

March 8, 2021

The Honorable Thomas Brinkman, Jr.
Chairman, House Insurance Committee
Ohio House of Representatives
77 S High St.
Columbus, OH 43215



Re: Request to Amend HB122 to Include Dentistry

Dear Chairman Brinkman,

On behalf of SmileDirectClub ("SDC"), we respectfully ask that House Bill 122 be amended to include dentists in the list of health care professionals covered by this telehealth legislation. By way of background, SmileDirectClub is an oral care company that among other services provides non-clinical administrative dental service organization support to contractually affiliated, state-licensed dentists and orthodontists seeking to provide clear aligner therapy to their patients through a telehealth platform at a significant cost savings to those patients. Typically, the telehealth clear aligner therapy is about 60% less costly than similar orthodontic care.

SmileDirectClub is a publicly-traded company that has assisted dentists and orthodontists to treat well over 1 million patients across all 50 states. In Ohio alone, over 37,000 patients have received effective clear aligner therapy over the SmileDirectClub telehealth platform. The cost savings to those patients for this care is estimated to be \$149 million. That is hard-earned dollars that stayed in the pockets of Ohioans.

This well-intentioned legislation includes virtually every health care profession as a provider of "telehealth" in the state with the notable exception of "dentists." You may recall that the Ohio House passed overwhelmingly last session similar legislation in House Bill 679 that included a separate and comprehensive provision concerning teledentistry. House Bill 122 removed this provision and then failed to include dentists at all as a named health care professional. A simple amendment to include dentists on the list of named health care professionals able to practice using telehealth would remedy this defect without impacting the current teledentistry statute.

While SDC recognizes that some traditional stakeholders would prefer that "teledentistry" continue to be narrowly defined as it currently stands in Ohio Code §4715.43, there are compelling public policy arguments to reject that approach. First, for state health care policy consistency, it makes sense for all health care professionals to practice by the same telehealth standards and rules. In fact, the current teledentistry regime is incredibly restrictive compared to the proposed telehealth definition in HB122, was designed pre-pandemic before the efficacy of telehealth technologies was widely accepted and was intended to serve a niche of the market using a very particular delivery method that involves sending dental auxiliary into rural areas to care for patients. We now know that there are many pathways for telehealth care delivery and, by including dentists in HB122, continued access to care will be ensured. By not including dentists, Ohio residents will be arbitrarily limited from being able to access oral health care.

Second, the current Ohio Code currently contains a separate definition of "telemedicine" in Ohio Revised Code §4715.296 similarly to how "teledentistry" is separately defined – and yet, unlike dentists, physicians are included in the new telehealth regime. If physicians are to now be positioned under the

umbrella of “telehealth” and no longer have a separate “telemedicine” regime, does it not make equally good sense to position dentists under telehealth as well?

Third, as a result of the Governor’s Executive Order 2020-5D, the state Medicaid Plan in its Rule 5160-1-18 included “dentists” as eligible providers and now bill for telehealth services under billing codes D0140 and D9995, among others. In fact, it is our understanding that the traditional stakeholders asked to be included in this telehealth regime but are now asking to be excluded from the practice in HB122.

Finally, I would point out that the Ohio teledentistry statute is among the most restrictive in the country. In fact, no other state has a requirement for a prior in-person visit as prerequisite to a telehealth encounter or the exclusion of non-real time services. Both of these are arbitrary restrictions without basis from any peer-reviewed clinical study. Indeed, there are many studies that show the efficacy of remote teledentistry.

In summary, SmileDirectClub, on behalf of its contractually-affiliated Ohio-licensed dentists and orthodontists, respectfully request that HB122 be amended to include “dentists” as health professionals eligible to provide telehealth services to Ohio patients.

If you have any questions or would like to talk further on this issue or on teledentistry more broadly, please do not hesitate to contact me at 615.647.6191 or Ray.Colas@smiledirectclub.com.

Respectfully,

Ray Colas
Director, Government Affairs
SmileDirectClub