

OREGON ACADEMY OF
Pediatric Dentistry



Oregon Senate Health Care Committee
900 Court Street NE
Salem, Oregon 97301

February 4, 2020

Dear Senate Health Care Committee Members,

We write today with significant concern about Senate Bill 1549 which would authorize dental therapy in Oregon. We know that dentists are seen as protectionist and unwilling to discuss alternative models to delivering health care in our state. We know that some of our colleagues in other states engaged in brutal battles over the issue of dental therapy. But as we all know, Oregon is different. We have our own Oregon way of addressing key issues. The Oregon Way is to come to the table, collaborate, and find mutually agreed upon ideas to move forward together. This issue of trying to increase access to care to those Oregonians who need it, deserves nothing less than the Oregon Way.

Unfortunately, this bill does not represent the Oregon Way. There has not been thoughtful conversation and dialogue of how (and whether) to implement dental therapy in Oregon. The initial draft of SB 1549 is an amalgamation of many dental therapy models and does not even provide a base line for initial conversation. We have two Dental Pilot Projects that are currently testing out two very different models of dental therapy. Oregonians deserve evaluation of both models and a real policy conversation on what policy is best for Oregon.

The differences in dental therapy models matter. It is not one size fits all. Different models have different education requirements, different training requirements, different scope allowed. Consumers deserve to know if their provider has two years of training or five. Dentists need to know who they are supervising, and insurers need to be able to credential the providers. Scope of practice should appropriately correspond to education levels. This bill does none of this. Rather, this bill tries to include all models in an increasingly confusing and administratively burdensome way.

Examples of significant problems in this bill:

- The multiple pathways to licensure create inconsistent standards and requirements for providers.
- CODA accredited education is not required. CODA accreditation is the standard by which all other dental professionals are held.
- Minimal preceptorship hours are required (400 or 560 depending on which pathway you come in on) far less than we have seen in other states. Arizona has 1,000, Maine has 2,000. Why are we willing to lower the threshold for Oregonians?
- Individuals with only two years of training out of high school can pull teeth and administer nitrous oxide. No hygiene degree is required.
- No requirement for a clinical dental therapy examination for the providers before licensure.

- Scope of practice is ill defined.

Oregon dentists believe our patients deserve better than this bill has to offer. Let's have a thoughtful conversation on education, scope, and supervision requirements. Please defer this conversation to the interim rather than rushing it through a short legislative session. Let's embrace the Oregon Way and actually bring stakeholders together to create real solutions for Oregonians.

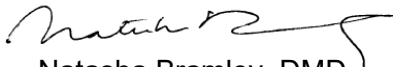
Sincerely,



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