

DAVID Y. IGE
GOVERNOR



PANKAJ BHANOT
DIRECTOR

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DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
P. O. Box 339
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February 2, 2020

TO: The Honorable Senator Russell E. Ruderman, Chair
Senate Committee on Human Services

The Honorable Senator Rosalyn H. Baker, Chair
Senate Committee on Consumer Protection, Commerce and Health

FROM: Pankaj Bhanot, Director

SUBJECT: **SB 2459 – RELATING TO MEDICAID BENEFITS**

Hearing: Wednesday, February 5, 2020 2:45 p.m.
Conference Room 016, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the intent of this measure, and offers comments. We respectfully request that the passage does not replace or adversely impact the Governor's budget priorities.

PURPOSE: The purpose of the bill is to appropriate funds to DHS to restore diagnostic, preventive, and restorative adult dental benefits to adult Medicaid enrollees.

DHS appreciates and supports the restoration of a basic oral health benefit for adult Medicaid and QUEST Integration recipients. The current limited benefit of emergency-only coverage does not support the goals of whole person care. Additionally the inability of recipients to access preventive oral health care can have a negative impact on a person's health, especially for individuals with chronic diseases, pregnant women and the health of their newborns.

The bill appropriates \$7,000,000 general funds to restore diagnostic, preventive and restorative dental benefits for adult beneficiaries. In prior legislative sessions, DHS estimated that to provide the benefit, it would require \$17,000,000 in general funds and about

\$25,500,000 in federal funds for a total of \$42,500,000 would be needed to fully restore benefits. The \$7,000,000 would be insufficient for full restoration. However, it may be possible to restore a limited set of dental benefits. We are currently researching options to design various coverage options. However, we have not completed our analyses at this time to be able to provide any updated estimates of utilization or costs.

We respectfully request that any appropriation not supplant funding priorities identified in the Executive Budget.

Thank you for the opportunity to provide comments on this measure.



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THE SENATE
Committee on Human Services
Committee on Commerce, Consumer Protection and Health
Wednesday, February 5, 2020
2:45 p.m.
Conference Room 016

To: Senator Russell Ruderman, Chair
Senator Rosalyn Baker, Chair

Re: S.B. 2459 Relating to Medicaid Benefits

Dear Chair Russell Ruderman, Chair Rosalyn Baker, and Members of the Committees,

My name is Keali'i Lopez and I am the State Director for AARP Hawai'i. AARP is a membership organization of people age fifty and over, with nearly 145,000 members in Hawai'i. AARP advocates for issues that matter to Hawai'i families, including the high cost of long-term care; access to affordable, quality health care for all generations; and serving as a reliable information source on issues critical to people over the age of fifty.

S.B. 2459 appropriates funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees, provided that the Department of Human Services shall obtain the maximum federal matching funds available for this expenditure.

AARP strongly supports S.B. 2459.

According to an issue paper on improving dental coverage for older adults, (Henry J. Kaiser Family Foundation, September 2019), nearly two-thirds of the Medicare population (37 million beneficiaries 65 years and older) have no dental coverage at all. This includes older adults of all incomes. Cost concerns and lack of dental coverage contribute to many older adults foregoing routine and other dental procedures. Inadequate dental care can exacerbate chronic medical conditions such as diabetes and heart conditions, and lead to preventable complications that sometimes result in costly emergency room visits. A recent study identified \$2.7 billion in dental-related hospital emergency department visits in the U.S. over a three-year period. (Center for Health Care Strategies, Inc.: Fact Sheet, September 2019) The study further states that low-income adults suffer a disproportionate share of dental disease. Adults who are disabled, homebound, or institutionalized have an even greater risk of dental diseases. Many of them would be Medicaid recipients.

Broadening the dental benefit to the adult Medicaid enrollee will greatly improve their overall health and reduce the risk for costly medical care and emergency room visits.

Thank you for the opportunity to testify in support of S.B. 2459.

