

2015 Legislative Session Overview

On July 5th, just 5 days before they were constitutionally required, Oregon's 78th Legislative Assembly came to a close. It was a historical session, highlighted by the fact that Oregon had two different Governors during this time; Governor Kitzhaber in the beginning and Governor Brown in the end. Over 2,500 bills were introduced, not including budget bills, with a surprising larger number than expected of dental related health care bills. Our ability to work with House and Senate Health Care Committee members, as well as leadership in both chambers put us in a rare place to not oppose any legislation. We needed to amend or change some bills, but in the end we didn't testify in opposition to any one single piece of legislation. This session, ODA was also happy to welcome Dr. Bruce Austin, our new state dental director, who will be working with the Oregon Health Authority on improving the oral health of our state. All and all it was another successful session for the ODA. We look forward to the interim and starting to plan for the 2016 legislative session.

Pro-Active Oregon Dental Association Legislation

Senate Bill 672: Creation of a State Dental Director

For the last 5 years, Oregon has been in the midst of an unprecedented transformation in our health care delivery system. Oral health has been recognized as a key component to overall health and fundamental part of the triple aim. Yet until February 2015, when the Oregon Health Authority hired a state dental director (Dr. Bruce Austin), dental care was being integrated into a greater health structure without the benefit of a dedicated presence and voice to influence policy.

Senate Bill 672 requires the Oregon Health Authority to appoint a dental director to oversee oral health programs in the state. This person will provide recommendations and guidance with a focus on underserved populations and make recommendations on improving the oral health of Oregonians. The bill PASSED both the House and the Senate and was signed by Governor Brown. ODA position: SUPPORT

House Bill 2972: Mandates Oral Health Screenings Oregon Public School children when they turn 7 (or upon entering kindergarten)

Early dental screening and timely treatment are fundamental to reducing the burden of childhood oral disease in Oregon, as well as improving the overall health for kids. Unfortunately, tooth decay is Oregon's most common chronic childhood disease. Since schools already mandate screenings for vision and hearing, screening for oral disease is a logical extension of these essential health services.

House Bill 2972 requires students seven years of age or younger to receive a dental screening within 120 days of being enrolled in an educational program. The bill also states that the school shall provide to parents or guardians standardized information relating to dental care developed by the state dental director. The bill PASSED both the House and the Senate and was signed by Governor Brown. ODA position: SUPPORT

Senate Bill 302: Fixes the Dental Practice Act to allow dentists and dental hygienists the ability to prescribe within their scope

Last year, an Assistant Attorney General issued a legal opinion that found the Oregon Dental Practice Act does not expressly authorize dental hygienists or dentists to prescribe drugs. Beginning in April 14, the Oregon Board of Dentistry began removing the authority for dental hygienists to prescribe drugs in order to comply with the Assistant Attorney General's opinion.

SB 302 simply modifies the definition of dental hygiene to include prescribing, dispensing and administering prescription drugs within the scope of their license. This does not expand scope of hygiene, but continues to allow them the ability to prescribe fluoride and antimicrobials. It also further clarifies the definition of dentistry to include prescribing, dispensing and administering prescription drugs. There was no opposition to this legislation and it PASSED both the House and Senate and was signed by Governor Brown. ODA position: SUPPORT

Senate Bill 5507: Appropriates \$160,000 from the Oregon Health Authority to the Dental Lifeline Network for donated dental services

The Oregon Dental Association and Dental Lifeline Network (DLN) started the donated dental program in 1988, through funding from the State of Oregon Mental Health Division, Office of Developmental Disabilities with an initial focus on adults with developmental disabilities. The state funding was eliminated in 2007-2008. Since then, the program has largely been funded by the national Dental Lifeline Network organization and this funding is not sustainable.

SB 5507 mandates the Oregon Health Authority to contract with the Dental Lifeline Network, or other appropriate and qualified organization, for development and operation of a Donated Dental Services (DDS) program to benefit needy disabled, aged, and medically compromised individuals. For 2015-2017, the sum of \$ 160,000 was appropriated from the general fund to the Authority. The bill PASSED by the House and the Senate and was signed by Governor Brown. ODA position: SUPPORT

Senate Bill 673: Permits licensed dentists to administer certain vaccinations

Although dentists' primary concern revolves around diagnosis and treatment of oral diseases, the responsibility and role in recognition of the interaction of oral and systematic health is always present. Dentists take their role as primary care givers very seriously and are dedicated to keeping Oregonians healthy. The average patient visits their dentist more often than their primary care physician, making the dental office an ideal local to provide an additional opportunity for immunizations.

Senate Bill 673 would have allowed licensed dentists to administer immunizations and directs the Oregon Board of Dentistry to adobe rules relating to the administration of immunizations by dentists. The bill STALLED in committee. Although the bill did not pass this session it did create an opportunity to continue talking about the role that dentists play as primary care providers. Oregon remains a divisive state to talk about the appropriateness of vaccination mandates. This is unfortunate given that Oregon

continues to have the nation's lowest rate of childhood vaccinations. ODA position: SUPPORT

Other Legislation of Interest to Dentists

House Bill 2021: Creates a pilot program with Oregon Health Authority and Department of Education to provide oral health education, fluoride varnish and daily brushing and flossing for children

In the aftermath of the failed water fluoridation campaign in Portland, the City Club of Portland convened a task force to study and research alternatives to water fluoridation that would improve the oral health of Oregon's children. The ultimate goal was to identify cost effective and practical solutions to improved oral health.

