



Memorandum

To: Chair Patterson, Vice-Chair Knopp and Members of the Senate Committee Health Care

From: Marty Carty, Government Affairs Director, Oregon Primary Care Association

Date: May 10, 2021

Re: Support for HB 2528 -10

On behalf of the Oregon Primary Care Association (OPCA), we respectfully request your support for HB 2528 -10, which seeks to remove barriers and improve access to oral health care for underserved Oregonians.

OPCA is a non-profit organization, with a mission to support Oregon's 34 community health centers, also known as federally qualified health centers, in leading the transformation of primary care to achieve health equity for all. Community health centers deliver integrated medical, dental, and behavioral health services to **466,000—or one in 10—Oregonians**, many of whom otherwise would not be able to see a medical provider. Community health centers are providers within the CCO networks, providing care to some of Oregon's most vulnerable populations, including **one in four Oregon Health Plan members**.

Oregon's community health centers serve patients who often lack adequate access to oral health care. Many suffer from untreated oral disease, and many more are at risk of oral disease, often because they don't have access to preventative oral health care and education. Providers and care teams see firsthand how barriers to oral health care can lead to **poor health outcomes** and **increased cost to the health care system**. We know that individuals who don't receive regular oral health care are at greater risk for missing school, experiencing health complications related to oral health disease, and are less likely to maintain jobs and/or stable housing – all leading to downstream health complications.

OPCA and community health centers believe that access, education, and prevention are the ultimate keys to extending good oral health to those who don't have it. HB 2528 -10 is a critical step in ensuring equitable access to all Oregonians. It does this by creating the licensed profession of dental therapy. By increasing Oregon's dental workforce, we expand access to care where it is most out of reach: in rural, low-income, and communities of color.

This evidence-based oral health care delivery model has demonstrated that dental therapy works. We have not only seen improvement to access and outcomes here in Oregon as part of dental pilot project 100, but can also point to the successful implementation of authorized dental therapy in 11 other states.

We urge your support of HB 2528 -10 as an opportunity to be part of an upstream solution that strengthens communities, improves health outcomes and decreases health disparity and inequity.