AARP
Real Possibilities



Hawaii Dental Association

To: Senate Committees on Human Services and
Commerce, Consumer Protection & Health

Time/Date: 2:45 p.m., February 5, 2020

Location: State Capitol Room 016

Re: SB 2459, Relating to Medicaid Benefits

Aloha Chairs Ruderman and Baker, Vice-Chairs Rhoads and Chang and members of the Committees:

The Hawaii Dental Association (HDA), a professional association comprised of approximately 950-member dentists, is in **strong support** of SB 2459, relating to Medicaid benefits. This bill makes an appropriation to restore certain adult dental benefits to Medicaid enrollees and requires maximization of federal matching funds.

HDA is a statewide membership organization representing dentists practicing in Hawaii and licensed by the State of Hawaii's Board of Dentistry. HDA members are committed to protecting the oral health and well-being of the people of Hawaii, from keiki to kupuna and everyone in between.

Mahalo for the opportunity to testify in support of SB 2459.



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College of Tropical Agriculture
and Human Resources

Garret Sugai
Kaiser Permanente

Catherine Taschner, JD
McCorriston Miller Mukai
MacKinnon LLP

Date: February 3, 2020

To: Senator Russell E. Ruderman, Chair
Senator Karl Rhoads, Vice Chair
Members of the Human Services Committee

Senator Rosalyn H. Baker, Chair
Senator Stanley Chang, Vice Chair
Members of the Commerce, Consumer Protection, and Health
Committee

Re: Strong Support SB2459, Relating to Medicaid Benefits

Hrg: February 5, 2020 at 2:45 PM at Conference Room 016

The Hawai'i Public Health Instituteⁱ is in **Strong support of SB2459** which makes an appropriation to restore certain adult dental benefits to Medicaid enrollees.

SB2459 appropriates funds to the DHS to restore basic diagnostic, preventive, and restorative adult dental benefits to adult Medicaid enrollees. In a survey conducted by Ward Research for HIPHIⁱⁱ, 9 in 10 registered Hawaii voters (89%) strongly agreed that preventative dental benefits should be included in adult Medicaid coverage.

Oral health in our state is a public health crisis, with Hawaii receiving a failing grade of "F" in three recent oral health report cards released by The Pew Center for the States. Unfortunately, drastic cuts in 2009 eliminated comprehensive benefits for Medicaid enrollees and reduced coverage to emergency only (extraction and pain management). Hawai'i has suffered the consequences:

- In FY 2017, for the 234,258 adults who had emergency-only dental coverage, only 17,889 (8%) of them received ANY dental services for the year.

- In 2016, there were more than 3,000 emergency room visits due to preventable dental problems, 67% more than in 2006. As a result, aggregate hospital charges for dental emergency visits were just over \$17,000,000 compared to \$4,000,000 in 2006. Over half of all dental ER visits were residents on Neighbor Islands and 66% were Medicaid beneficiaries.
- An estimated 79% of ER dental visits could be diverted to community settings, saving about 48% of the cost of each visit.
- Significant disparities exist State-wide with rural and low-income families experiencing higher ER utilization rates for dental issues. For example, overall population rates of ER utilization for oral health in 2016 were 82.2 per 10,000 in the Kau primary service care area compared to 5.0 per 10,000 in the Mililani primary care service area.

Oral health is a crucial part of overall physical, psychological, social, and economic wellbeing. Adults with poor oral health often struggle to manage chronic co-conditions such as diabetes. Researchers have linked poor oral health with cardiovascular disease, stroke and bacterial pneumonia. Pregnant women with poor oral health are at an increased risk of delivering preterm and/or low-birth-weight infants. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

The Hawai'i Public Health Institute defers to the State Department of Human Services on the cost estimates to restore basic adult dental benefits. As a part of our commitment to improve oral health in Hawaii, we believe that basic coverage of dental services for adults is a critical factor in ensuring access to appropriate and timely oral health care.

Thank you for the opportunity to testify. We strongly support SB2459 and respectfully ask you to pass this measure as is out of committee.

Mahalo,



Nicole Nakashima, D.D.S., M.P.H.
Oral Health and Policy Coordinator

i The Hawai'i Public Health Institute is a hub for building healthy communities, providing issue-based advocacy, education, and technical assistance through partnerships with government, academia, foundations, business, and community-based organizations.

ii Findings from a Ward Research Study commissioned by the Hawaii Public Health Institute that summarizes findings from a phone survey among n=812 registered Hawaii voters (maximum sampling error of +/-3.3%) conducted between November 5 to 8, 2018. A copy of the results are available upon request.



