

MINUTES OF THE PUBLIC HEALTH AND WELFARE COMMITTEE

The meeting was called to order by Chairman Vicki Schmidt at 1:30 p.m. on March 9, 2011, in Room 546-S of the Capitol.

All members were present.

Committee staff present:

Nobuko Folmsbee, Office of the Revisor of Statutes
Melissa Calderwood, Kansas Legislative Research Department
Iraida Orr, Kansas Legislative Research Department
Carolyn Long, Committee Assistant

Conferees appearing before the Committee:

Jason Wesco, Community Health Center of Southeast Kansas
Heidi Foster, Rawlins County Dental Clinic
Maggie Smet, Kansas Dental Hygienists Association
Kevin J. Robertson, Kansas Dental Association
Dr. Paul Kittle, DDS, Leavenworth
Dr. John Fales, DDS, Olathe
Dr. Mark Herzog, DDS Ellsworth
Dr. Dave Hamel, DDS, Marysville
Dr. Cindi Sherwood, DDS, Independence

Others attending:

See attached list.

The Chair continued the hearing on **SB 192—Kansas Dental Board; licensure of registered dental practitioners** and welcomed Jason Wesco, Community Health Center of Southeast Kansas. Mr. Wesco said that for them it would mean the ability to greatly expand access to quality dental care, in the same way that they use medical mid-levels to extend the reach of their physicians. He stated that the RDP is the best tool they have at their disposal to help eliminate numerous barriers that many Kansans face today in accessing oral health care (Attachment #1).

Heidi Foster, Rawlins County Dental Clinic which is a non-profit safety net dental clinic serving 18 counties in Northwest Kansas stated in her work she sees a persistent lack of dental care access. With the help of RDP, young people and adults in Northwest and Central Kansas could access the expanded spectrum of dental care they need. Their most vulnerable patients are children who are developmentally disabled, and frail elderly could receive services where they live and study, eliminating barriers to full dental care (Attachment #2).

Maggie Smet, Kansas Dental Hygienists Association President said she loves being able to give quality dental care to every Kansan. However she feels that those without dental insurance and those Kansans who qualify for federal poverty levels are at a great disadvantage (Attachment #3).

Presenting written testimony in favor of the legislation was Janette Delinger, KDHA Legislative Chair (Attachment #4), Denise Maus, KDHA past president (Attachment #5), Dave Sanford, CEO and Executive Director of GraceMed Health Clinic in Wichita (Attachment #6), Cathy Harding, Executive Director, Kansas Association for the Medically Underserved (Attachment #7), Tanya Dorf Brunner, Oral Health Kansas (Attachment #8), Katherine Weno, Director, Bureau of Oral Health, KDHE (Attachment #9), Michael J. Hammond, Executive Director, Association of CMHCs of Kansas, Inc. (Attachment #10), and Georges C. Benjamin, Executive Director, American Public Health Association (Attachment #11).

The Chair recognized Kevin J. Robertson, Executive Director of the Kansas Dental Association (KDA), who spoke in opposition to **SB 192**. The KDA believes that all Kansans deserve access to safe and quality oral health care and to a dentist to provide for their diagnostic, restorative, and surgical dental needs. Dentists across Kansas believe that **SB 192** jeopardizes patient health and safety. Though not financially or politically feasible at this time, dental Medicaid for adults is a critical component to truly improving oral health in Kansas. The KDA supports the expansion of services for dental hygienists and worked toward the agreement that became the Extended Care Permit (ECP) Dental Hygienist. They endorse further expansion to the law to create an ECP III. They would have the same infrastructure, practice

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locations/populations and dental supervision that the current ECP I and II have and as such would not create the bureaucracy of an entirely new practitioner ([Attachment #12](#)).

Dr. Paul Kittle has been in private practice in pediatric dentistry since 1994 and does accept Medicaid. He states Kansas has exceptional dentists who care for children. He has participated in Kansas Mission of Mercy (KMOM) projects in nine different areas through the State. He states the problem is not that there are insufficient Kansas dentists to treat those with a dental need, the problem is that even when and where care is available, the value and the importance of oral health is not understood ([Attachment #13](#)).

Also in opposition to **SB 192**, Dr. John Fales, President of the Kansas Association of Pediatric Dentists, believes that Kansas does not have an access to care issue but rather a barrier to care problem. He suggests some of the reasons are lack of understanding of the importance of good oral health on the part of the parents, inability to get to the dentist providing the free care because of transportation issues, fear of discovery by undocumented parents or not being able to take time off or not being allowed time off by employers ([Attachment #14](#)).

Dr. Mark Herzog, DDS from Ellsworth, told the committee that right now Medicaid is only for children and many come from economically and/or socially depressed households. He wonders if the majority of those who are in dire need of dental treatment are adult patients, how is the midlevel going to be able to treat them? There is no reimbursement other than extractions of permanent teeth which, under their guidelines, only allows them to do the very non-complicated ([Attachment #15](#)).

Dr. Cindi Sherwood, DDS, Independence told the committee that she has had both educations—that of a dental hygienist and a dentist, and that there is no comparison between the two curriculums. The breadth and depth of the dental curriculum is much more rigorous than the dental hygiene courses. The dental hygiene curriculum does not teach diagnosis. She does not feel that you can teach someone to do everything a general dentist does except root canals with 18 months of education on top of a superficial understanding of dentistry. A dental hygienist is not a dentist in training and she feels there are clear safety concerns based on a lack of adequate education for the proposed scope of practice of the dental practitioner ([Attachment #16](#)).

Dr. David Hamel, President of the Kansas Dental Association, stated that the location of dentists across the state follows the distribution of the population as a whole. Only the most remote farmers are not within 30 miles of a dentist. He acknowledged there are communities in Kansas without a dentist but also stated that it would be cost prohibitive and unnecessary to put dentists in each of those communities or call them underserved ([Attachment #17](#)).

Submitting written testimony in opposition to **SB 192** was Christy Gunter ([Attachment #18](#)), Dr. Jeffrey Stasch, DDS, Garden City ([Attachment #19](#)), Jessica Rogers, dental hygienist from Garden City ([Attachment #20](#)), Ric Crowder, DDS, President, Kansas Academy of General Dentistry ([Attachment #21](#)), Glenn Hemberger, DDS, President of Kansas Dental Board ([Attachment #22](#)), and Julie C. Swift, DDS, Topeka ([Attachment #23](#)).

There being no further conferees, the Chair closed the hearing on **SB 192**.

The next meeting is scheduled for March 10, 2011.

The meeting was adjourned at 2:30 p.m.

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