

Submitter: A Pham
On Behalf Of:
Committee: Senate Committee On Health Care
Measure: HB4130

Dear Whom it May Concern:

I am writing to you to express my strong opposition to House Bill 4130 which seeks to prohibit shareholders and officers of professional corporations from participating in the management of these corporations under specific circumstances. As a practicing physician, I believe that this bill will pose significant challenges to the efficient functioning of medical practices and delivery of quality health services. While I understand the need for transparency and ethical practices within professional corporations, this bill's provisions are overly restrictive and may inadvertently hinder operations some current medical practices. Here are some of my concerns:

Limiting Collaborative Management: HB 4130 prohibits physicians, physician assistants, and nurse practitioners who hold dual roles – both shareholder/officer in a professional corporation and employee of a management services organization (MSO) – from participating in management or voting on critical issues. This restriction hinders effective collaboration within practices. For example, a physician with expertise in both clinical care and practice management might be uniquely qualified to contribute to decisions on staffing, scheduling, or technology adoption. Based on this text, I would have no say about this at my own practice.

Undermining Shareholder Rights: The bill unfairly disenfranchises shareholders by denying them the right to vote on matters directly impacting their own practices. This includes decisions related to ownership structure, governance models, and financial strategy. Such restrictions could discourage investment in independent practices. I am concerned that in the long run, this will actually decrease the amount of medical practices to take care of patients. This would likely result in higher prices, deductibles, and copays for Oregon citizens.

Penalizing MSO Collaboration: Many practices rely on MSOs for administrative tasks and expertise, allowing physicians to focus on patient care.

This bill penalizes physicians who choose this model by essentially barring them from leadership roles within their own practices. I would rather focus my time and energy taking care of patients, but I would admit to not knowing the ins and outs of balance sheets. At our practice, we have always prioritized taking care of patients first and foremost.

Potential Harm to Patient Care: Ultimately, any legislation impacting medical practices must prioritize patient well-being. HB 4130's restrictions, by limiting

physician involvement in management, could inadvertently harm patient care. For example, a physician with valuable clinical experience and leadership skills might be prevented from contributing to decisions on quality improvement initiatives or resource allocation, potentially impacting the quality of care delivered. I would have special knowledge about patient's experiences to provide input on decision about staffing, scheduling, or technology that we would use to make our patients happier with their care experience. Without the ability to have a direct say in these decisions, we would feel powerless to enact changes that make our patients more satisfied and comfortable with their care. I would trust someone in management who has insight as an MD over that of a person who only has an MBA.

Thank you for your attention to this matter. As a dedicated healthcare professional, I believe that collaborative decision-making and effective management are essential for the well-being of our patients. I appreciate your commitment to serving our community and hope that you will consider the implications of this bill carefully.

Sincerely,
Anthony Pham, MD
Compass Oncology