To: The Honorable Russell E. Ruderman, Chair
The Honorable Karl Rhoads, Vice Chair
Members, Committee on Human Services

The Honorable Rosalyn H. Baker, Chair
The Honorable Stanley Chang, Vice Chair
Members, Committee on Commerce, Consumer Protection, and Health

From: Rowena Buffett Timms, Executive Vice President & Chief Administrative Officer, The Queen's Health Systems
Colette Masunaga, Manager, Government Relations & External Affairs, The Queen's Health Systems

Date: February 4, 2020

Hrg: Senate Committee on Human Services and Committee on Commerce, Consumer Protection, and Health Joint Hearing; Wednesday, February 5, 2020 at 2:45PM in room 016

Re: **Support for SB 2459, Relating to Medicaid Benefits**

The Queen's Health Systems (Queen's) is a not-for-profit corporation that provides expanded health care capabilities to the people of Hawai'i and the Pacific Basin. Since the founding of the first Queen's hospital in 1859 by Queen Emma and King Kamehameha IV, it has been our mission to provide quality health care services in perpetuity for Native Hawaiians and all of the people of Hawai'i. Over the years, the organization has grown to four hospitals, 66 health care centers and labs, and more than 1,600 physicians statewide. As the preeminent health care system in Hawai'i, Queen's strives to provide superior patient care that is constantly advancing through education and research.

Queen's appreciates the opportunity to provide testimony in support of SB 2459, relating to Medicaid benefits. The proposed bill would appropriate funds to restore diagnostic, preventative, and restorative dental benefits to adult Medicaid enrollees. The Queen's Medical Center Dental Clinic is home to Hawaii's only accredited hospital-based General Practice Residency Program and provides comprehensive dental services to meet the needs of our community.

The Dental Clinic served over 5,000 patients in FY2017 and nearly 6,000 in FY2018. Since FY2014, on average half of all patients served at the Dental Clinic are under Medicaid, uninsured or self-pay.

Queen's is committed to providing quality care to Native Hawaiians and all the people of Hawaii, regardless of their ability to pay, and we support restoring adult dental benefits to Medicaid enrollees. Thank you for your time and attention to this important issue.

The mission of The Queen's Health Systems is to fulfill the intent of Queen Emma and King Kamehameha IV to provide in perpetuity quality health care services to improve the well-being of Native Hawaiians and all of the people of Hawai'i.



**Testimony to the Senate Joint Committee on Commerce, Consumer Protection, and
Health, and Human Services
Wednesday, February 5, 2020; 2:45 p.m.
State Capitol, Conference Room 016**

RE: SENATE BILL NO. 22459, RELATING TO MEDICAID BENEFITS.

Chair Baker, Chair Ruderman, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA offers the following **COMMENTS** on Senate Bill No. 2459, RELATING TO MEDICAID BENEFITS.

The bill, as received by your Committee, would appropriate \$7,000,000, in general funds for fiscal year 2020-2021, to restore diagnostic, preventative, and restorative dental benefits to adult Medicaid enrollees, provided that the Department of Human Services (DHS) obtain the maximum federal matching funds available for this expenditure.

We note that the funds appropriated in this bill would be in addition to the funds that would be authorized for the Medicaid Program, as found in the Administration's Budget [**See**, Program ID No. HMS401, page 89, House Bill No. 2200, Regular Session of 2020].

Testimony on Senate Bill No. 2459
Wednesday, February 5, 2020; 2:45 p.m.
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Specifically, the Administration proposed no adjustments in the Supplemental Budget to HMS401 for the appropriations previously authorized for this Program Id pursuant to Act 5, Session Laws of Hawaii 2019, to wit:

<u>Means of Financing</u>	<u>Fiscal Year 2019-2020</u>	<u>Fiscal Year 2020-2021</u>
A (General Funds)	\$927,597,598	\$982,477,598
B (Special Funds)	\$1,376,660	\$1,376,660
N (Federal Funds)	\$1,803,909,546	\$1,803,909,546
P (Other Federal Funds)	\$13,216,034	\$13,216,034
U (Interdepartmental Transfers)	\$6,781,921	\$6,781,921

By way of background, the HPCA represents Hawaii Federally-Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

As a private, non-profit organization advocating on behalf of Hawaii's underprivileged, the HPCA does not have access to any financial documents or data other than what is available to the general public. Besides the Administration's Budget, and the Budget-in-Brief, another public source of data is the Variance Report. This document compares the amount appropriated with the amount expended in the most recent completed fiscal year.

