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**House Social Services Budget Committee  
February 12, 2024**

Chairman Mason and members of the Committee,

My name is Dr. MaryAnne Lynch Small, a dentist by training and the Medicaid Projects Manager at Oral Health Kansas, Inc. We are the statewide advocacy organization dedicated to promoting the importance of lifelong dental health by shaping policy and educating the public.

Dental care under sedation is not considered first line treatment, however, for certain individuals it offers the only route to dental health and maintenance. This need is substantially more prevalent among people with disabilities. In Kansas, the need for sedation dental care is high, with reports of waiting lists as long as almost a year to access this essential and potentially lifesaving healthcare.

At Oral Health Kansas, individuals, families, and caregivers seeking help finding sedation dental care is among our most frequent requests. Our Lived Experience Advisory Group, a collective of individuals with disabilities and their family members, have first-hand experience attempting to access Medicaid sedation dental services. They report at times having to forgo care due to a lack of available services, thus putting the life, health, and well-being of vulnerable Kansans at risk. If families find such care, reports of lengthy wait times and travelling more than 3 hours each way are not outside the norm. The challenge experienced by Kansans is even echoed by Medicaid Managed Care Organizations' Care Coordinators who are increasingly turning to us in an attempt to locate care for their members.

In response to this prominent need, we created The Sedation Dental Care Task Force in 2022. It is an Oral Health Kansas led multisectoral team dedicated to addressing barriers faced by Kansans trying to access sedation dental care. We have discovered this is a persistent and complex issue. Barriers to care identified include:

- Lack of up-to-date service availability- The Sedation Dental Care Task Force identified that there is no reliable list of sedation dental care providers in the state. This has resulted in excessive strain on people who require sedation services and their caregivers to find such care, often with inadequate guidance. When families are given dozens of phone numbers of potential providers to contact, they are given false hope that they can find care easily, but this is not the case. Similarly, care coordinators and dental offices struggle to make appropriate referrals for their members/patients. Statewide knowledge of current sedation providers, including geographical location, sedation types offered, populations served, and insurances accepted, would facilitate targeted work to improve sedation care access in service shortage areas and allow for appropriate care coordination and referral by individual need. We were grateful for the inclusion of the requirement to maintain a list of sedation dental providers in the KanCare RFP, and we are currently working with the existing MCOs to create such a comprehensive sedation provider list.

- Lack of sedation dental needs assessment- Understanding the scope of the need for sedation dental care across the state is critical to make both effective and efficient changes to improve care availability for Kansans. Sedation requirements for individuals may change over time, particularly as an individual becomes acclimated to their dental home. At present, there is no reporting on the sedation dental needs of Kansans.
- Sedation comes in varying types, and the best form of sedation is dependent on patient need, patient overall health, and dental treatment required. The in-office sedation element is frequently provided by a third party certified registered nurse anesthetist (CRNA). At present, our understanding is that the Kansas Medicaid reimbursement rates for CRNAs providing sedation for dental procedures is \$6/minute. CRNAs describe this as an inadequate reimbursement to appropriately serve those requiring sedation, particularly individuals with disabilities who frequently have complex healthcare needs. Such cases require significant pre-operative and post-operative work, adding to the time, staffing, and equipment burden placed on the CRNA. We are in the process of examining CRNA concerns about the adequacy of the reimbursement rate.
- In-hospital sedation is required for some individuals. This is typically due to complex medical needs. Hospitals have found it difficult to schedule operating room time for this procedure, so we were grateful for the Medicaid program implementing a policy change last fall to cover the G0330 code which pays the hospital and ambulatory care center a facility fee of \$1722 for dental procedures. We are currently working to communicate this change across relevant healthcare centers in Kansas.

We wanted to bring this to the Committee's attention because it is a growing concern in the community. We may come back to the Committee with a request for additional study or a budget request to address rates paid for sedation dental care. Thank you for the opportunity to share this update. I am happy to answer any questions.

Sincerely,

MaryAnne Lynch Small, BDS, MPH  
Medicaid Projects Manager  
[mlynchsmall@oralhealthkansas.org](mailto:mlynchsmall@oralhealthkansas.org)