



February 23, 2015

To: Senator Mary Pilcher-Cook, Chair
and Members of the Senate Public Health and Welfare Committee

From: Brenda R. Sharpe, President and CEO
REACH Healthcare Foundation

Subject: Senate Bill 49 – Licensure of Registered Dental Practitioners

I'm writing today to express our support of Senate Bill 49 as a safe, practical solution for improving the oral health of Kansas children and families. I am Brenda Sharpe, President and CEO of the REACH Healthcare Foundation, a charitable foundation established in 2003 that is dedicated to ensuring access to quality, affordable health care for uninsured and medically underserved people in a six-county area that includes Allen, Johnson and Wyandotte counties in Kansas and three counties in Missouri.

Since 2005, the REACH Foundation, located in Merriam, KS, has invested more than \$43 million in health programs in three key areas – safety net primary care, mental health and oral health services. Nearly half of that amount has been allocated to Kansas programs and services.

Today, I want to ask for your full consideration for the establishment of a new mid-level professional described in SB 49 as a **Registered Dental Practitioner (RDP)**.

Members of this committee and your legislative colleagues are aware of the dental care shortage issues in Kansas. Five years ago, the REACH Foundation Board of Directors agreed that our organization should join with health providers and advocates in supporting new solutions to the dental workforce shortage. Before the foundation took a position, I met with dental school faculty in this region and in other parts of the country, visited with dentists and other health providers from public health and private practices, and examined the research on safety and quality. I also met with members of the Kansas Dental Association and the American Dental Association to understand their perspectives. Over the past five years, it has become increasingly clear that the Registered Dental Practitioner model is a solution that merits attention.

The REACH Foundation has invested hundreds of thousands of dollars in oral health care. We have supported the hiring of dentists and dental hygienists in urban, suburban and rural safety net clinics; implementation of electronic health records to support dental care coordination; dental screening and referral projects; school-based oral health; mobile dental care; fluoride varnish projects; the statewide Oral Health Champions program;

Kansas Mission of Mercy and more. None of these efforts take away from the fact that there are not enough providers.

The RDP model is safe, cost-effective and allows dentists to decide how to serve more individuals. The RDP would require very specific professional education and training, and supervision by a dentist. The RDP would become part of the dental care team – *not* an independent provider. Dental mid-levels could be recruited from their own communities, creating work opportunities. Dental mid-levels would help serve children and seniors, who struggle to access dental care.

As you are aware, the state's dental association is resistant to considering this model. In our foundation's conversations with dental association leaders, their representatives have advocated for higher Medicaid reimbursement rates or creating additional slots in our region's dental school. Over the past several years, task forces have been convened to study the cost and feasibility of a dental school, establish dental funds for the poor, and discuss Medicaid reimbursement levels. These proposals are costly and provide limited relief to a dental workforce shortage that continues to grow.

Furthermore, as a lifelong Kansan who grew up in western Kansas, I've seen the challenges my family members have encountered in accessing health services, and know how mid-level providers can enable health providers to expand their practices. After several years of examining this issue, it is time to move forward.

Let's pursue this common sense approach. The workforce model proposed in SB 49 will address lawmakers' interest in improving health care for people while managing the state's costs. Oral health advocates, higher education institutions, dental hygienists, public health professionals and even dentists who recognize the need and the opportunity stand ready to assist in the full implementation of this provider model.

Thank you for the opportunity to provide written testimony today on SB 49. On behalf of the REACH Foundation, I strongly encourage your support of this legislation.

Brenda R. Sharpe

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