

Testimony of Molly Johnson
Vice President, Plan Operations, Advantage Dental Services

February 3, 2026

Dear Chair Nosse and Members of the Committee,

Thank you for the opportunity to speak today. My name is Molly Johnson, and I am the Vice President of Operations for Advantage Dental Services, the largest Dental Subcontractor in the state, serving over 465,000 OHP members through contracts with 13 of the state's 15 Coordinated Care Organizations. Our network includes over 500 providers, many of whom practice in our Advantage Dental+ practices, a delivery system that spans 54 sites statewide.

I am here today to testify regarding the critical need for sustainable OHP dental reimbursement rates and a transparent process for how these rates are established. As such, I want to express my support for Legislative Concept 194 because Oregon's dental safety net is in a state of collapse. Oregon is facing a worsening crisis in access to dental care—one that will only grow more severe if CCO rates for Dental Subcontractors don't stabilize.

Low reimbursement and general opaqueness regarding the rate setting process are top concerns for both current and prospective OHP dental providers. Many of these providers own and operate their own dental practices and are cautious to participate in the OHP program given the instability of rates over the past five years. Some are choosing to leave government delivery networks altogether to focus on more profitable lines of business while the remaining providers are holding on under the notion that dental rates will eventually stabilize and increase. That said, if the rate setting process remains blurry, reactive and unpredictable, more providers will leave, further breaking down systems built over 30 years.

Currently, rates are often based on historical utilization data rather than the actual, current cost of delivering care. This "look-back" methodology fails to account for modern inflationary pressures, rising staff wages, and the increased complexity of treating patients who have deferred care due to lack of access. Furthermore, dental providers face variability in rates based upon the CCO region in which they operate, making it nearly impossible for a dental practice to predict its financial stability when serving the OHP population.

Currently, only about 40% of Oregon dentists accept OHP patients, with a quarter of those comprising most OHP claims. The reason is simple: historical OHP reimbursement rates have not kept pace with the rising costs of delivering care. This problem didn't happen overnight. For years, inadequate reimbursement and unpredictable rates have driven dentists away from serving OHP patients. If we do nothing, the trend will continue, leading

to even fewer providers, longer wait times, and more patients forced to seek emergency dental care—often in hospital emergency rooms that are not equipped to handle dental disease.

Without action, Oregon’s dental provider shortage will deepen, making it harder to access critical preventive care. Delayed treatment leads to more severe health problems, increased costs to the state, and worsened health disparities, particularly in rural and low-income communities. Legislative Concept 194 is an essential step in reversing this trend. If we fail to act, more dental providers will stop accepting OHP, more patients will go without care, and the state will bear higher costs for preventable dental disease.