

February, 11 2019

Oregon House and Senate
Committees on Healthcare
900 Court Street NE
Salem, OR 97301

RE: Oregon House Bill 2698 and Senate Bill 136: Removes 10 day supply limitation on prescriptions for certain controlled substances issued by Certified Registered Nurse Anesthetists.


Chair Monnes Anderson, Chair Greenlick and members of the respective committees:

As a primary care provider Nurse Practitioner working in rural Oregon, I am on the front lines of the Opioid crisis facing our nation and state. In the busy multi specialty clinic in which I work, despite constant provider recruitment and retention efforts, most patients have to wait months to be assigned to a new provider. In our community the physician to patient ratios are near a statewide low, while the rates of high morbidity and mortality chronic conditions are high. The demand upon our services is great. It is not uncommon for me to care for 16-20 patients in a day, most of which suffer from multiple high acuity health conditions.

New patient applications stack up on my desk regularly, and I must sift through the applications to ensure that those patient's conditions I take on match well with my skill set and the time I have to devote to them. Some of the most challenging and time consuming conditions that I treat are opioid use disorder and opioid dependency and the multitudes of co-morbid conditions that are linked with them. The chronic pain management providers in our community have full practices and are not taking on new patients at this time, and oftentimes I am forced to refer my patients to providers that are a 2-4 hours drive away. This is impractical for patients to manage traveling 2-4 hours away to treat a condition that normally requires monthly or quarterly face to face visits and frequent drug testing. It is very common for provider after provider to pass up on a new patient application that is already prescribed opioids or ones that have opioid use disorder, and these patients have and increasingly harder time finding providers that have both the time and skill set to care for them safely.

Many of our Certified Registered Nurse Anesthetist (CRNA's) colleagues, whom are already entrusted to provide safe anesthesia care, prescribing the most dangerous medications peri-operatively, have completed national board certified training in pain and addiction management services. All CRNA's are already permitted to prescribe a 10-day supply of medications of all classes, and removing this limitation will improve access to care throughout our state and in rural areas specifically. Reducing the social burden of the opioid crisis takes an all hands on deck approach, therefore I am asking for your support on **Oregon House Bill 2698 and Senate Bill 136.**

Respectfully Submitted,



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