**Primary Care Provider Crisis in California: Naturopathic Doctor Solution**

*Increasing demand and decreasing supply leaves 5 million Californians without care mandated by the ACA*

Expanding coverage without taking simultaneous steps to address primary healthcare shortages can have unintended and costly consequences. As seen in Massachusetts:

- After enacting statewide health reform in 2006, the 158,000 newly insured residents quickly overwhelmed the state's supply of primary care doctors.
- From 2009-2010, there were almost 100,000 more visits to safety net hospitals, leading to a $70 million shortfall for providers that year.
- These access problems occurred even with the highest primary care physician-to-population ratio in the nation.
  - A university study found that California will have the worst shortage of primary care providers of all states: expected 3,334 more needed to meet the coming demand.
  - Only 34% of active physicians reported practicing primary care in California in 2012.
  - Future MDs are not enough: there has been a 51% decline in family practice from 1998-2006.

**Health and financial implications of lack of access to Primary Care Providers (PCPs)**

Evidence suggests that a further reduction of primary care services will inevitably lead to a worsening of health outcomes, a widening of health disparities, and a rising cost of healthcare.

- A 2007 study found that one-third of all Emergency Department (ED) visits are “avoidable,” meaning treatable in primary care settings.
  - ED charges for minor, non-urgent problems may be 2 to 5 times higher than charges for a typical private doctor office visit.
  - The study found that reliance on the ED is likely due to lack of a primary care provider and longer waiting times for doctor appointments.
- In 2006, California spent over $1.8 billion on avoidable ED visits.

**NDs are already filling the gap as trained and licensed PCPs**

- California Business & Profession code Section 3613(c): “Naturopathic medicine” means a distinct and comprehensive system of primary healthcare practiced by a naturopathic doctor for the diagnosis, treatment, and prevention of human health conditions, injuries, and disease.
  - NDs are the only PCPs trained extensively in counseling, nutrition, exercise and stress management, enabling them to fully address modifiable risk factors for chronic disease.
  - Naturopathic doctors use the same CPT codes for office visits and preventive services as other PCPs.
  - Adding NDs to PCP panels does not add new services.
    - NDs in CA are able to prescribe all legend and Schedule III-IV drugs.
  - The number of naturopathic doctors in the US and Canada increased by 91% from 2001-2006.
  - Bastyr University recently opened a San Diego campus to further increase the supply of NDs in CA.

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Cost Effectiveness

- Evidence shows that Naturopathic doctors treated 7 of the top 10 most expensive health conditions more cost-effectively than MDs or other conventional providers.\(^6\)
- Naturopathic doctors delivering the same Medicaid services in Oregon are 57.5% more cost effective than MD/DO/NP PCPs providing the same services.\(^7\)

Patient Satisfaction

- The Puget Sound Health Alliance conducted a 2012 study on patient satisfaction in 156 clinics. Bastyr Center for Natural Health, a naturopathic clinic, ranked #1 in the following categories:
  - “How well providers communicate with patients” & “Getting timely appointments, care and information.”\(^8\)

Naturopathic Medicine is increasingly covered by other states’ insurance plans and federal programs

- Washington: as of 1995, all health care plans must include every category of licensed provider.
- Vermont: as of 2007, all insurance companies must reimburse for ND services in the same way and to the same extent that they reimburse for the services of any physician.
- In 2012, the Indian Health Services included Naturopathic doctors in the federal loan repayment program.

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<thead>
<tr>
<th>State</th>
<th>Insurance Carriers(^9)</th>
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<tbody>
<tr>
<td>Alaska</td>
<td>Aetna, Blue Cross/Blue Shield, Premera, United Healthcare, +</td>
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<tr>
<td>Arizona</td>
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<td>Montana</td>
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<tr>
<td>Oregon</td>
<td>Medicaid, Aetna, ASHN, Assurant, Blue Cross/Blue Shield, Care Oregon, CHP, Cigna, Family Care, Great West, Health Net, Kaiser, Lifewise, My Optum, ODS, OHP, Open Card, Pacificare, Pacific Source, Providence, Regence, Reliant Behavioral Health, United Healthcare, +</td>
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<tr>
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<td>Medicaid, Blue Cross/Blue Shield, Cigna, Catamount, Dr. Dynasaur, MVP Health Care, Vermont Managed Care, VHAP, +</td>
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<td>Washington</td>
<td>Aetna, Blue Shield/Blue Cross, CIGNA, First Choice, Group Health, Uniform Medical, United Healthcare, Pacificare, +</td>
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</tbody>
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\(^6\) Henny, Geoffrey C., Alternative Health Care Consultant, King County Medical Blue Shield (KCMBSS), Phase I Final Report: Alternative Healthcare Project, 1995.
\(^7\) The Cost Effectiveness of Naturopathic Delivery of Oregon Medicaid Services Statistics provided by Leslie Hendrickson, Office of Medical Assistance. Feb 11, 1991.