Upon our review of this document, it has come to our attention that DHS reported a variance of 28% for fiscal year 2018-2019. Of the \$2,769,393,000 appropriated in all means of financing, DHS expended only \$1,992,986,000. In other words, DHS could have spent \$776,407,000 for Hawaii's Medicaid Program, but didn't.

Testimony on Senate Bill No. 2459
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STATE OF HAWAII		VARIANCE REPORT								REPORT V61		
PROGRAM TITLE: HEALTH CARE PAYMENTS										12/6/19		
PROGRAM ID: HMS-401												
PROGRAM STRUCTURE NO: 06020305												
	FISCAL YEAR 2018-19				THREE MONTHS ENDED 09-30-19				NINE MONTHS ENDING 06-30-20			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS												
EXPENDITURES (\$1000's)												
TOTAL COSTS												
POSITIONS												
EXPENDITURES (\$1000's)												
	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
	2,769,393	1,992,986	- 776,407	28	233,939	190,900	- 43,039	18	2,518,943	2,561,982	+ 43,039	2
	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
	2,769,393	1,992,986	- 776,407	28	233,939	190,900	- 43,039	18	2,518,943	2,561,982	+ 43,039	2
PART II: MEASURES OF EFFECTIVENESS												
1. % MANAGD CARE PYMTS DEVOTD TO DIRECT HTH CARE SVCS												
2. % LTC CLIENTS RECEIVING CARE UNDER HCBS PROGRAM												
PART III: PROGRAM TARGET GROUP												
1. # PEOPLE COVERED BY QUEST												
2. # ELIGIBLE PERSONS FOR QUEST MANAGED CARE PRGRM												
3. # ELIGIBLE PERSONS FOR LTSS												
PART IV: PROGRAM ACTIVITY												
1. AMOUNT PAID FOR QUALITY BONUSES TO MCOS (THOUS)												
2. AMOUNT PAID TO MCOS FOR SERVICES (THOUS)												
	7000	4405	- 2595	37	11110	8000	- 3110	28	2222000	2600000	+ 378000	17
	2200000	2094690	- 105340	5								

[Except from The Variance Report for Fiscal Years 2019 & 2020, page 416.]

This is similar to the variance reported in the previous year. As we testified last year, of the \$2,633,657,000 appropriated in all means of financing for fiscal year 2017-2018, DHS expended only \$2,068,8978,000 for the Medicaid Program. In other words, DHS could have spent an additional \$564,760,000 for Medicaid, but didn't.

Testimony on Senate Bill No. 2459
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STATE OF HAWAII
 PROGRAM TITLE: HEALTH CARE PAYMENTS
 PROGRAM ID: HMS-401
 PROGRAM STRUCTURE NO: 06020305

