



Date: January 30, 2023
To: Senate Committee on Health Care
From: Stephanie Phillips Bridges, Policy Analyst for the Urban League of Portland
Re: Oral Health Care Coordination Support to Advance Equity, SB 487

Chair Patterson, Vice-Chair Hayden, and Members of the Committee:

My name is Stephanie Phillips Bridges, and I am a Policy Analyst with the Urban League of Portland and I respectfully submit this testimony in support of Senate Bill 487. The Urban League of Portland is one of Oregon's oldest civil rights and social service organizations, empowering African Americans and others to achieve equality in education, employment, health, economic security, and quality of life across Oregon and SW Washington.

The Oregon Dental Association published the 21st Century Solutions for Dental Care Access report in 2020, which states "Black children and other children of color, along with lower-income families, disproportionately endure poorer oral health outcomes and receive fewer preventive services."¹ Oregon's State Health Assessment by the Oregon Health Authority in 2018 reported "nearly a quarter of Oregon's population live in a federally designated dental health professional shortage area. Shortages of dental providers is a real problem; Oregon has only 0.42 dentists per 1,000 people, and 24 rural and frontier primary care service areas have no dentists."²

Oregon's State Health Assessment reported "58% of 3rd graders have experienced tooth decay which if left untreated can lead to diminished growth, social development, school performance, nutrition, speech development, overall general health, and emergency treatment. Children with poor oral health have worse academic performance and are nearly three times more likely to miss school as a result of dental pain."³ Oregon Health and Sciences University's study reported that "40% of Medicaid-enrolled children did not receive any dental services in 2018. The Oregon Dental Association report states "while 54% of Oregon's Medicaid-enrolled children received at least one preventive dental service during the year, less than half of those of American Indian or Alaskan Native descent, and less than half of Black children, received any preventive dental care, according to a January 2020 OHSU Center for Health Systems Effectiveness Issue Brief."⁴ OHSU's study also showed "Black children in Oregon have the least access with just 45% of Medicaid-enrolled kids receiving any dental services. Black children not only had the lowest rate of utilization of preventive care, but also the highest rate of emergency department visits for avoidable oral health problems."⁵

1 in 12 children are enrolled in the Oregon Health Plan and receive preventative dental services **only** through programs like School Dental Screening and Sealant Programs. The School Dental Screening and Sealant Programs are very successful, but these in-school programs need coordination to ensure children are connected with care and to remove barriers in seeking it. According to the Oregon Dental

¹ Oregon Dental Association, 21st Century Solutions for Dental Care Access, 2020.

² Oregon Health Authority, Oregon's State Health Assessment, 2018.

³ Oregon Health Authority, Oregon's State Health Assessment, 2018.

⁴ Oregon Dental Association, 21st Century Solutions for Dental Care Access, 2020.

⁵ Oregon Health and Sciences University, Center for Health Systems Effectiveness Issue Brief: Dental Care for Oregon's Medicaid-Enrolled Children in 2018, 2020.



Association report, “systemic barriers families face, are concerns about cost, difficulty securing time off work, especially from hourly jobs, and lack of reliable transportation or childcare. And that in-school oral health programs **offer promising opportunities** to improve oral health for low-income families by meeting children where they spend much of their time: at school.”⁶

SB 487 can support oral health care for communities in Oregon. SB 487 allows the Oregon Health Authority to establish a grant program to provide financial support to certified dental sealant programs that promote and engage in oral health care coordination activities. The bill would appropriate \$900,000 to the Oregon Health Authority for each of Oregon’s 21 School Sealant Programs. This will allow programs like School Dental Screening and Sealant Programs to continue to support school-aged children across Oregon. Funding programs that are in-school will continue to help eliminate barriers families face when trying to decide whether to go to work or address their child’s oral care needs. This is crucial to our youth as addressing oral health issues can impact their school performance and development as they age.

With SB 487, the Office of Rural Health will establish a grant program to provide scholarship and tuition assistance grants to individuals enrolled in community dental health coordinator programs and to provide matching grants to qualified employers that employ community dental health coordinators. The bill would also appropriate \$900,000 to the Office of Rural Health to train and support community dental health coordinators as well as support mobile dental clinics. This will support workforce development in the dentistry industry in Oregon, that will help solve the access issue in low-income and rural areas.

Please pass SB 487 to ensure that we continue to close the health disparity gaps in our communities, Oregonians trust you to see the value in oral care and access.

Respectfully,

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⁶ Oregon Dental Association, 21st Century Solutions for Dental Care Access, 2020.