

HB 3326 -2 STAFF MEASURE SUMMARY

House Committee On Behavioral Health and Health Care

Prepared By: Alexandra Kihn-Stang, LPRO Analyst

Meeting Dates: 3/13, 4/8

WHAT THE MEASURE DOES:

The measure directs the Oregon Health Authority (OHA) to study access to dental care for seniors and to submit a report to the Legislative Assembly by September 15, 2026.

ISSUES DISCUSSED:

- Medicaid coverage does not include dental care and emergency services can be costly
- Increasing access to dental care can prevent the need for future emergency services and contribute to cost savings
- Potential program costs

EFFECT OF AMENDMENT:

-2 Replaces the measure.

- Defines terms.
- Establishes the Seniors Emergency Dental Program in OHA for the purpose of providing specific emergency dental services to eligible seniors. Specifies that emergency dental services will not be subject to copayments, deductibles, or cost-sharing requirements.
 - Specifies emergency dental services covered under the program, including emergency extractions, limited oral evaluations, and necessary X-ray services. Specifies X-ray services covered.
 - Specifies program eligibility requirements, including that an individual is at least 65 years old, ineligible for the state medical assistance program, has an income at or below 400 percent of the federal poverty limit, and resides in an area covered by a coordinated care organization.
 - Permits OHA to adopt rules to carry out provisions of the measure.
- Becomes operative January 1, 2027. Takes effect on the 91st day following adjournment sine die.

Fiscal impact: Fiscal impact issued

Revenue impact: No revenue impact

BACKGROUND:

Oral health plays an important role in overall health, oral health conditions can negatively impact both physical and mental health. Cost plays a prominent role in limiting access to dental services.

The Oregon Health Plan (OHP), Oregon's state Medicaid program, was first implemented in 1994 and has continued to evolve in response to health systems reform efforts in the years since. The OHP coordinated care organization (CCO) model was established in 2012 through the passage of House Bill 3650 ([2011](#)) and Senate Bill 1580 ([2012](#)). The CCO model features a focus on primary care and prevention, providing a range of health services to their members, including physical, oral, and behavioral health care, either directly or through local and regional partnerships. Currently, there are sixteen CCOs operating regionally across Oregon, serving more 92% of Oregon's nearly 1.5 million OHP members. Approximately 5% of Oregon's OHP members are 65 years or older.

All OHP members have access to diagnostic and preventive dental [care](#) as part of their plan benefits. CCO members receive dental coverage in two primary ways, either through a local dental plan delivered through a dental care organization (DCO), or as fee-for-service (FFS) coverage. Beginning in 2023, OHP transitioned away from contracting directly with DCOs, instead requiring CCOs to contract with DCOs and manage dental care for

their members.

House Bill 3326 directs the Oregon Health Authority to study access to dental care for seniors.

PRELIMINARY