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the House Armed Services Committee**

**Statement of**  
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**Before the**  
**House Armed Services Committee**  
**Subcommittee on Oversight and Investigations**

**Subject:**  
**Dental Readiness in the Reserve Component**

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## **The House Armed Services Committee**

Chairman Snyder, distinguished members of the committee, good afternoon, and thank you for the opportunity to testify before you today about Navy Dentistry's mission -- that of ensuring dental readiness for all of its Sailors and Marines, both Reserve and Active.

Dental readiness is a state where a Sailor or Marine is ready to deploy and likely not to experience a dental emergency while away from home.

When a recruit is accessed, an initial exam is performed and he/she is classified according to his/her dental disease. Annual exams are required for both Reserve and Active Component Sailors and Marines. It is a triage system that prioritizes care based on their level of dental disease. A Sailor or Marine is Operationally Dental Ready (ODR) if he/she falls into either Class 1 (no disease) or Class 2 (disease not likely to cause a dental emergency within 12 months). The goal as stated by the Office of the Secretary of Defense for Health Affairs is for all services to reach 95% ODR. There is currently no Navy-specific mandate.

Over the past 3 years, incoming Navy and Marine Corps recruits have entered boot camp with an average ODR of 29%. At the Navy and Marine Corps' boot camps, Navy Dentistry has maintained a heavy dental presence that focuses on reaching the 95% goal before our recruits go back to Reserve status or reach their duty stations. While we have fallen short of the 95% goal in the last few years, we have maintained an ODR in the 80th percentile. Historically, through 2002, ODR percentage across the Navy has been in the mid 90s or above. Since 2002, however, it has fallen to 86-87% as we shift resources to focus on personnel who are getting ready to deploy.

For the Navy Reserve, of the 16,193 service members that are still drilling and have mobilized, they were 91% operationally dental ready with 1.5% being considered Class 3. For the Navy's active component, the last 112 ships that have deployed have all had an ODR above 95%.

Over the first quarter of FY08, the overall ODR for the Marines Corps Reserve was 77.7% with 6.5% being considered Class 3. Our efforts to focus on deploying Marine Reservists have paid off and the last two Battalions to deploy in 2007 went out at greater than 95% ODR. Active duty Marine units deployed at 90-97% ODR,

The Reserve challenges to ODR include dental officers and technicians retention and recruiting and the loss of 17% of the Reserve Dental Corps billets. As the Navy Reserve Dental Corps has become smaller, providing regular exams has become a challenge. We are meeting this challenge by using contract dentists, offering more incentives to retain and recruit, hosting "dental stand downs" for units to get exams all at one time, and having traveling dental teams go to remote locations. In addition, there is a perception by Reservists that the cost of the Tricare Dental Program -- \$11.58 per month with 20% cost-share for fillings -- is prohibitive. We are addressing this issue by increasing our education efforts for Reservists on the value of the program.

To maintain our ODR goals with decreased Reserve and Active Dental Corps personnel, we have increased the use of Private Sector Dentists through the Military Medical Support Office program (MMSO). This shift in care to the private sector has increased the MMSO costs over the past four years from \$3.7M in 2004 to \$34M in 2007.

Retaining Dental Corps officers in Reserve and Active components has been increasingly difficult in recent years. Almost 70% of Junior Officers are leaving Active

Duty after they complete their first obligated tour and are not affiliating with the Active Reserve. One of the major issues has been dental assistant support, which is now beginning to improve. Another motivator for getting out of the service has been the rates of promotion and pay for Dental Corps officers. Promotion issues are improving, and we are hopeful that the trend will be maintained. In addition, recent improvements by the National Defense Authorization Act increased the Additional Special Pay (ASP) for junior dental officers by \$6,000.00 to \$10,000.00 or \$12,000.00 based on years of service. We expect this increase in the ASP will have a positive impact on retention. Today, with this increased pay, an Active Duty general dentist in Washington DC, with 4 years experience, earns about \$95,000 plus benefits.

Improvements to Dental Corps accession bonuses for Reserve and Active Duty and stipends for Reserve scholarship programs have recently improved and we thank you for your support. We are optimistic these enhancements have improved our recruitment efforts, as we at this point in the fiscal year expect to meet our accession goals. Currently we are almost 100% ahead of where we were last year at this time. In the Reserve Corps, we have already gained 14 new dental officers compared to 2 in all of fiscal year 2007.

Chairman Snyder, members of the committee, thank you again for the opportunity to testify before you and share with you how Navy Dentistry is ensuring sailors' and Marines' dental readiness remain a priority. We appreciate your efforts to improve our recruitment and retention, as well as your interest in this very important issue. I stand prepared to respond to any of your questions.