

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

**Health, Human Services, and Medicaid Committee  
Ohio Senate  
Proponent Testimony  
June 5, 2018  
3:15 P.M.  
South Hearing Room**

Chairman Burke, Vice Chair Beagle, Ranking Member Tavares and members of the Senate Health, Human Services, and Medicaid 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 Substitute 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 Substitute House Bill 184 and also introduce Dr. Kimberly Hammersmith to discuss how these reforms can be utilized to extend care to the underserved.

Substitute 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.

Substitute House Bill 184 is aimed at closing those gaps.

### **Tele-dentistry**

Substitute 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. An earlier version of House Bill 184 would have doubled the capacity of the Ohio Dentist Loan Repayment Program by raising the fee that the dentists pay to \$40 every biennium. That increase and the expansion of the Ohio Dentist Loan Repayment Program was included in the state's biennial budget. 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**

Substitute 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. Substitute 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, Substitute 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, Substitute 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 Dr. Kimberly Hammersmith from the Dental Clinic at Nationwide Children's Hospital here to testify to discuss practical applications of the provisions of Substitute House Bill 184 to demonstrate how these ideas will work in the real world.

# Access to Oral Health Care

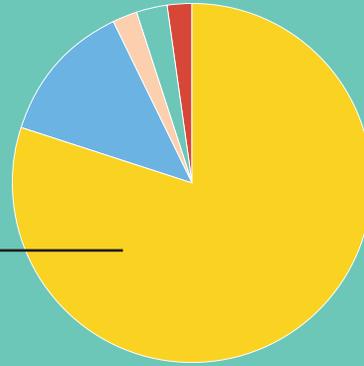
OHIO DENTAL ASSOCIATION  
Informing - Representing - Serving



## Most Ohio children have visited the dentist at least once in the last year

**80%**

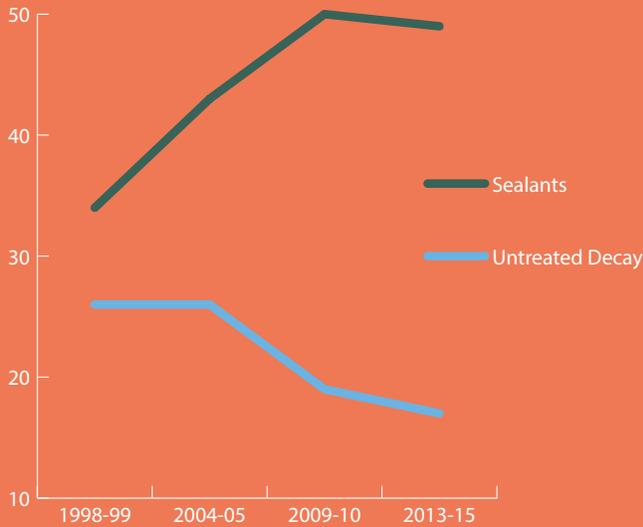
of Ohio third-graders had seen a dentist within the past year, as reported by their parents.



- Within the past year
- Within 1-3 years
- More than 3 years ago
- Never been to the dentist
- Unsure

Source: Make Your Smile Count! Third Grade Oral Health Screening Survey, 2013-15, Ohio Department of Health

## Oral health indicators for Ohio third-graders improving



Between 1998 and 2015, the percentage of children with dental sealants has steadily increased.

Between 1998 and 2015, the percentage of children with untreated cavities has decreased steadily.

Source: Make Your Smile Count! Third Grade Oral Health Screening Survey, 2013-15, Ohio Department of Health

## Ohio is meeting national targets

Percentage of children with one or more dental sealants:



**49%**

National Target

**28%**



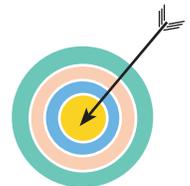
Percentage of children who had visited the dentist within the past year:



**80%**

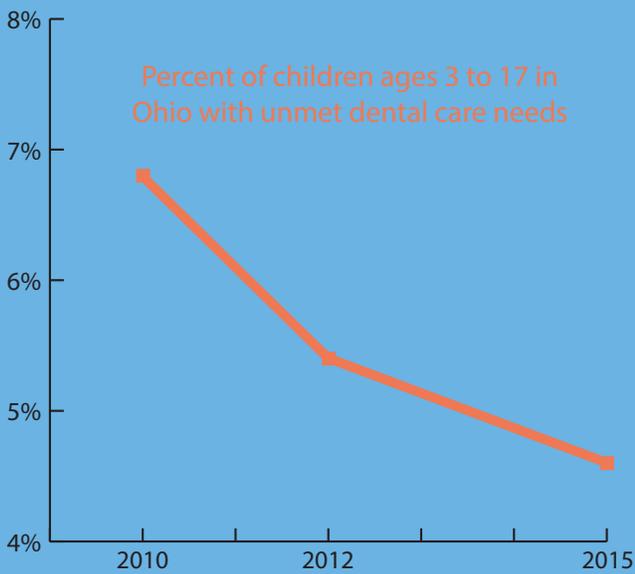
National Target

**49%**



Source: Make Your Smile Count! Third Grade Oral Health Screening Survey, 2013-15, Ohio Department of Health

# Unmet dental care needs decreasing in Ohio



The percentage of children ages 3 to 17 in Ohio with unmet dental care needs has been decreasing over the past several years.

Source: Ohio 2016 State Health Assessment

## Ohio's ratio of population to dentists better than national average

### Ohio

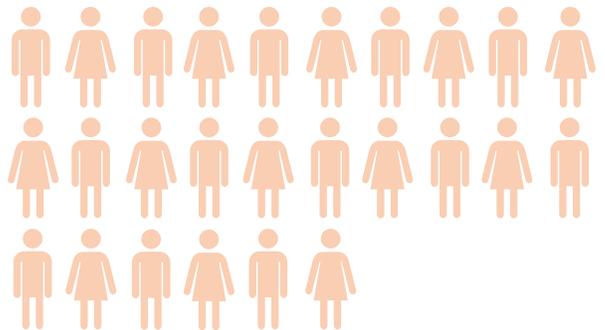
In 2014, the population to dentist ratio was:



Each person represents 100 people

### The United States

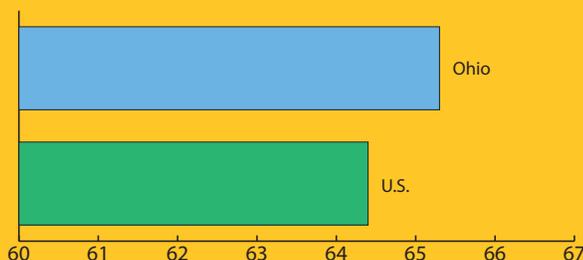
In 2014, the population to dentist ratio was:



Fewer people per dentist means that it's easier to schedule a dental appointment! Ohio has been improving its ratio of dentists to patients over the last several years. Plus, The Ohio State University College of Dentistry has announced that it is expanding its dental classes by about 10% beginning in 2018. When fully implemented, there will be 40 more dental students at the college of dentistry, adding to the number of dentists in Ohio.

Source: Ohio 2016 State Health Assessment

## Adults receiving dental care



In Ohio, 65.3% of adults reported visiting a dentist in the last 12 months. This is slightly better than the national average of 64.4%.

Source: Ohio 2016 State Health Assessment