VARIANCE REPORT

REPORT V61
12/10/18

	FISCAL YEAR 2017-18				THREE MONTHS ENDED 09-30-18				NINE MONTHS ENDING 06-30-19			
	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ACTUAL	± CHANGE	%	BUDGETED	ESTIMATED	± CHANGE	%
PART I: EXPENDITURES & POSITIONS												
RESEARCH & DEVELOPMENT COSTS												
POSITIONS												
EXPENDITURES (\$1,000's)												
OPERATING COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	2,633,657	2,068,897	- 564,760	21	236,027	193,091	- 42,936	18	2,533,366	2,576,302	+ 42,936	2
TOTAL COSTS												
POSITIONS	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0	0.00	0.00	+ 0.00	0
EXPENDITURES (\$1000's)	2,633,657	2,068,897	- 564,760	21	236,027	193,091	- 42,936	18	2,533,366	2,576,302	+ 42,936	2
FISCAL YEAR 2017-18												
FISCAL YEAR 2018-19												
PART II: MEASURES OF EFFECTIVENESS												
	PLANNED	ACTUAL	± CHANGE	%	PLANNED	ESTIMATED	± CHANGE	%				
1. % MANAGD CARE PYMNTS DEVOTD TO DIRECT HTH CARE	90	90	+ 0	0	90	90	+ 0	0				
2. % MANAGED CARE CLIENTS SATISFIED WITH THE PROGRAM	62	66	+ 4	6	64	66	+ 2	3				
3. # MANAGED CARE CLIENTS AS % OF TOTAL CLIENTS	99	99	+ 0	0	99	99	+ 0	0				
4. % LTC CLIENTS RCVNG CARE UNDR HME/COM PRG	70	76	+ 6	9	71	76	+ 5	7				
PART III: PROGRAM TARGET GROUP												
1. # ELIGIBLE AGED, BLIND & DISABLED PERSONS	50000	51114	+ 1114	2	50000	51000	+ 1000	2				
2. # ELIGIBLE PERSONS FOR QUEST MANAGED CARE PRGRM	320000	353000	+ 33000	10	325000	360000	+ 35000	11				
3. # ELIGIBLE PERSONS FOR HME/COM BASED PROGRAM	4500	4487	- 13	0	4550	4500	- 50	1				
PART IV: PROGRAM ACTIVITY												
1. NUMBER OF PAID CLAIMS TO PROVIDERS	1500000	1572896	+ 72896	5	1500000	1550000	+ 50000	3				
2. # PARTICIPATING PROVIDERS WITHIN THE PROGRAMS	7000	13400	+ 6400	91	7000	13400	+ 6400	91				
3. # CHILDREN IMMUNIZED BY THE AGE OF TWO	2500	4158	+ 1658	66	2500	4200	+ 1700	68				
4. # CHILDRN RCVNG EARLY/PERIODC SCREENG/DIAG/TRTM SVC	81305	83278	+ 1973	2	82900	83000	+ 100	0				

[Excerpt from The Variance Report for Fiscal Year 2018-2019, page 438.]

These two years appear to be anomalies. Looking back at the Variance Reports to 2011, the variances reported for HMS401 were as follows:

<u>Fiscal Year</u>	<u>Budgeted (in Thousands)</u>	<u>Actual (In Thousands)</u>	<u>Change (In Thousands)</u>	<u>Percentage of Budgeted Amount Unspent</u>
FY2018-2019	\$2,769,393	\$1,992,986	\$776,407	28%
FY2017-2018	\$2,633,657	\$2,068,897	\$564,760	21%
FY2016-2017	\$2,499,388	\$2,419,670	\$79,718	3%
FY2015-2016	\$2,250,936	\$2,149,974	\$100,962	4%
FY2014-2015	\$2,009,623	\$2,051,771	-\$42,148	-2%
FY2013-2014	\$1,888,241	\$1,913,755	-\$25,514	-1%
FY2012-2013	\$1,692,643	\$1,627,787	\$64,856	4%
FY2011-2012	\$1,645,461	\$1,588,011	\$57,450	3%
FY2010-2011	\$1,387,615	\$1,612,035	-\$224,420	-16%

Historically, since the last significant change in the Medicaid population in fiscal year 2010-2011 because of the implementation of the Affordable Care Act, the variance in HMS401 had ranged from (-2%) in fiscal year 2014-2015, to a (+3%) in fiscal years 2011-2012 and 2016-2017.

During the public hearing on House Concurrent Resolution No. 145, before the Joint House Committee on Human Services and Homelessness and Health on March 12, 2019, DHS testified that of the \$564,760,000 that was unspent, only approximately \$13 million was general funds. If this was true, then the unspent general funds would have made up only 2.3% of the total variance.

Because general funds make up approximately one-third of all appropriations in HMS401, the amount of general funds unspent should have been \$188,253,333 if general funds and federal funds were expended concurrently at equal rates.

Generally speaking, the federal government requires the State to pay up front the total costs and then seek reimbursement for the federal funds that were applicable. If general funds were used for this purpose to pay the total costs, when the State receives reimbursement for the general funds used to front the federal funds, how were these funds designated? Are they automatically redeposited into the general fund? Are they given back to DHS and re-designated as general funds?

