



Community Health Center of Southeast Kansas

Testimony – House Bill 2139

House Health and Human Services Committee – February 17, 2017

Jason Wesco, Executive Vice-President

Chairman Hawkins and members of the Committee, thank you for allowing me to provide written testimony in support of House Bill 2139.

The Community Health Center of Southeast Kansas (CHC/SEK) provides access to medical, behavioral and dental care services to all individuals regardless of their ability to pay. Last year we cared for more than 40,000 patients during nearly 160,000 visits to clinics located in Baxter Springs, Coffeyville, Columbus, Independence, Iola, Parsons and Pittsburg. This included more than 24,000 dental visits. Our dental program employs five dentists and thirteen dental hygienists (all with Extended Care Permits) that offer services in five clinical locations and on-site in schools, County Health Departments, Head Starts and other facilities across Southeast Kansas. The growth in our dental services has been significant since the inception of the program in 2005.

In my work at CHC/SEK, I am responsible for all aspects of our dental program, from new program development and strategic planning to recruitment of dentists and dental hygienists. **I have seen first-hand the critical lack of access to dental care that exists in rural Kansas, not just for the underserved, but for entire communities.** As a Community Health Center, we concern ourselves with access to care for everyone, not just the underserved. And we are very concerned about the current and especially the future of access to oral health care in Kansas.

Since inception, our dental clinics have cared for patients from twenty-six Kansas counties and we regularly see patients that drive from seventy-five miles away to obtain affordable dental care. This demand has been the impetus for the rapid expansion of our dental program, but even with our expansion we are still hopelessly understaffed. In Southeast Kansas alone, there are more than 75,000 low-income individuals in the nine county region – nearly 40% of the total population. But the problem doesn't stop here. There are about 170,000 individuals in our region and, at my last count, 44 general practice dentists (and no pediatric dentists, no endodontists and just one oral surgeon) not all of whom work full time and inclusive of dentists employed by CHC/SEK. On average in the nine counties, the ratio is one dentist for every 4,047 residents (KDHE, *Kansas Health Matters*, 2013). The ratio in Kansas is about 1:2,734 (KDHE, *Kansas Health Matters*, 2013), and in the nation about 1:1,666 (American Dental Association, 2015). By any measure we are critically underserved.

To further compound the problem, we have an aging dental workforce. According to KDHE's Bureau of Oral Health's workforce survey conducted in 2011, the average age of a dentist practicing in rural Kansas was about 55. With the increasing demand for care and the decreasing supply of dentists, we are facing a crisis in access to dental care of increasing severity over the next 10 years – assuming attrition in providers that tends to come with an aging workforce – which we have certainly seen since the KDHE report's publication in 2011. **In some of our counties over that time, I anticipate that we may be the only source of dental care available for anyone, insured or not, wealthy or poor. This reality will**



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strain our resources tremendously. In fact, there is no way, given the current environment that we would be able to provide adequate access to care to additional patients.

House Bill 2139 proposes allowing dentists and safety net clinics to hire dental therapists, mid-level providers that would function much the same way as Advanced Practice Registered Nurses and Physician's Assistants do in the medical field. **Dental therapists would mean safety net clinics like ours could greatly expand access to quality dental care, in the same way that we use medical mid-levels to extend the reach of our physicians.** In our medical practice, we employ fifteen physicians and eighteen A.P.R.N.'s and P.A.'s. I expect the same kind of ratio in our dental practice if we were to have access to dental therapists. **If we were to hire six dental therapists, we estimate that an additional 8,000 patients could be cared for during 15,000 visits each year.**

Dental therapists would also help CHC/SEK recruit and retain dental providers who would stay in Southeast Kansas long-term. Dental therapists would mean an increased provider pool from which we could recruit. Currently, of the five dentists we employ none are Southeast Kansas natives, a fact that could lead to long-term retention issues. Expanding the provider dental provider pool to include dental therapists, would increase the likelihood of finding regional natives that would choose to practice (and remain long-term) in the area. This increased provider pool would allow us to increase capacity at our current clinical sites and to more readily expand into communities where CHC/SEK does not currently have a physical presence.

In short, the dental therapist is the best tool we have at our disposal to help eliminate numerous barriers that many Kansans face today in accessing oral health care. Over the next decade, the conjoined problems of access to care and the declining dental workforce, problems that have traditionally affected the uninsured and those with public health benefits, threaten to make most Kansans "underserved."

This legislation before you appeals to, as Lincoln said, "the better angels of our nature." It says "yes" to our fellow Kansans in need who are so accustomed to being told "no." It illustrates our heritage as a people who seek out, find and implement unique solutions to complex challenges. It carries on the proud Kansas tradition of passing forward-thinking legislation in the public's interest.

On behalf of our board, staff, patients and most importantly those we are as yet unable to serve, I ask that you support House Bill 2139.

Thank you for considering my testimony. Best wishes as you deliberate on this matter.