3521 NW Samaritan Ste 101 Corvallis, OR 97330 March 4, 2025

Dr. Sejal Hathi 500 Summer Street, NE, E-20 Salem, OR 97301-1097

Dear Dr. Hathi and team at the Oregon Health Authority,

We are the physicians of Mid-Valley Gastroenterology. We have been working in the mid-Willamette Valley since 2006. During that time, we've had the honor of serving as GI doctors in all of the local hospitals. Our commitment to the community for almost twenty years compels us to bring to light a serious issue affecting local patient care in the valley.

For as long as we've been here, the GI physicians at the Corvallis Clinic have participated in an "on-call rotation", meaning they've taken turns being available to handle acute GI medical needs. This rotation has been shared with the other GI doctors in the area, including those of us at Mid-Valley Gastroenterology. Being "on-call" can be tiring, it requires physicians to respond around the clock to emergencies, consult on hospital cases, and provide critical care to ensure continuous gastroenterology coverage for the community.

As you are aware, the Corvallis Clinic was recently purchased by Optum, which is a subsidiary of United HealthGroup with an emergency approval provided by the OHA. They promised they would provide operations "at or above the pre-transaction service levels".

Following the acquisition, the Corvallis Clinic's two GI physicians abruptly and voluntarily withdrew from the on-call pool and relinquished their hospital privileges. When we asked them why they abandoned their on-call responsibilities, they replied that their employer mandated it. As it turns out, being on-call is not a profitable endeavor. Quite simply, the Corvallis Clinic will make more money by abandoning acute GI on-call coverage that they have shared with Mid-Valley GI for decades in favor of only providing outpatient GI endoscopy services. In addition, they will not only be avoiding on-call duties, but they will also be abandoning their established patients should they be admitted to the hospital with worsening symptoms or even a potential complication following a procedure. To be clear, we have not been approached to make a call coverage agreement, nor has the Corvallis Clinic negotiated to have a Transfer Agreement between their ASC and the hospital.

This is alarming for many reasons. First, their withdrawal from the on-call rotation reduced the number of on-call providers from 7 to 5. This has now dropped further to only 3, as two additional GI physicians resigned their positions, in part, due to excessive call burden. This has left a disproportionate workload on the those of us who have stayed to provide on-call GI care. Second, equally worrisome to the needs of our community, is that we can foresee other specialists who work for Corvallis Clinic using this as a blue-print to abdicate acute patient care responsibilities.

Over time, this trend will invariably lead to the following:

Overworked and overburdened physicians

Those of us who are still providing on-call coverage will experience extreme workloads, increasing the risk of burnout and decreased quality of care.

Physician Exodus

Two additional GI doctors have already departed the area due in part to these unsustainable conditions, exacerbating the problem. We fear this trend will continue in other specialties.

Reduced Patient Care Access

With fewer physicians available for urgent and after-hours care, patients may experience longer wait times, limited access and potentially compromised medical attention.

This decision by the Corvallis Clinic and its GI physicians has prioritized corporate profit and physician convenience over the well-being of both the patients they serve and the other medical professionals they work alongside.

We would urge policymakers to address this crisis before it worsens and re-evaluate the Corvallis Clinic-Optum merger in light of this additional data.

We are concerned about the future of healthcare in our community and ask for your swift action.

Sincerely,

Gregory Schwartz, MD

Mid-Valley Gastroenterology

Matthew Walton, MD

Chad Morse, MD