

Naturopathic Physicians Fear Exclusion From New CCOs for Medicaid Enrollees

By [Paul Shukovsky](#)

SEATTLE--As Oregon transforms the way in which it delivers health care to some 650,000 Medicaid members, naturopathic physicians so far have found themselves excluded from the state's new coordinated care organizations (CCOs) that will carry out the reforms.

Oregon, among the vanguard of states in its implementation of health care reform, passed legislation Feb. 23 implementing CCOs that will oversee the integration of physical, dental, and mental health services for members of the Oregon Health Plan, the state's Medicaid program (20 HCPR 387, 3/5/12). The first CCOs began operation this summer and according to Laura Farr, executive director of the Oregon Association of Naturopathic Physicians, none of them have brought naturopaths onto their provider panels.

Emergent Problem.

It's an emergent problem, Farr told BNA Sept. 18, because at least hundreds and perhaps thousands of Medicaid patients getting fee-for-service coverage who receive primary care from a naturopathic physician will be transferred to CCOs on Nov. 1 and they will not be able to take their primary care doctor with them.

“So we now have this dynamic where the state credentials naturopaths and the CCOs do not.”

--Laura Farr, Oregon Association of Naturopathic Physicians

The naturopaths and other alternative providers were encouraged when the Legislature wrote into law provisions intended to prevent discrimination by the CCOs against alternative providers that mirror such language in the federal Affordable Care Act. But Farr fears that the language of those provisions might not be enough to ensure a place for naturopaths in the new world of health care delivery.

S.B. 1509 says that a CCO “may not discriminate with respect to participation in the [*plan or*] organization or coverage against any health care provider who is acting within the scope of the provider's license or certification under applicable state law.” But it goes on to read that “This section does not require that [*a plan or*] an organization contract with any health care provider

willing to abide by the terms and conditions for participation established by the [plan or] organization.”

Farr said naturopathic doctors were represented on an advisory group convened to advise the Oregon Health Authority on how to write the regulations governing CCOs. She said several recommendations were made to ensure inclusion of naturopaths such as a provision that “NDs can and should be credentialed as primary care providers” and another that would define discrimination. None of their recommendations were adopted, she said.

“So we now have this dynamic where the state credentials naturopaths and the CCOs do not,” Farr said. “I believe it is fear of the unknown on the part of the CCOs and misperceptions that are outdated by 40 years about naturopathic medicine.”

“CCOs have said, ‘We don’t understand how naturopathic doctors bill, or how they code and we don’t understand what their standards of care are.’ The reality is we bill the same way, we code the same way and we are held to the same standards of care.”

'Very Early Stages' of Rollout.

Oregon Medicaid Director Judy Mohr Peterson prefaced remarks to BNA Sept. 19 by saying “We are still in the very, very early stages of rolling this out. We’ve had CCOs for 45 days now. It is a little premature to project out how this all is going to look.”

But Mohr Peterson pointed out that S.B. 1509 “does not require and we cannot require a CCO to contract with any willing provider. Our requirement for the CCOs is that they provide an adequate network of providers. That being said, we are encouraging the CCOs to begin to reimburse providers on the basis of health outcomes and quality measures and also to look at and encourage them to incorporate alternative providers into their network.”

Mohr Peterson said the naturopaths’ suggestions on the CCO regulations “went beyond the statute. We think our rules are consistent with those [statutory] requirements.”

“If there is a community desire to have those alternative providers available, we are going to encourage the CCOs to respond to that in a positive way. If we find that the CCOs are discriminating on the basis of the license, we do have the authority to take action on that basis.”

'A New Collaboration.'

Dr. John Sattenspiel is chief medical officer at Trillium Community Health Plan, a CCO that cares for about 55,000 Oregon Health Plan members in the Eugene area. He told BNA Sept. 19, “We have been in active dialogue with the naturopathic community to figure out how to best work with them so that they can become participants in the CCO.”

But he noted that when the transfer of fee-for-service Medicaid members takes place Nov. 1, “the impact is going to be quite small. At any given time, only about 100 members are receiving

service from a naturopath.” And he said the data do not reveal whether those naturopaths are acting as the patient's primary care manager.

“At this point, we believe that we do have adequate providers on our panel in order to meet the need for our members to access primary care providers in a patient-centered medical home,” Sattenspiel said. And right now, there are no naturopaths and no chiropractors on the provider panel, he said.

Other issues cited by Sattenspiel may reflect a lack of previous clinical interaction between traditional physicians and their naturopathic colleagues. Sattenspiel said Trillium needs to ensure that naturopaths, as they enroll in the program, will be compliant with the Oregon Health Plan's “very explicit rules that medical services be evidence based.”

“We have state-mandated goals for preventative care. We need to make sure that all of the providers on the panel will be working to assist us in meeting those goals,” Sattenspiel said, adding that a new collaboration has to be worked out.

'Mass Chaos in November.'

On Nov. 1, some 39,000 fee-for-service Medicaid recipients will be transferred to CCOs around the state. Some small percentage of that number gets their primary care from naturopaths. Sometime within the next week or two, the Oregon Health Plan will be sending a 30-day notice to the 39,000 people informing them of the change and “that there may be some instances that their primary care provider will change,” Mohr Peterson said.

“We are looking to try to maintain continuity of care where we can,” she said. And CCOs are authorized to work temporarily with providers on a noncontract basis to address continuity of care issues, she said.

Said Farr: “The clock is ticking. We are expecting mass chaos in November.”

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