HOUSE BILL REPORT HB 2622

As Reported by House Committee On:

Education

Title: An act relating to improving K-12 preparedness and performance through promoting better oral health.

Brief Description: Improving K-12 preparedness and performance through promoting better oral health.

Sponsors: Representatives Quall, Talcott, Anderson, Haigh, Rockefeller, Schmidt, Ogden, Lantz and Esser.

Brief History:

Committee Activity:

Education: 2/5/02, 2/7/02 [DPS].

Brief Summary of Substitute Bill

- Encourages various state agencies to work collaboratively to develop a plan for the oral health screening of young children who have not yet entered school.
- Encourages the Department of Social and Health Services to develop and implement a training program to educate health care professionals on preventive dental care and to develop methods to promote oral health coordinators in health jurisdictions that lack the coordinators.

HOUSE COMMITTEE ON EDUCATION

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 11 members: Representatives Quall, Chair; Haigh, Vice Chair; Talcott, Ranking Minority Member; Anderson, Cox, McDermott, Rockefeller, Santos, Schindler, Schmidt and Upthegrove.

Staff: Susan Morrissey (786-7111).

Background:

According to a 2000 report by the United States Surgeon General, dental disease is the most common chronic childhood disease in this country. Most forms of the disease are

preventable, especially early childhood dental disease commonly called baby bottle tooth decay. When children have poor oral health and decay is undiagnosed and untreated, the result can be serious, painful and expensive.

Increasing access to oral health care for children is one way of reducing the incidence of dental disease. One way of improving access is to offer opportunities in a variety of medical settings, since children who never visit dental offices are still likely to see physicians and other health care providers.

Summary of Substitute Bill:

The Office of the Superintendent of Public Instruction, the Department of Health (DOH) and the Department of Social and Health Services (DSHS) are encouraged to work collaboratively to develop a plan that promotes age appropriate oral health screening and preventive services to children before entering school. The plan should include dental screening and services for children at ages one and five.

The DSHS is encouraged to design and implement a training program for physicians, physicians' assistants, advanced registered nurse practitioners and dental hygenists on preventive oral health care. The training sessions should take place at least once a year or at other appropriate intervals for counties with a lower number of physicians. The training should complement existing mandates for oral health exams in public programs and be consistent with existing reimbursement for fluoride applications given by primary care providers. Participating physicians will receive continuing education credits for completion of the training.

The DOH is encouraged to develop methods for promoting the use of oral health coordinators in local health jurisdictions that lack coordinators.

Substitute Bill Compared to Original Bill:

The DSHS is encouraged to provide a preventitive oral health care training program for physicians' assistants, advanced registered nurse practitioners and dental hygenists as well as physicians.

Appropriation: None.

Fiscal Note: Requested on February 8, 2002.

Effective Date of Substitute Bill: Ninety days after adjournment of session in which bill is passed.

Testimony For: Good health, including dental health, is critical to children's academic success and quality of life. Preventive health care is the most cost effective way to preserve a child's dental health. Many parents are unaware of the need to provide dental care for very young children. If the health care providers that normally see young children were trained to screen for dental problems, they could alert parents to the need to attend to these problems. Early prevention and intervention will help preserve children's dental health and will help their parents and the entire health care system save money as the children mature.

Testimony Against: None.

Testified: Representative Quall, prime sponsor; Greg Pierce, Oral Health Watch; Phil Bussey, Washington Roundtable; Wanda Lehman, Washington State Parent Teacher Association; Dr. Irene Hunter, Washington Dental Service Foundation; and Melissa Johnson, Washington State Dental Hygienists' Association.

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