

## Essential Health Benefits/Standard Plan Rulemaking Advisory Committee

Summary of public comment received as of **May 14, 2015**.

The Essential Health Benefits/Standard Plan Rulemaking Advisory Committee meetings are open to the public. Limited time is available at each meeting to present comments in person. Whether individuals submit comments in person or not, all individuals who wish to submit public comment are strongly encouraged to do so in writing via email to [essential.healthbenefits@oregon.gov](mailto:essential.healthbenefits@oregon.gov).

Individual	Organization	Rec'd	Public Comment/Testimony
Vern Saboe, DC	Oregon Chiropractic Association	4/9/15	Dr. Saboe wants the committee to know that many Oregon chiropractors act as primary care providers and provide health care interventions. Dr. Saboe's comments included a list of services that are essential health benefits provided by chiropractors. This list of services included services such as ambulatory, maternity, newborn care, rehabilitative and habilitative, laboratory, preventative care, disease management and pediatric, all of which, according to Dr. Saboe, are within a chiropractor's clinical training and scope of licensure and practice. Dr. Saboe indicates that benefits not included in a chiropractor's scope are emergency services, hospitalization, mental health, substance abuse, and prescription drugs. The comments included two opinions from Legislative Counsel addressed to Representative Kennemer regarding discrimination against provider types in the coverage of essential health benefits and regarding DCBS's proposed guidance relating to provider nondiscrimination.
Natalie Weintraub, LMT	Private Practice	4/09/15	Licensed Massage Therapist, Natalie Weintraub, expressed concerns related to discrimination of massage therapists and to the lack of coverage for massage therapy services. She believes that essential health benefits should include massage therapy. She stated that some insurance companies now consider massage therapy to be a rehabilitative service akin to physical therapy. Ms. Weintraub referenced an American Massage Therapy Association article, which can be found at: <a href="https://www.thegrottolibrary.info/Collection/EHB_Final.pdf">https://www.thegrottolibrary.info/Collection/EHB_Final.pdf</a>
P.K. Melethil, MS, L.Ac., Dipl.	Traditional Chinese Medicine Physician	4/09/15	Dr. Melethil asked the group to consider including acupuncture as part of the 2015 essential health benefits benchmark plan. He stated that over prescription of opioids and other narcotics is a national problem and acupuncture can treat a broad range of health issues, including pain management, neuromuscular syndromes, gastrointestinal disorders, and genitourinary dysfunction. Dr. Melethil referenced ORS 677.757, the definition of acupuncture.
Morgan O'Toole	Kartini Clinic	4/20/2015	Ms. O'Toole asked whether the committee will consider federal and state mandated behavioral health parity. She stated that since carriers are allowed to use a third party for these services it could create access issues.
Vern Saboe, DC	Oregon Chiropractic Association	4/20/2015	Dr. Saboe asked the Committee Members and the Oregon Insurance Division to remove references to "Chiropractic Care" in the cost-share matrix and the Wakely documents.

			He stated that the documents used in today's meetings allow for discriminatory treatment of chiropractors.
Vern Saboe, DC	Oregon Chiropractic Association	4/21/2015- Written and in person	Dr. Saboe provided comment on Wakely slide number 12. He stated that licensed chiropractors provide many services that are essential health benefits. He stated that to segregate these covered services into a category of chiropractic care with limitations constitutes discrimination under Section 2706 (a) of the PHSA. He referenced a seven-year prospective study comparing the cost of chiropractic care and medical management that indicated chiropractic care is a cost saver.
R. Mike Shirtcliff, DMD	Advantage Dental	4/21/2015	Dr. Shirtcliff asked if the State Dental Director could give input on the transmission of infections from the primary caregiver to a child in the child's first 6 months of life.
Dwindy J. Wood	Select Benefit Group Account Specialist	4/21/2015	Mr. Wood requested the committee to consider skin cancer screening as a preventive benefit and added that cost share deters members from receiving services.
Vern Saboe, DC	Oregon Chiropractic Association	5/3/2014	Dr. Saboe provided the study and the nondiscrimination language he referenced in his April 21, 2015 public comment.
Vern Saboe, DC	Oregon Chiropractic Association	5/9/2014	Dr. Saboe submitted comments and presented the 2012 OHA letter announcing the choice of the essential health benefit plan and the 2015 Standard Plan Cost Share Matrix to the committee, stating that they characterize chiropractic care inappropriately and in a confusing manner. He pointed out that the standard plans indicated that chiropractic care was not covered and riders cannot be purchased on the standard plan. He requested the committee to remove the reference to "chiropractic care" from the cost-share matrix because he believes it is discriminatory and unlawful.
Sally Marsh	Providence Health Plan	5/12/2015	Ms. Marsh supports the decision to use the PacificSource Preferred Codeduct Value 3000 plan – the 2014 version of the current base benchmark plan.
Maryann Terhune	Unknown	5/12/2015	Ms. Terhune questions whether the PacificSource Preferred Codeduct Value 3000 plan – the 2014 version of the current base benchmark plan – meets the minimum essential coverage requirement. She does not support the use of this plan.
Paul Terdal	Consumer	5/13/2015	Mr. Terdal requested additional details about the PacificSource Preferred Codeduct Value 3000 plan – the 2014 version of the current base benchmark plan – and a copy of the full member handbook and summary of benefits of coverage.