

March 18, 2021

Chair Prusak and Members of the House Committee on Health Care,

For the record, my name is Amy Coplen and I am the Program Director at Pacific University School of Dental Hygiene Studies which is the training site for Dental Pilot Project 300. I also served on the workgroup convened by Senator Monnes Anderson and I wanted to say I found it to be a welcoming and productive discussion.

Dental pilot project 300 trains practicing dental hygienists who can already place fillings, just 13 additional skills to become a dental therapist. With that being said, Pacific University does not support or endorse a dental hygiene requirement for this bill. Our reasoning for this is because the science doesn't support it. The body of evidence from practicing dental therapists across the country over the past 15 years includes dental therapists educated without a dental hygiene requirement and overwhelmingly shows that dental therapists provide safe, high quality care. The only CODA Accredited Dental therapy program in the country right now does not have a hygiene requirement. Even in Oregon, the longest standing Pilot Project with the most clinical data does not have a dental hygiene requirement. One thing we do know is that longer and costlier education programs inhibit access to care and reduces the diversity in the workforce. This is the opposite of what Oregon needs right now.

There have been many statements about dental therapy education. For the record Accreditation Standard 2-1 for DH education programs states: Dental hygienists receive two full years of in-depth education, and Accreditation Standard 2-1 for Dental therapy education programs states: dental therapists will receive three full years of in-depth education. And Finally, Accreditation Standard 2-3 for Dental education programs states: The curriculum must include at least 4 years of instruction or its equivalent. I'd like to propose that dental therapists are actually specialty providers within their scope of practice similar to the way that dental hygienists specialize in preventive dentistry and are educated accordingly.

Dental therapists are not independent practitioners. One of the things I really like about this bill, is that it requires a practice agreement that explicitly states the supervising dentist must designate the level of supervision for each and every procedure allowed under the practice agreement. We need to trust the competent and highly educated dentists of Oregon to delegate safely and to oversee the dental therapists work.

What we know from the 12 states that have passed dental therapy is that bill language really matters. It is important to understand that changing the term "general supervision" to "indirect supervision" may seem like a reasonable compromise, but it could cut off most of rural Oregonians from receiving care from a dental therapist. Any amendments to this bill must not decrease the number of individuals who can get the care they desperately need.

In summary, I ask for you to support the House Bill 2528 as written on behalf of the oral health of all Oregonians.

Sincerely,

Amy Coplen, RDH, EPDH, MS