

**Senate Ways and Means Subcommittee on SRS
Department of Social and Rehabilitation Services Budget
March 5, 2010**

Madam Chair and members of the Committee, thank you for the opportunity to talk with you today about the 2011 SRS Budget. My name is Tanya Dorf Brunner, and I am the Executive Director of Oral Health Kansas. We are a statewide coalition dedicated to improving oral health in Kansas through advocacy, public awareness, and education. We have over 1000 supporters, including dentists, dental hygienists, educators, safety net clinics, charitable foundations, and advocates for children, people with disabilities and older Kansans.

In 2007 the Legislature established dental services for people who are on the developmental disabilities (DD), physical disabilities (PD), traumatic brain injury (TBI) and frail elderly (FE) Medicaid Home and Community-Based Services (HCBS) waivers. Since then thousands of Kansans have had access to basic dental services, including cleanings, root canals, and basic fillings. Research shows that people who receive routine dental services are able to better manage oral health problems that could lead to more serious and costly health problems, including pneumonia, strokes, and heart conditions.

As a result of the November 2009 allotment, dental services for people on the PD, DD, and TBI waivers have been eliminated, and dental services for people on the FE waiver will be accessed only through a rare crisis exception.

Last week our office received a call from the mother of a man who is on the developmental disabilities waiver. Her son is 42 years old and lives in Gardner. She said his teeth are falling out, and he has abscessed teeth with pain and infection. She is worried about it spreading to his brain if he doesn't receive some care. He is unable to pay for it on his own, as he only make \$800 a month. She is on Medicare and also is unable to pay for his dental services. She asked for help, and our first response was that there just may not be any help available. We are talking to the mother and working through several ideas, including contacting dentists to see if any services could be donated.

Since the waiver dental services were eliminated, we have begun receiving lots of phone calls from CDDOs asking what can be done to meet the oral health needs of their consumers. We are working with CDDOs and their staff to implement improved prevention techniques, but the best oral hygiene in the world doesn't always prevent decay or even worse. All people deserve access to dental services.

After the waiver dental services were cut, I consulted with Dr. John Fales, a dentist in Olathe who provides services to a significant number of adults with special health care needs. He reported that people with disabilities are the most drastically affected by the recent cuts in Medicaid coverage in Kansas. The following is just one example of how one of his patients named Joe could be impacted by the HCBS dental cut.

Joe's total 2009 treatment cost was \$1805. Because the treatment was performed in 2009, the total Medicaid payment was \$454.50 with a write-off of \$969.50. Joe's total cost was \$381.00. With no Medicaid reimbursement for adults with disabilities, in 2010 Joe's treatment cost would be the entire \$1805. This means he would probably go without the treatment in this year.

People who are on the HCBS waivers are not able to absorb the costs of dental care because they had to meet the Medicaid income eligibility guidelines to qualify for the waiver. Dr. Fales' conversations with group homes have indicated that people on the waivers could not afford dental care AT ALL if he did not write off nearly half of the cost. He has concerns that the group homes will have to reduce the frequency of preventive care visits (as historically he found to be true before Medicaid coverage).

Joni is another person who will be affected by the cut in dental services. For many years she was a school teacher. Now she has multiple sclerosis and diabetes. Her dental problems are severe, but with treatment from her dentist, Dr. John Fasbinder, in 2009 she was starting to make progress. She was feeling so encouraged and starting to smile again. She used to take such pride in her teeth. With the program cuts, she can only have these decayed teeth removed in an emergency. In 2009 she could have fillings in her decayed teeth, but now her dental disease will only progress unless her teeth are removed.

Without regular evaluations and proper treatment, dental infections grow and spread. Such infections can be life threatening by the time they are recognized, leading to emergency room visits and lengthy hospital stays, as well as high morbidity and mortality.

Dr. Fales said to me, "I know I don't have to tell you that research indicates that lack of access to dental services is detrimental to the physical health of these individuals. We already fight for routine daily oral hygiene for these folks and it appears almost impossible to get this done. I wonder what will happen when dental care gets pushed even further to the back burner; when there will be no funds available for its completion."

Last July the Michigan Medicaid program stopped providing dental services for adults as a cost-cutting measure. According to the Northwest Michigan Health Department, a woman died in October from a dental infection that was left untreated because she lost her oral health coverage when the Adult Dental Medicaid benefit was eliminated. She had disabilities which required her to be hospitalized to remove her infected teeth. Her surgery was not scheduled before Michigan cut its Adult Dental Medicaid coverage. Dentists planned to donate their services for the surgery, but Medicaid could not pay \$5,000 for hospital costs. As a result, she died.

The Medicaid cuts in Kansas have been in place for almost two months, so we are beginning to hear awful stories about the impact on people with disabilities. As time goes on, we will have stories to tell about Kansans that are as tragic as the Michigan woman's story. Oral Health Kansas and our supporters urge you to appropriate the money necessary to restore the dental services as quickly as possible.

I appreciate your time, and I am happy to stand for any questions.