

It will be easy to lose oral health in transformation without a champion or ombudsman. Capitol Dental Care is open to early engagement in transformation however we can only do so in context of oral health and its delivery system not becoming a casualty. Only 1 out of every 5 licensed dentists in Oregon participates in the Oregon Health Plan to any degree.

Transformation changes in the midst of a severe state budget shortfall are without a doubt placing enormous pressures on the dental delivery system. The delivery system built by the dental plans is fragile in these uncertain times. Oregon's economic challenges cannot be understated. However, it is with disappointment to see OHA's 10.5 general fund reduction list have three dental reduction lines in the first 3.5% targeted reductions. One of the key criteria used to prioritize was OHA's Triple Aim.

How can one have lifelong health and quality in the absence of oral health? More than one US surgeon general has stated 'you cannot have health without oral health.' Legislators have shared personal stories on the effects of poor oral health on either their health or someone they knew. It's not just about cleaning teeth as one legislator said. Oral disease is infectious, transmissible, affects low income and populations of color the greatest. How can the goal of health and eliminating disparities be addressed without oral health having parity?

More and more evidence points to oral disease's impact on systemic diseases and costs. The mouth does not know it is supposed to be a 'separate' policy area. When it is sick the body is sick too. How can overall costs be lowered without having oral health?

Oregon envisions an integrated/coordinated health care system that includes physical, mental and oral health with the potential to reduce costs and achieve OHA Triple Aim goals. How can dental providers stay the course with continued anxiety of that 'pink slip' to eliminate adult dental forthcoming? It will be hard convincing them to embrace transformation with such uncertainty.

For the last decade Dental Care Organizations have advocated 'Save OHP Adult Dental'. Consistently elimination of this benefit has been on cuts lists, usually near the top. This is even though dental benefit lines are interwoven throughout the OHP Prioritized List on covered lines. A traditional Medicaid program does not mandate adult dental coverage, but Oregon is not a traditional Medicaid program. Dental providers are often confused why adult dental is repeatedly targeted to cut. How can they be reassured that there is support for oral health being important, so they will invest in the future especially in context to transformation?

Dental is a distinct health care profession which to be effective should not be 'medicimized' in transformation. Dentists and dental professionals can and should be part of the health care team. Dental care organizations have years of experience working with at risk populations. We are ready to step up to the call in transformation. Willing to set quality metrics to reach the Triple Aim goals, but first we need to have the voice and support needed to do so.

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