

May 20, 2015

To: The Honorable Monnes Anderson, Chair  
Members of the Senate Committee on Health Care

From: Laura Etherton, State and Federal Policy Director, Oregon Primary Care Association

Subject: HB 3464: Timely Access to Dental Care for Pregnant Women

Thank you for the opportunity to express the Oregon Primary Care Association's support for HB 3464, and the -A5 amendments, to ensure that pregnant women have timely access to dental care.

The Oregon Primary Care Association (OPCA) is the association of Oregon's 32 Community Health Centers (also known as Federally Qualified Health Centers – or FQHCs). These nonprofit health centers operate more than 200 health clinic sites across the state, and are where over 393,000 Oregonians receive primary care – including integrated medical, dental and behavioral health services.

HB 3464 directs the Oregon Health Authority to ensure pregnant women in Medicaid's fee-for-service population are able to receive timely access to dental care, setting timeframes consistent with those that already exist for patients enrolled in Coordinated Care Organizations. The bill also requires OHA to report back to the legislature on progress toward timely access. The –A5 amendments clarify that the bill only pertains to timely access for pregnant women receiving medical assistance outside CCOs, since CCO's already have timely access standards in rule. The amendments also remove provisions requiring initial dental screenings within 30 days, because we were not able to achieve consensus on that issue with stakeholders.

For pregnant women, time is of the essence to gain the prenatal benefits of dental care. Good oral hygiene during pregnancy, including professional dental care, may decrease the chance of passing on caries-producing bacteria to the child. In addition, pregnancy is an important time for mothers to learn new health behaviors. Improving access to dental care is an opportunity to teach pregnant women about optimal oral hygiene and pass healthy habits, including using dental services, to their children.

Unfortunately, timely access is a challenge for many pregnant patients receiving medical assistance. Pregnant women on medical assistance programs are at higher risk of periodontal disease, which affects 40% of pregnant women<sup>1</sup>. Long wait times can create complications and costly over-utilization of emergency departments, and mean that we miss the opportunity to provide the prenatal benefits of improved oral health.

This is especially problematic for women who receive Oregon Health Plan pregnancy benefits because they have a short time period to obtain care. This is because they are likely to have lacked dental coverage before qualifying for medical assistance due to pregnancy, and their coverage ends soon after giving birth. With this short coverage window and the high potential impact of care, pregnant women have special needs for timely access to dental care.

We want to recognize the sponsors, Rep. Keny-Guyer and Rep. Hayden, for their work on this bill. The process has not only improved the bill; it has brought together stakeholders to begin talking about specific ideas for how to implement the bill's requirement for timely access to dental care.

Oregon's overall health will benefit if pregnant women are able to access covered dental benefits, and help their children start off in life as healthy as possible. We urge your support.

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<sup>1</sup> Oral health care during pregnancy and through the lifespan. Committee Opinion No. 569. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2013;122:417–22.