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March 16, 2015

Senate Committee on Health Care
900 Court Street NE
Salem, Oregon 97301

RE: SB 660

Chair Senator Monnes Anderson and Members of the Committee,

For the record my name is Deborah Loy, I am the Executive Director of Government Programs for Capitol Dental Care (CDC). We are a dental care organization that provides care to hundreds of thousands of Oregon Health Plan (OHP) enrollees.

I am here to testify in support of SB 660 with significant changes to the bill. We have been working with Willamette Dental and others on a proposed amendment to replace the bill as introduced, and are willing to continue working on the language until an agreement has been reached.

Children at risk of dental disease often are poor. Seeing a need, the State Oral Health Program several years ago began a school based sealant program at some of Oregon's elementary schools. The schools in their program are ones in which 50% of the children receive free or reduced fee lunches (FRL). Data shows dropping to 40% FRL continues to reach and serve low income children. The state has done a great job of serving the schools they do, but funding and limited resources do not make it possible for them to serve all schools interested in such a program.

Rather than expand their role as a direct provider of sealants, the State Oral Health Program is uniquely positioned to serve as a data collection, quality oversight and surveillance resource of school based sealant efforts statewide. This role will be key to a successful statewide school based sealant program strategy which uses community providers. The proposed amendments for SB 660 would establish this role for the State Oral Health Program.

Oregon has undergone a major transformation of its Medicaid delivery system. Many children attending low income schools are covered under OHP. As such, local coordinated care organizations (CCO) and dental care organizations (DCOs) have an opportunity and obligation to coordinate and cover school based sealant services, with quality oversight by the State Oral Health Program.

Currently sealants done by the State Oral Health Program are not captured by the CCOs or DCOs in their encounter data. Sealants are one of the OHP CCO performance metrics. For purposes of managing this performance metric, CCOs and DCOs need to be able to capture encounters of OHP children who have received a sealant, including those delivered by the state. The proposed amendment to SB 660 would require that encounters be submitted to the CCO covering each child.

The Community Prevention Services Task Force recommends school-based sealant delivery programs based on strong evidence of effectiveness in preventing tooth decay. This is based on evidence that shows these programs increase the number of children who receive sealants at school, and that dental sealants result in a large reduction in tooth decay among school-aged children (5 to 16 years of age).

Through the proposed amendments to SB 660, Capitol Dental Care supports strengthening the state's metric for dental sealants and expanding school based sealant programs throughout the state.

Thank you for the opportunity to testify on SB 660.