

Oregon Board of Dentistry 1500 SW 1st Ave #770 Portland, OR 97201

Re: Hemoglobin A1C (HbA1c) Test

December 4, 2018

Dear Members of the Oregon Board of Dentistry:

According for the CDC, 9.4% of the U.S. population are diabetic, with another 33.9% of the US adult population showing pre-diabetic symptoms. Oregon is facing similar daunting statisticsⁱ. The Oregon Health Authority indicates that about 287,000 Oregon adults are living with diabetes, costing about \$2.2 billion annually in treatment costs. The problem grows exponentially, with "*An estimated 1,835,000 adult Oregonians are obese or overweight, putting them at high risk of developing diabetes or developing severe complications if they already have diabetes. The burden of obesity and diabetes will continue to increase unless fundamental changes occur to reverse these trends."*

Our state is seeing an epidemic, and dentists can be part of the solution. The Hemoglobin A1C test is a simple screening test which can be completed in the dental office and provide a patient and provider critical information for both their dental treatment plan, and their overall health. A CDT code, D0411 currently exists for billing purposes.

A patient presenting with high A1C percentage means their average blood sugar over the last two to three months has been elevated. Therefore, the patient may need to have a modified, and perhaps delayed, dental treatment plan. This condition can also have profound effects on periodontal status, wound healing, infection control, etc. By making this point to patients and proper referral to their physician, patient compliance is greatly enhanced. The information is often critical for dentists to have on hand prior to any patient care.

We believe that ORS 679.010 is broad enough to be inclusive of screening for diabetic risks:

(7)(a) "Dentistry" means the healing art concerned with: (A) The examination, diagnosis, treatment planning, treatment, care and prevention of conditions within the human oral cavity and maxillofacial region, and of conditions of adjacent or related tissues and structures;

Further, in Oregon, there is no licensure or minimum requirements for providers who may draw blood. Any individual could be employed as a phlebotomist, without additional training or certification. Thus, it is reasonable to indicate that this specific blood draw is within the scope of a dentist's practice.

The ODA is working to identify opportunities to further integrate oral health with physical and behavioral health. The HbA1C is such an opportunity. More importantly, however, dentists have

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an obligation to have a full understanding of their patients' health, and this screening tool helps inform that picture. We believe this test falls fully within defined statutory authority of a dentist and simply makes good sense. We welcome further discussion on this topic to ensure that dentists can provide their patients with the best care possible.

Sincerely,

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James McMahan, DMD President, Oregon Dental Association

ⁱ <u>https://www.cdc.gov/diabetes/data/statistics/statistics-report.html</u>

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