

As a 35+ year general internal medicine physician in primary care (still practicing in NE Portland) I am very concerned about the influx of private equity into healthcare in Oregon. Corporate healthcare organizations may promise financial stability and investment in staffing and infrastructure. Unfortunately, around the country we are witnessing closure of hospitals and clinics acquired by private equity and national companies which can and do record large profits in the process. These profits are returned to investors or shareholders, many of whom are outside the state of Oregon. This removes funds from the state of Oregon's healthcare system (profits leaving the state) which results in cutting healthcare resources at the local level, such as staff support for clinics as well as staff in hospitals.

Lack of support staff leads to more difficulty in access to healthcare for our community members as primary care struggles to keep up with the growing need of an aging and more complex patient population. Clinician and staff burnout inevitably leads to increasing difficulty in recruitment and retention of the primary care workforce and subsequent access difficulty as we try to serve our patients and communities. Less is definitely not more in this case. The American College of Physicians, our national internal medicine organization, states clearly that "physicians in any practice setting should challenge prioritization of business over patient interests" and I agree.

Oregon sadly ranks 34 of 50 among US states for access to primary care disproportionately affecting rural and underserved urban areas. Waits for new patient appointments in locales such as the Willamette Valley are a minimum of 6 months and often more than a year for a Medicare patient seeking care from an internal medicine physician.

In the interest of the health of all citizens of Oregon and the sustainability of a functional primary care system to ensure this. I strongly urge you prioritize Oregon patients, communities, and our local healthcare workforce as the primary focus even when care is delivered by corporate healthcare entities.

Voting yes on HB 4130 will be a good first step in limiting the adverse impact of profit driven private equity in health care.

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