House Bill 2021 was a legislative concept that came out of that task force. The bill attempts to identify any potential barriers to those receiving fluoride varnishes in a school based setting. The pilot project will also allow data to be collected, as statewide infrastructure systems improve for tracking preventative services and outcome. The bill passed out of the House Health Care Committee but STALLED in Joint Ways and Means. ODA position: SUPPORT

House Bill 2024: Requires the Oregon Health Authority to adopt rules and procedures for training and certifying non-traditional health care workers to provide oral disease prevention

HB 2024 is another bill that originated out of the City Club Children' Dental Health Task Force. As the task force met with community leaders across Portland, it was identified that certain communities would prefer dental preventative services be delivered by non-traditional health workers. These individuals include: community health workers, personal health navigators, peer wellness specialists, doulas, etc. These workers would not be doing clinical work, but educational. This reasoning follows the model adopted by Coordinated Care Organizations that seek non-traditional workers to help build networks to serve Oregon's Medicaid population. The bill PASSED both the House and the Senate and was signed by Governor Brown. ODA position: SUPPORT

House Bill 2683: Requires Oregon Board of Dentistry to remove from its website and other publicly accessible print information related to the discipline of a licensee in certain circumstances

In the past several legislative sessions, several members of the health care committees heard from dentists, doctors, nurses and others about the possible reputational damage caused by licensing boards. While the rationale for posting former disciplinary actions has been to inform the public, often times these postings serve more as a "scarlet letter" shaming a licensed professional. There is also evidence to suggest that the different licensing boards in Oregon (Dentistry, Medical, Nurses, etc.) follow different rules for discipline and posting of information.

House Bill 2683 states that if a licensee in good standing wishes to petition to remove a past disciplinary action from the BOD, they may do so if certain criteria are met. These

include: the disciplinary action being over 7 years ago, the action neither financially or physical harmed a patient, the licensee is currently in good standing and fully complied with all the disciplinary sanctions of the board. The bill FAILED in the House Health Care Committee. However, the licensing boards agreed to meet in the interim, look at their policies and make recommendations for changes in 2016. ODA position: SUPPORT

Senate Bill 474: Allows nonprofit charitable corporations to own and operate dental clinics that serve children with special needs

The Providence Specialty Pediatric Dental Clinic serves nearly 1,400 patients many of whom have a primary diagnosis of autism spectrum disorders. They also treat a significant number of children who are medically fragile - those with diagnoses of cerebral palsy, seizure disorders, Down Syndrome and various mental health diagnoses including severe anxiety disorders. Oregon law requires that dental clinics be owned by dentists, so to allow this clinic to continue operating, an exception to the ownership statute was needed to fix the problem.

SB 474 allows Providence to continue to provide preventative preventive and restorative dental care for children with developmental, medical and behavioral disabilities by enabling non-profit charitable corporations with an existing dental program serving special need children to own a dental clinic. The bill PASSED both House and Senate and was signed by Governor Brown. ODA position: SUPPORT

Senate Bill 660: Requires the Oregon Health Authority to promote oral health by ensuring the availability of dental sealant programs to students attending public school

The Oregon Health Authority conducted a survey in 2012 of school-aged children's oral health. Children from lower-income households had higher cavity rates compared to children from higher-income households (63 percent versus 38 percent), almost twice the rate of untreated tooth decay (25 percent versus 13 percent) and more than twice the rate of rampant tooth decay (19 percent versus 8 percent). In addition, about 24,000 children age six to nine were in need of early or urgent dental care. Up to 3,800 children in 1st to 3rd grades in Oregon reported dental pain or infection on any given day.

SB 660 requires the Oregon Health Authority to use evidence based and best practices to ensure availability of dental sealant programs to students. The would also to students in elementary or middle school which at least 40 percent are eligible to receive Federal assistance. The bill PASSED the House and Senate and was signed by Governor Brown. ODA position: SUPPORT

House Bill 5014: Oregon Board of Dentistry Budget

The Board of Dentistry (BOD) is funded with revenues generated primarily from fees paid by licensees and applicants for licenses and permits. HB 5014 reflects increases for the biennial licensure of Dentists and Dental Hygienists for both new and renewal licenses by \$75, effective July 1, 2015. For Dentists, new and renewal license fees would increase from \$315 to \$390. For Dental Hygienists, new and renewal license fees

would increase from \$155 to \$230. This additional money adds a permanent full-time Dental Health Care Investigator to the BOD to reduce the amount of investigation time after a case is opened against a licensee. The entire budget for the biennium is \$3,010,692. The bill PASSED both the House and the Senate and was signed by Governor Brown. ODA position: SUPPORT