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Directors Allen and Vandehey,

Providence is guided by a Mission of caring and commitment to the communities we serve. We are consistently evaluating opportunities to create the systematic changes needed to increase access, improve quality, and lower costs. As part of this commitment, Providence has consistently engaged in stakeholder conversations related to the passage and implementation of House Bill 2362. We appreciate the Oregon Health Authority's leadership to convene thoughtful discussions and make important changes based on stakeholder feedback.

Providence respectfully requests that the OHA consider the following before finalizing the Health Care Market Oversight Program rules.

**OAR 409-070-0005. Definitions**

Health care entities and the public should have a consistent understanding of the criteria by which a transaction will be evaluated. One important area of clarification missing from the rule concerns what services are considered essential to achieve health equity. This definition is fundamental to ensuring that the Health Care Market Oversight Program is objective, clear and transparent.

**OAR 409-070-0010. Covered Transactions**

- Section (3)(b) – Providence objects to the language added to this subsection. Clinical experiences and training opportunities are outside of the scope of the authorizing statute and were never discussed as being within scope, we respectfully request that the following be removed: “or a reduction in the number of clinical experiences of training opportunities for individuals enrolled in a professional clinical education program.”
- Section (3)(d) - As a Catholic health care system, Providence objects to this provision as being outside the scope of the authorizing statute and asks that it be removed. The restrictions described in the provision should be allowed, particularly if there is no net change in access to essential services (and we note, that 0010(2)(e) covers situations involving an actual reduction in essential service). Conscience objections are protected by the First Amendment, affirmed in law, and nothing in the regulations should require us to file notice based on these objections nor

should we be prevented from practicing in a way that is consistent with our sincerely held religious beliefs, which are constitutionally protected.

**OAR 409-070-0025. Acquisition of Control; Presumptions and Disclaimers**

- Section (2) – Language in this section should be clarified and allow the OHA to determine that control doesn't exist. Specifically, we recommend that the last sentence be revised as indicated by the bold language in the following, "The Authority may **or may not** determine, after giving persons that have an interest in the Authority's determination notice and opportunity to be heard and after making specific findings of fact to support the determination, that control exists..."

**OAR 409-070-0055. Preliminary 30-Day Review of a Notice of Material Change**

- Section (4) – It is the accountability of OHA to complete the 30-day review in that time period. If review is not complete by the OHA within the statutory timeframe, the transaction should be deemed approved. If this is not possible, we suggest the OHA either allow parties to extend from 30-day to 60-day without the need for a full review or allow the entities to withdraw.

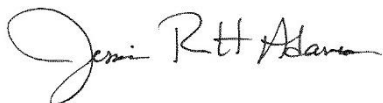
**OAR 409-070-0060. Comprehensive Review of a Notice of a Material Change Transaction**

Understanding these are complex transactions, it's important that the OHA engage with health care entities to ensure there is clarity about the goals and structure of the transactions under review. The rules need to outline two separate processes for engagement – one for parties engaged in the transaction and one for the public. Specifically, we request:

- If the OHA engages an expert, any findings will be made available to the parties at least 30-days prior to a public meeting or decision-making meetings by a review board. Parties to a transaction shall have the opportunity to submit their own report in response to one from the OHA expert in advance of a public meeting or meeting of a review board.
- Any complaints regarding a potential transaction received by the OHA and used to render a decision should be made available to the parties in advance of a public meeting or meeting of the review board.
- Any potential conditions imposed in connection with approval of a transaction must be made available to the parties at least 45-days in advance of the OHA issuing a decision, and the parties must be given a meaningful opportunity to respond to the proposed conditions, including proposing alternative conditions. The OHA will provide a reasoned decision if rejecting proposed alternative conditions from parties to a transaction.

Thank you for the opportunity to provide feedback. We look forward to continuing to partner to ensure that quality healthcare is available to all in Oregon.

Sincerely,



Jessica Adamson  
Executive Director, Government Affairs  
Providence