

**From:** Greg Esmer  
**To:** [JWMHS Exhibits](#)  
**Subject:** HB 2834 -A9 amendments  
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As an Osteopathic Physician practicing in Portland, Oregon it is my privilege to care for the patients of Oregon. Everyday I treat patients with Osteopathic Manipulative Treatment (OMT) to reduce their pain. This allows me to prescribe opiates less than five times a year despite specializing in the treatment of musculoskeletal pain. Some insurance companies (currently HealthNet and MODA) have denied payment of the office visit (E&M) because it occurs on the same day as OMT. Their belief is that these services overlap. This is not accurate and conflicts with current CPT coding requirements.

If this faulty reimbursement trend continues then I will need to discontinue working with insurance companies and move to a "cash" practice. This would be necessary in order to get paid for the service (OMT) that is fundamental to my medical practice and training. Unfortunately, this would severely limit who can benefit from OMT and not be subjected to the risks of opioids. I do not want to limit my practice to wealthy people. This is not why I went to medical school but I do have bills to pay.

Please note the the -A9 amendments to HB 2834 are **not an insurance mandate**. The bill only requires that insurance plans that cover OMT need to do so correctly, in accordance with CPT guidelines. SB 936A passed unanimously and without opposition. This exact same language is included in the -A9 amendments to HB 2834. Please pass this bill and **stem the tide of the opioid epidemic**.

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