Testimony on Senate Bill No. 2459

Wednesday, February 5, 2020; 2:45 p.m.

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More importantly, Is there an accounting of the federal funds reimbursed for these transactions? If you agree with DHS's explanation -- that nearly all of the almost \$1 billion in general funds appropriated for Medicaid was expended when there was "low utilization" -- what would have happened if utilization was normal for that year? Would DHS have come in for an emergency appropriation of general funds to cover a shortfall?

In 2018, a situation occurred that might shed some light on this. Citing a shortfall in the federal budget for the Medicaid Program (HMS401), the Governor submitted an emergency appropriation request of \$9,300,000 in general funds for fiscal year 2017-2018. [See, House Bill No. 2367, Regular Session of 2018.]. However, shortly after the bill introduction deadline, the Governor announced that the emergency appropriation request was rescinded because Congress reached a deal to extend federal funding for another six years. [See, Honolulu Star Advertiser, "State funding request pulled after Congress extends insurance program., January 28, 2018.]

What's interesting about this development was that no subsequent amendment was made for general funds by the Legislature for fiscal year 2017-2018 nor were any changes made to the Governor's funding request for HMS401 for the subsequent fiscal year.

So how did DHS cover the budget shortfall? We think DHS used reimbursements received from the federal government to supplant general funds but because we are a private, non-profit organization, we have no way of confirming whether this indeed occurred.

If this is true, given the large variances over the previous two completed fiscal years, we wonder how much funding is truly available to DHS for use in the Medicaid Program?

Over the past eight years, HPCA has advocated for the reinstatement of preventative and restorative dental benefits for adult Medicaid recipients. Since 2018, we clarified our position in light of these questions on the availability of funds for the Medicaid Program. Based on the above, it is our position that there are sufficient funds within HMS401 to reinstate this essential benefit immediately.

It should also be noted that because the Medicaid Program is established through an agreement between the federal and State governments, and that Hawaii's participation in the program is voluntary, funding for the Medicaid Program is non-discretionary. When the dental benefit for adult Medicaid recipients was taken away, no statutory amendment was needed under State law. The Legislature merely appropriated less funds than what was requested by DHS for HMS401. With the reduced funds, DHS administratively restricted payments to only those benefits that were required under the State Medicaid Plan (Plan). Because adult dental was an optional coverage under the Plan, DHS administratively ceased reimbursement for those services.

In light of this, it is questionable whether the Legislature is the appropriate forum to urge the reinstatement of this benefit. Ultimately, this is a decision to be made by the Executive Branch. The Executive Branch would decide from a policy standpoint whether this benefit should be reinstated. The Governor would then prepare a budget and submit it to the Legislature. It would then be up to the Legislature to decide whether or not to approve the request.

Should the Legislature chose to not fund the Executive's full request, then it would be up to the Executive to meet the requirements of the Plan with the funds that are available.

Considering that DHS reported variances of over \$500 million and \$700 million over the past two previously completed fiscal years, even if the Legislature chose not to increase the statutory authority to spend (i.e., the amount of funding within HMS401 in the State Budget), it would appear that there would still be sufficient resources available to reinstate the benefit immediately.

Of course the Legislature could greatly reduce funding for HMS401 by these amounts, but to do so would apparently risk whether the State could adequately meet the requirements of the Plan and be in compliance with federal law. And since participation in Medicaid is voluntary, the federal government could cease their participation if the State is in non-compliance and let the State to fend for itself.

Because the HPCA is a private, non-profit organization, we do not have access to documents that could confirm or refute our observations. However, the Legislature, and more specifically, the Senate Committee on Ways and Means, and the House Committee on Finance have the statutory authority to compel any State agency to produce any and all documentation relating to their budget and expenditures. An accounting of the federal reimbursements for Medicaid payments received during these fiscal years and the disposition thereof would greatly clarify whether DHS indeed has sufficient resources to reinstate this benefit immediately.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiiipca.net.



