

Testimony in Support of HB2139 House Health and Human Services February 14, 2017

Good afternoon Mister Chairman and members of the committee. Thank you for the opportunity to submit written testimony in support of HB 2139. The Kansas Association for the Medically Underserved (KAMU) is a member of the Kansas Dental Project, and our member safety net clinics strongly encourage you to pass legislation allowing Kansas safety net clinics to hire dental therapists.

Most people like us have the luxury of getting dental check-ups every six months with cleanings and preventive treatments to ensure good oral health. Should a cavity sneak in on us, it isn't too big of a problem. We can have it quickly treated, often fitting the appointment within our normal work day. However, this isn't the case for many Kansans. Unfortunately, many have not had preventive care in years, if ever, due to lack of insurance and access to providers of dental care.

Over the past several years, Kansas safety net clinics have worked hard and dedicated resources to help fill this gap in care. **The sad truth is that, as the system currently stands, our clinics can't serve all the patients in need of dental care, and it may be getting worse.** In 2015, 22 safety net clinics that provide dental care treated more than 88,000 patients. They also treated thousands of kids in schools across the state. In 2016, all Medicaid providers received a 4% reduction in reimbursement. Due to this, several Kansas dentists that previously served people enrolled in Medicaid, decided no longer to treat them any longer or would not accept new patients. In communities like Hays, that lost their only private Medicaid dentist, this left the safety net clinic in the area trying to absorb 3,000 children. Given the fact that the need for services far exceeds current capacity, you can imagine how these dental providers are stretched thin trying to fix a gaping wound that has left our fellow Kansans suffering and in pain. Dental therapists can help close the gap and heal the system.

HB 2139 allows the creation of a mid-level practitioner, but don't let the term "mid-level" fool you. "Mid-level" does **not** mean substandard training or inferior care. Dental therapists must be registered dental hygienists (RDH) who obtain advanced education and training at programs accredited by the Commission on Dental Accreditation (CODA). CODA is the accrediting body for all dental programs, including dentists. Dental therapists will then pass comprehensive clinical examinations. Having a limited scope of practice will allow them to focus their training and perfect their skills on the specific procedures they will be licensed to provide. As one would expect, they will have to pass the same licensing requirements as a dentist does to provide these same procedures.

The benefits of expanding the dental workforce with dental therapists is substantial on many levels. **Safety net clinics could dramatically increase the number of patients they see by adding dental therapists to their dental staff.** In addition to providing services in the dental clinic, **they could go into underserved areas and give people the dental care they so desperately need and deserve.** For example, providing care to children in schools, will make it easier for the children and the parents. As it stands now, if a child is found to have cavities during a school-based preventive visit, they are referred to a dentist. The parent must then take off work in order to take the child to the dentist. In addition to having to pay for the dental services (often because they do not have dental insurance), they may also have lost wages, which means less money for food, rent, clothing and other daily expenses. Dental therapists could fill the cavity at the school without the parent missing any work. It would also allow the teacher to have a happier, pain-free, focused student back in the classroom faster. And, the child can do what is supposed to happen at school – learn!

Let's take a moment to look at the benefits of a dental therapist that go beyond increased access to dental care. Kansas has the chance to be the 7th state to utilize these mid-level dental providers. This could provide a significant boost to our state's economy. Wichita State University and Fort Hays State University are eager to embrace this program, welcoming many more, new students to their schools. Once trained and licensed, dental therapists will plant their roots in the Sunflower State - paying taxes, buying homes, starting families and contributing to the economy. Kansas will likely attract dental hygienists from outside of our borders to complete the dental therapist program and practice within our state. The price tag for this this economic stimulus? Not a cent needed from the State.

Our member safety net clinics see the need for increased access to dental care every day and feel the burden of not being able to fully meet that need. They see it on the faces of your constituents and their children. They see it on the faces of their tremendously dedicated, yet overworked dentists. HB 2139 will do more than just provide a band-aid solution to our dental crisis. The addition of a dental therapist to the dental team is a necessity. Without these additional providers, equipped with the skills to provide high quality and well-supervised treatment of dental disease, the workforce shortage and the gap in care will continue to worsen. Help improve access to dental care and heal our state.

Thank you for your sincere consideration of HB 2139. Please pass this bill out of committee and help fix the state's painful "toothache" caused by lack of dental care.

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