

## Senate Bill 147

## **COFA Dental Study**

Good afternoon Chair Monnes Anderson, Vice Kruse and members of the Committee. My name is Loyd Henion representing the COFA Alliance National Network. I am here today to share my support for SB 147 and why a report on the dental needs of the COFA population is so needed.

SB 147 directs Department of Consumer and Business Services (DCBS) to develop and report, no later than September 15, 2017, recommendations to Legislative Assembly and interim committees related to health, for a program to reimburse costs of oral health care for low-income individuals residing in Oregon under Compact of Free Association treaty.

The bill allows DCBS to evaluate a broad spectrum of approaches to providing dental care to our Oregon COFA residents; including programs to provide premium assistance, programs offered by commercial vendors, plans offered in the health exchange, and plans offered through state medical assistance or through alternative means.

Following are some considerations underscoring why this bill is necessary and just:

- COFA citizens are banned from Medicaid Services and don't have the same access to an affordable, quality Oral Health Program.
- The COFA population have many health disparities including diabetes, heart disease, thyroid cancer, etc. that are directly related to radiation from the 67 nuclear bomb tests in the Marshall Islands from 1946 to 1958, and have high need of Oral Health Care.
- "People with diabetes are at higher risk of developing oral health problems, and are more susceptible to serious gum disease (periodontitis), which - in turn - may affect blood glucose control" <u>Lifescript.com</u>
- After the bomb testing, the people of the Marshall Islands were told not to eat their native diet due to radiation contamination. Instead, they have been eating a high-carbohydrate, low-quality diet of imported foods. The Marshallese have not had adequate access to dental maintenance and intervention. As a result, the Marshallese in particular are at significant risk of childhood dental issues such as caries and gum disease. As adults, poor dental health has been implicated in the development of heart disease such as atherosclerosis and hypertension. Also, according to the National Institute of Health and the American Diabetic Association, Type II Diabetes (which is endemic in the island communities) has been implicated in the development of dental and gum disease.

The good news is the dental study can be accomplished with minimal cost.

In conclusion, I urge your vote to support on SB 147.

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