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Health and Human Services Committee February 9, 2012

Madam Chair and members of the Committee, thank you for the opportunity to talk with you today about HB 2361. My name is Tanya Dorf Brunner, and I am the Executive Director of Oral Health Kansas, Inc. We are the statewide advocacy organization dedicated to promoting the importance of lifelong dental health by shaping policy and educating the public so Kansans know that all mouths matter. We achieve our mission through advocacy, public awareness, and education. Oral Health Kansas has over 1,100 supporters, including dentists, dental hygienists, educators, safety net clinics, charitable foundations, and advocates for children, people with disabilities and older Kansans.

We see three types of barriers to accessing oral health in our state: access to a payment source; access to a provider; and willingness to access services. A variety of approaches to all three types of access must be present in order for all people to have adequate access to oral health care. With our partners in the oral health field, we are working to address each of these through a variety of means.

Oral Health Kansas supports HB 2361. We wish to address a few key components of the bill today.

Dental Hygiene services for schoolchildren

The first component we wish to address is found on page 5 of the bill from lines 8 through 11. This section involves an amendment to the 2003 Extended Care Permit law that provides Kansas school children access to a dental hygienist, KSA 65-1456.

In the fall of 2010 Oral Health Kansas helped convene a group of stakeholders, including dental hygienists, a dentist, a school superintendent, a Medicaid program staff member, and a staff member from the KDHE Bureau of Oral Health, to review the Extended Care Permit law. This law allows dental hygienists with an Extended Care Permit to provide dental hygiene services in public settings, such as schools, nursing homes, and CDDOs. The stakeholder group concluded the Extended Care Permit (ECP) law is a tremendous asset in creating access to dental hygiene services to underserved populations in Kansas. One key barrier the group noted was that the children who are eligible to be seen by ECP hygienists in schools are not always able to see the ECP hygienists because the eligibility criteria for the service are too narrow.

The 2010 work group's goal was to offer preventive dental services to children who lack a regular dental provider, but not to replace dental services that children with a regular dentist receive. To that end, language was developed that would add an eligibility requirement of not having seen a dentist in the last 12 months, and the

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eligibility requirement of being on free or reduced school lunch was removed. This was intended to expand the number of children ECP hygienists could see.

Recently stakeholders have had additional conversation about this provision. Some concern has been expressed that making these two changes in the law would result in unintended consequences. Stakeholders came to an agreement in the past few days that the following language would meet the intent of providing ECP hygiene services to children who do not have access to the services. Oral Health Kansas proposes HB 2631 on page 5 at line 8 be amended to say, "so long as such children who are dentally underserved are targeted;".

We note that the same amended language would need to be added to the bill on page 3 at line 2, as the eligibility requirements for ECP school services are discussed there as well.

In the poorest Kansas school district, all of the children in the district who do not have a dental home are able to be seen by an ECP hygienist. The Galena School District worked with the Community Health Center of Southeast Kansas to set up a system at enrollment for parents to allow their children to be seen by the ECP hygienist. As a result, all of the children who did not have a dental home now are able to receive services from the ECP hygienist at school each year. We believe this proposed amendment will expand access to preventive dental services for underserved school children across the state.

Extended Care Permit III

Oral Health Kansas recognizes the need to expand and strengthen the dental workforce in Kansas. We believe access to both a provider and a payment source need to be strengthened in order to ensure all Kansans have access to good oral health care. Without a funding source, people do not have access to dental services. Likewise, without a dental provider, people do not have access to dental services. Both are critical, and one of our key priorities is to strengthen the Kansas Medicaid program by ensuring all people eligible for the program have access to dental services.

Our board supports the efforts to address the dental workforce through HB 2361 and HB 2280. HB 2280 creates a new Registered Dental Practitioner, which is considered to be a midlevel professional with a scope of practice between a dental hygienist and a dentist. HB 2361 creates a new Extended Care Permit level that would allow dental hygienists to perform certain restorative procedures. The new ECP level would allow specially-trained dental hygienists to perform basic restorative procedures, thereby improving access to dental services for the populations identified in KSA 65-1456.

University of Missouri at Kansas City School of Dentistry

A provision is included in section 2 of the HB 2631 on page 7 to increase the number of Kansas students who can attend the UMKC School of Dentistry and pay in-state tuition. Last year Oral Health Kansas worked with the Kansas Dental Association on this proposal, and we believe this is one very concrete approach to increasing the number of dentists in our state every year.

We learned several months ago that requiring dental school graduates to practice in Kansas for any amount of time in exchange for receiving in-state tuition at the UMKC School of Dentistry would make the dentists ineligible to participate in the National Health Service Corps loan repayment program. We support any efforts to increase the number of seats for Kansas students at UMKC, but we believe the language requiring the students to practice in Kansas needs to be reconsidered to ensure dental students can take advantage of the loan repayment program.

Thank you for your time today. I am happy to stand for any questions.