal and state laws would reflect and reinforce each other.

We began working with the Oregon Insurance Division in the summer of 2013 about issues relating to implementation of the Affordable Care Act. Specifically, we were focused on implementing what has become known colloquially as Section 2706 of the ACA – a clause that prohibits insurance companies from discriminating against provider types in either coverage or participation in a plan.

That office immediately understood the importance of including provider non-discrimination language in Oregon's own state-level network adequacy discussions in order to keep consistency in networks and insurance coverage for patients moving between Medicaid, the Exchange, and individual or group plans.

Subsequently Commissioner Cali invited us to the network adequacy discussion and included provider non-discrimination language in HB 2468 that will make all parts of Oregon's insurance market accountable to the same standard.

Including the provider non-discrimination language in HB 2468 will provide Oregon's own agencies (regulating both CCOs and, with this bill Oregon's commercial insurance market) with the legal tools they need to educate, implement and enforce laws designed to hold insurers

accountable for providing health plans that can actually provide access to healthcare and ensure that Oregonians have access to all the state licensed provider types that can provide covered services.