

Chair Greenlick and Members of the Committee,

Thank you for allowing me the opportunity to submit testimony. I am the Executive Director of OPSO, the Osteopathic Physicians and Surgeons of Oregon, which is a group comprised of over 1,500 osteopathic physicians, residents, and medical students in Oregon who are all dedicated to providing top-level, comprehensive care to Oregon's patients.

Providing resources for patients and physician education in the prevention of suicide is of critical importance for OPSO, our members, and the patients they serve. However, SB 48 and the proposed –A4 amendments will not further efforts to reduce suicide rates in Oregon. Requiring physicians to report their suicide assessment continuing medical education (CME) credits does not accurately portray the full scope of continuing education that a physician receives throughout the year. Imposing a rule to track these hours gives the assumption that only CME in the specific topic of suicide prevention is the only worthwhile measure to address suicide.

Mandating CME tracking on a specific topic would create an immense amount of administrative burden for physicians and their office staff. Additionally, trying to separate out individual educational topics is in direct conflict with the philosophy of the osteopathic profession. The principles of osteopathic medicine are founded on the "whole person" approach to medicine. Instead of focusing on an illness or symptom, osteopathic physicians are trained to understand the body as an integrated whole. An understanding of a patients' mental health is integrated throughout medical education. An osteopathic physician is trained to address all aspects of patient health, and that is reflected in our continuing medical education training. An osteopathic educational program addressing diabetes will likely include patient motivation, depression, obesity, and several other aspects that impact the patient. It would be impossible to separate out training that addresses suicide prevention as it is ingrained throughout many comprehensive CME topics.

Due to the comprehensive nature of these educational programs, OPSO opposes topic specific CME mandates of any kind. It is important to remember that for every topic specific CME mandate, we remove the opportunity for comprehensive approaches to patient care. Mandatory training in specific topic areas is costly and ineffective for physicians. Finally, time spent tracking topic specific CME requirements is time not spent treating Oregon's patients. With the continued patient access issues this state is facing, it is not logical to remove physicians from their office.

OPSO respectfully asks for your opposition to SB 48A and the proposed –A4 amendments. Thank you for your time and attention to this matter.

Regards,

David Walls
Executive Director

Osteopathic Physicians and Surgeons of Oregon