

David J. Owsiany
Executive Director – Ohio Dental Association
Proponent Testimony on House Bill 184

Health Committee
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Proponent Testimony
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Chairman Huffman, Vice Chair Gavarone, Ranking Member Antonio and members of the House Health Committee -

My name is David Owsiany, and I am the Executive Director of the Ohio Dental Association. As you may know, the ODA is the professional association of dentists in Ohio. We represent 70% of Ohio's practicing dentists with more than 5,300 member dentists across the state.

It is my pleasure to provide proponent testimony for House Bill 184. The provisions of this bill are the fruit of a multi-year effort of the Ohio Dental Association Task Force on Access to Dental Care and Auxiliary Utilization. I would like to provide a brief overview of House Bill 184 and also introduce other proponents who are here to lend their voices in favor of House Bill 184.

House Bill 184 continues the ODA and the Ohio General Assembly's long-standing efforts to explore innovative ways to improve access to dental care. Over the last several years, the ODA has advocated for, and the Ohio General Assembly has enacted, several significant reforms to Ohio's laws to enhance the ability of under-served Ohioans to find a dental home. From Medicaid reforms to loan repayment programs to innovative expansion of duties and the loosening of supervision for dental auxiliaries, Ohio has been at the forefront of innovation in access to dental care.

And those efforts are paying off. Two recent reports – the Ohio Department of Health's Third Grade Oral Health Survey and the State of Ohio Health Assessment – demonstrate that Ohio is making significant improvements in the area of access to dental care for both children and adults. Despite the progress we are making in Ohio, however, we also know that there are pockets in Ohio where certain geographic areas and specific populations that would benefit from improved access to dental care.

House Bill 184 is aimed at closing those gaps.

Tele-dentistry

House Bill 184 will also update Ohio's laws to permit the extension of care into underserved communities via tele-dentistry. For example, this bill will permit dentists to

perform an exam via real-time exchange of information through technology, including intraoral cameras and digital x-rays, and will allow a dentist to provide direction to a dental hygienist or an expanded function dental assistant with specific training to perform interim therapeutic restorations and administer silver diamine fluoride. Both of these procedures can treat and arrest tooth decay and get patients out of pain or discomfort but do not require drilling or other invasive procedures. The bill would also allow a dentist to prescribe a non-controlled substance such as an antibiotic via tele-dentistry when necessary.

The use of tele-dentistry in this way will enhance the ability of certain institutions and other clinics to extend the care that they provide into underserved settings.

It is important to note that the bill requires specific patient protections when services are provided through tele-dentistry including abiding by all laws related to the privacy and security of the patient's dental and medical information.

Loan Repayment

More than a decade ago, the ODA worked to pass legislation creating the Dentist Loan Repayment Program. This program is entirely funded by a \$20 surcharge on dentists' license fees every two years. With about 7,000 licensed dentists, Ohio's dentists provide about \$140,000 every two years into the Dentist Loan Repayment Program. No General Revenue funds are expended on this program. It is entirely funded by Ohio's dentists.

The Ohio Dentist Loan Repayment Program provides loan repayment assistance for dentists who agree to practice in designated shortage areas and treat Medicaid patients and provide care to patients without regard to patients' ability to pay. This innovative program addresses several issues at once. Dental education is very costly and the typical dental student can graduate with more than \$200,000 in student loan debt. Moreover, Ohio has more than 80 designated dental professional shortage areas. So this program addresses two significant issues at once. Since the program's inception, dozens of dentists have participated in the Ohio Dentist Loan Repayment Program providing care to tens of thousands of under-served Ohioans in both rural and urban communities. House Bill 184 will double the capacity of the Ohio Dentist Loan Repayment Program by raising the fee that the dentists pay to \$40 every biennium. We expect this will result in twice as many dentists participating in the loan repayment program, caring for twice as many under-served Ohioans. And again it is entirely funded by Ohio's dentists.

Choose Ohio First Scholarships

House Bill 184 would direct the creation of a proposal for Choose Ohio First scholarships for dental school. To be eligible for the Choose Ohio First scholarships, the recipient must commit to practice dentistry for not less than four years upon graduation from dental school in a dental resource shortage area and accept Medicaid patients. This program is modeled after the Primary Care Medical Student Component and the Primary Care Nursing Student Component of the Choose Ohio First Scholarship Program.

These scholarships will enhance the number of dentists providing care in under-served areas upon graduation from dental school.

Clinical Exams

Ohio, like most states, requires as part of the licensure process that most candidates successfully complete a clinical examination. House Bill 184 adds the Commission on Dental Competency Assessments and the Council on Interstate Testing Agencies to the list of approved regional clinical testing agencies. These two agencies are widely acknowledged as reputable and effective testing agencies in the dental community. Adding these clinical testing agencies ensures that qualified practitioners will be eligible for licensure in Ohio as we continue to make our state an attractive place for dentists to set up their practices and deliver care.

Reducing Barriers for the Dental Team

In addition to those main provisions I have discussed, House Bill 184 also makes other changes to Ohio's laws to reduce the barriers for the existing dental team members - including dental hygienists and expanded function dental assistants - to provide prevention services in most settings, including nursing homes, schools and other public health settings.

Conclusion

As you can see, House Bill 184 is a multi-pronged approach to improving access to dental care and the dental delivery system in Ohio. I am pleased that we have three distinguished dental leaders and practitioners with us today to discuss practical applications of the provisions of House Bill 184 to demonstrate how these ideas will work in the real world.