Testimony in Support of RE: SB2459

February 4, 2020

Dear Chair Ruderman, Chair Baker and Respected Members of the Committee on Human Services and the Committee on Commerce, Consumer Protection and Health:

The Hawaii Dental Hygienists' Association (HDHA) strongly **SUPPORTS SB2459**. The bill appropriates funds to the Department of Human Services to restore basic adult dental benefits to Medicaid and QUEST enrollees. We congratulate you on your initiative to expand Medicaid dental services for adults to include preventive, diagnostic and restorative treatment services. This provision would directly benefit seniors, as well as adults with developmental and physical disabilities in providing necessary oral health services.

HDHA cannot emphasize enough the importance of dental care services that include preventive, restorative, prosthetic, and emergency services for all residents of Hawaii. We are keenly aware of how oral health, or the lack thereof, can affect all aspects (physical, emotional, psychological, and social) of our lives. It is also common knowledge that oral health has a direct correlation to over-all health. The mouth is connected to and shares a circulatory system with the rest of the body. Ignoring or limiting oral care services places Hawaii residents at risk for increased health problems.

As the largest association representing Hawaii's licensed dental hygienists', HDHA strongly **SUPPORTS SB2459** to address the unnecessary effects of dental disease among Hawaii's people, as well as the phenomenal expense of dental care in emergency room settings. We hope Hawaii's expanding workforce of Dental Hygienists' can and will be utilized to the fullest to treat this underserved population once this measure is passed.

Thank you for your consideration.



February 4, 2020

**Testimony in Support of SB 2459
MAKING AN APPROPRIATION TO RESTORE CERTAIN
ADULT DENTAL BENEFITS TO MEDICAID ENROLLEES**

The Hawaii State Rural Health Association (HSRHA) respectfully submits written testimony in strong support of SB2459.

As a non-profit rural health association, our mission is to advocate for access to comprehensive healthcare that includes dental health, primary care and behavioral health, as an integral part of a person's overall health and wellness. Quite often, our neighbor island rural communities struggle to obtain equitable access to timely dental care.

Adults with dental disease often face challenges that impair their productivity and well-being. They suffer in pain and may have to take time off from work because they have a toothache or other serious oral health issues. Left untreated, tooth decay and gum disease are linked to serious health problems, including premature births in pregnant women and chronic conditions like heart disease, diabetes, and stroke.

The Hawaii State Rural Health Association's Board of Directors strongly supports this bill to restore adult dental benefits to Medicaid enrollees as a crucial first step to improve oral health amongst our most vulnerable populations. Improving access to dental care, in addition to investing in oral health prevention pays off in the long term. All residents in Hawaii should be able to receive culturally appropriate and timely healthcare where they reside.

**Hawaii State Rural Health Association
4442 Hardy Street, Suite 205
Lihue, HI 96766**

email: hsrhacoordinator@gmail.com

website: hawaiistateruralhealth.org

Established in 1994, the Hawaii State Rural Health Association (HSRHA) is a 501(C) 3 non-profit organization dedicated to addressing rural health needs across our island state.

~ Working Together To Promote Healthy Rural Communities ~

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Twitter @HawaiiRural



949 Kamokila Boulevard, 3rd Floor, Suite 350, Kapolei, HI 96707
808.675.7300 | www.ohanahealthplan.com

February 5, 2020
2:45 p.m.
Conference Room 016

To: The Honorable Chair Russell E. Ruderman
The Honorable Vice Chair Karl Rhoads
Senate Committee on Human Services

The Honorable Chair Rosalyn H. Baker
The Honorable Vice Chair Stanley Chang
Senate Committee on Commerce, Consumer Protection, and Health

From: 'Ohana Health Plan
Rachel Wilkinson, Government Affairs Sr. Manager

Re: SB 2459, Relating to Medicaid Benefits; **In Support**

'Ohana Health Plan offers our **support** of SB 2459, which makes an appropriation to restore certain adult dental benefits to Medicaid enrollees, and requires maximization of federal matching funds.

Poor oral health is one of the most important issues facing our state, particularly with the Medicaid population. While oral health can often be overlooked, there is a clear relationship between preventative dental care and the deterrence of serious medical conditions.

Since January 2019, 'Ohana Health Plan has offered—at no cost to our members—basic dental coverage, providing adults who have QUEST Integration coverage with an annual exam, fluoride treatment, a cleaning every six months, one set of bitewing x-rays per year, and either a non-emergent tooth extraction or filling. By absorbing these costs, 'Ohana Health Plan has invested in the health and overall well-being of our members. We believe maintaining a healthy community means doing the right thing by providing quality dental care to those who need it the most.

