



March 25, 2025

Member

American Chiropractic Association

International Academy of Neuromusculoskeletal Medicine

American College of Chiropractic Orthopedists

ACA Council on Chiropractic Orthopedists

Association of American Physicians and Surgeons

Christian Chiropractors Association

Oregon Chiropractic Association

Physicians for Informed Consent

World Society for Ethical Science

Past Member

Oregon Board of Chiropractic Examiners Peer Review Committee 1993 - 1997

Oregon State, Health Evidence Review Commission 2011-2015

Past President

Chiropractic Association of Oregon 2004 - 2006

American College of Chiropractic Orthopedists 2008 - 2009

Elected Fellow

American Back Society 1986

International College of Chiropractors 1994

Board Certified

American Chiropractic Academy of Neurology 1992

American Board of Forensic Professionals 2000

Academy of Chiropractic Orthopedists 2004

Labor and Workplace Standards

Department of Consumer and Business Services

350 Winter Street NE

Salem, Oregon 97309

RE: **HB-3374, Opposing**

Dear Chair Grayber and Members of the Committee,

Oregon chiropractic physicians are first contact portal of entry physician types who are legally and ethically required to differentially and correlatively diagnose every patient. The four-year "doctor of chiropractic" (DC) degree is a rigorous first contact portal of entry physician level program. Chiropractic physicians are fully educated with a focus on a whole-person approach to healthcare that includes evaluation, diagnosis, spinal and extremity manipulation, physiological therapeutics, rehabilitation, nutrition, and lifestyle management.

Three to four-year post-doctorate courses in the subspecialties of orthopedics, neurology, physical medicine & rehabilitation, sports medicine, radiology, pediatrics, clinical nutrition, forensic science and others, leading to board certification or Master's degree are also a reality within the chiropractic profession.

The majority of Oregon chiropractic physicians practice as primary spine-care practitioners. Our principal treatment intervention is spinal manipulation combined with physical medicine interventions when clinically indicated. Chiropractic physicians also implement appropriate physiotherapy modalities such as low level laser, ultrasound, shockwave therapy, static and intermittent traction, electrical stimulation, heat, cold, and diathermy to name just a few.

There are multiple high-quality scientific studies that support the efficacy of our treatment interventions for spine-related injuries and pain that also reduce cost and provide high patient satisfaction.

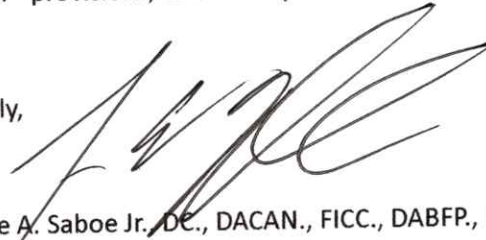
SAIF corporation presentations recently given to MLAC focused on improving access to timely and quality medical care for injured workers, acknowledging the lack of medical providers willing to manage Oregon's injured workers. SAIF officials suggested

1. recruiting more providers, 2. loan forgiveness to attract more providers into workers' comp and to reduce administrative barriers, all in hopes of improving access. Oregon's injured workers having access to timely quality care has been an issue for many years. The December 19, 2012, "Blue-Research Survey" (attached) clearly revealed

medical physicians lack of interest in participating in Oregon's workers' compensation system while at the same time highlighting chiropractic physicians willingness to participate. Of the over **5,000 potential respondents** recruited by the Oregon Medical Association and the Workers Compensation Division, only **77 (1.5%) of all medical specialties** completed the survey, with **445 (30%) chiropractic physicians** completing the survey.

If SAIF, the Workers' Compensation Division and the State of Oregon are serious about improving access for injured workers to timely quality care, we respectfully submit returning full attending physician status to chiropractic physicians while at the same time opening up the state's remaining MCOs to "any willing provider" provisions, to be a step in the correct direction.

Sincerely,



LaVerne A. Saboe Jr., DC., DACAN., FICC., DABFP., DIANM

LAS/amp