

I cannot be at the hearing today, but have the following technical comments to submit on the Dash-1 amendment:

We do not object to gathering data on implementation of the Nurse Practitioner and Physician Assistant payment parity mandate. To the best of my knowledge, our health plans have been fully compliant with the new law.

However, we respectfully request two technical fixes and one minor addition to the Dash-1 before moving the bill out of committee:

1. Since the new Section 3 describes a one-time data collection, we would request that Section 3 sunset after the report deadline.
2. The term "clinic number" is not one we use in processing claims. We require providers submit both the individual National Provider Identification number and the Tax Identification Number of the business entity under which they are billing. To my knowledge, this is an industry standard. We would recommend, in place of "clinic number," the words "clinic identifier." This would capture Tax IDs or any other identifier used for the place of practice.
3. We also recommend adding a data request to the Oregon Board of Nursing and the Oregon Medical Board: How many new, independent Nurse Practitioner and Physician Assistant practices have opened since passage of the law? One of the objectives of the law was to expand access to primary care services, so it would be good to know if more independent practices have opened. The licensing boards probably would have the best information about this.

We offer these suggestions as means to improve the bill, not to oppose it.

Respectfully,

Tom Holt  
Director, Government Affairs  
Cambia Health Solutions  
200 SW Market Street  
Portland, OR 97201