



By Email

February 15, 2025

The Hon. Rob Nosse
Chair, House Committee on Behavioral Health & Health Care
Oregon State Legislature

Re: H.B. 2676

Dear Representative Nosse, Vice Chairs Javadi & Nelson and Members of the Committee on Behavioral Health & Health Care,

We write today in opposition to H.B. 2676, which we believe substantially reduces public health safety in Oregon.

Since its chartering by the U.S. Congress in 1896, the American Association of Dental Boards has been the voice of state dental boards for the protection of public health. The Oregon Board of Dental Examiners has been a member of the AADB for decades.

H.B. 2676 has many issues and concerns:

- **It fails to mandate full reporting of disciplinary issues and criminal history**, limiting your state's ability to protect patients effectively.
- The DDH compact **does not give a state dental board authority** over persons practicing under a compact privilege.
- The DDH compact **undermines state authority** by giving an unelected commission quasi-legislative powers in your state.
- It creates an **unelected taxing authority** with the power to levy annual assessments on participating states, resulting in unpredictable fiscal impacts.
- The compact **weakens public safety** by potentially allowing unqualified dental professionals to practice across state lines.
- The DDH compact may **exacerbate workforce shortages** in your state by facilitating an exodus of dental professionals to more lucrative markets.
- The DDH compact may benefit large Dental Support Organizations (DSOs) **at the expense of local dental practices and patient safety**.
- Weaker standards in the DDH compact **could lead to increased malpractice claims**, as seen in states that have dropped hand-skills examination requirements.

H.B. 2676 is substantially different from the Medical Compact and Nursing Compacts that have been accepted for several years. The Interstate Medical Licensure Compact was drafted by the Federation of State Medical Boards in 2014, and the Nurse Licensure Compact was developed by the National Council

of State Boards of Nursing in 1999. The Council of State Governments had no role in drafting those compacts, and properly so. The appropriate regulatory boards--who are responsible for protecting public health in their states--drafted those compacts. Importantly, those compacts preserve each state's authority over any practitioners in their state.

By contrast, H.B. 2676—drafted by the Council on State Governments with no advice from the AADB—is modeled on the cosmetology compact. While the weak public protections in H.B. 2676 might be appropriate for cosmetology, they are wholly inappropriate for medical professionals such as dentists, who administer anesthesia, prescribe controlled substances, and perform surgery with almost every dental procedure.

We strongly urge consultation with Office of the Oregon Attorney General for its opinion on H.B. 2676's effect on the Dentistry Board's jurisdiction over dentists practicing in Oregon under a "compact privilege" vs an actual license and the application of various Oregon laws to those remotely licensed practitioners.

We ask that you protect the dental health of Oregon's citizens by voting against H.B. 2676.

Very truly yours,



Kimber Cobb, RDH, BS
Executive Director
American Association of Dental Boards, Inc.