



To: Chairman Hawkins, Members, Health and Human Services Committee
From: Rachel Monger, Vice President of Government Affairs
Date: March 14, 2018

Testimony in Support of Senate Bill 312

Thank you, Chairman and Members of the Committee. I am Rachel Monger, Vice President of Government Affairs for LeadingAge Kansas, the state association for faith-based and nonprofit providers of aging services. We have 160 members across Kansas, which include not-for-profit nursing homes, retirement communities, hospital long-term care units, assisted living, homes plus, housing, low-income housing, home health agencies, home and community based service programs, PACE and Meals on Wheels. Our members serve more than 25,000 elders each day.

Access to routine dental care is an essential health issue for elder Kansans. Most people lose their dental insurance coverage when they retire. Medicare does not cover routine dental care, and only provides a few limited services deemed “medically necessary.” Medicaid also no longer covers oral health care for adults, except for “emergency services.” Under KanCare, MCOs offer a limited number of preventative dental visits a year. Nursing home residents and elders who are home-bound or disabled often have limited access to dental care. Nursing homes do not employ dental staff, and transportation and access to a dentist’s office is often a steep barrier. Nursing home residents in fragile physical health or with advancing stages of dementia often cannot obtain dental care unless a dentist comes to the nursing home and provides care. There are few dentists willing or able to go into a nursing home to perform dental procedures. Dental therapists provide the opportunity for regular and effective dental treatment for nursing home residents, rather than elders relying on emergency care that may come too late.

We testified as neutral on this bill in the Senate Public Health and Welfare Committee because the original version of SB 312 restricted some of the dental procedures that are most needed by elders to be performed only in a dental office, while a dentist is personally on-site supervising patient care before and after their dental procedure. This requirement would have guaranteed that dental therapists would not provide care for elders in much-needed and essential ways. The Public Health and Welfare Committee members addressed our concerns by amending the bill to clarify that procedures may be supervised by a dentist outside of a dental office. Upon amendment, we feel that we can now support SB 312.

Elders in Kansas represent a large part of the population who struggle to access timely and effective dental care. We respectfully request that the Committee to take those needs into account while working on SB 312, and to support the Senate amendments made to the bill.