According to the Hawaii Department of Health's 2012 *Hawaii Oral Health: Key Findings* report, there were more than 3,000 emergency room visits in Hawaii for preventable dental problems, resulting in \$8.5 million in hospital charges. Studies have shown links between gum disease and higher risks of heart attack, stroke, diabetes and rheumatoid

arthritis. Oral health diseases have also been shown to cause low-birth rates and pre-term births for pregnant women.

The state's investment to restore diagnostic, preventive and restorative dental benefits to adult Medicaid enrollees would be relatively small in comparison to the downstream cost savings to the entire healthcare system.

We strongly urge the passage of SB 2459. Thank you for the opportunity to submit testimony on this measure.

SB-2459

Submitted on: 1/31/2020 5:32:25 PM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Louis Erteschik	Testifying for Hawaii Disability Rights Center	Support	Yes

Comments:

Responsible parents teach their children to brush their teeth so that they won't get cavities or have other oral health issues. Yet, we have a government policy which says that we will not pay to have your teeth cleaned or your cavities filled - however, if your teeth are rotting and about to fall out then we will pay to have it extracted. That seems completely contrary to common sense; basic health principles, and how most of us try to act in our own lives. It is hard to believe that we have allowed that to continue as our policy for so many years and we really hope the Legislature and the Department of Human Services will finally change that.



STATE OF HAWAII
STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
1010 RICHARDS STREET, Room 122
HONOLULU, HAWAII 96813
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543

February 5, 2020

The Honorable Senator Russell E. Ruderman, Chair
Senate Committee on Human Services
and
The Honorable Senator Rosalyn H. Baker, Chair
Senate Committee on Commerce, Consumer Protection, and Health
Thirtieth Legislature
State Capitol
State of Hawai'i
Honolulu, Hawai'i 96813

Dear Senator Ruderman, Senator Baker, and Members of the Committees:

SUBJECT: SB 2459 – Relating to Medicaid Benefits

The State Council on Developmental Disabilities (DD) **SUPPORTS SB 2459**. The bill makes an appropriation to restore certain adult dental benefits to Medicaid enrollees.

The Council cannot emphasize enough the importance of dental care services that include preventive, restorative, prosthetic, and emergency services for people with DD. We are all aware of how oral health, or the lack thereof, affects all aspects (emotional, psychological, and social) of our lives. Numerous individuals can share with you their experience of having a tooth or teeth extracted or acquiring serious health problems because necessary dental services were not available because of the termination of the Medicaid adult dental benefit coverage in 1996. Compounding the challenges is the limited number of dentists on the Neighbor Islands who are available and willing to serve Medicaid and QUEST integration enrollees

Thank you for the opportunity to submit testimony in **support of SB 2459**

Sincerely,

Daintry Bartoldus
Executive Administrator



HAWAII APPLESEED

CENTER FOR LAW & ECONOMIC JUSTICE

Testimony of the Hawai'i Appleseed Center for Law & Economic Justice
In Support of SB 2459 – Relating to Medicaid Benefits
Senate Committees on Human Services and on Commerce, Consumer Protection, and Health
Wednesday, February 5, 2020, 2:45 PM, in conference room 016

Dear Chairs Ruderman and Baker, Vice Chairs Rhoads and Chang, and members of the Committees:

Thank you for the opportunity to provide testimony in **SUPPORT of SB 2459**, which would appropriate funds to restore certain adult dental benefits to Medicaid enrollees.

We echo the legislature's finding that, "Lack of access to dental coverage and oral healthcare is a health and social justice issue that disproportionately affects the poor, children, the elderly, and racial and ethnic minority groups... Individuals enrolled in Medicaid have an increased likelihood of disparities in health care outcomes based on income. The prevalence of dental disease and tooth loss is disproportionately high among low-income populations. Insufficient coverage or access to care often further disadvantages Medicaid recipients, driving poor health outcomes and higher costs."

An investment of \$7 million, as proposed in this bill, to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees will likely more than pay for itself by reducing costs due to emergency room visits for dental problems, health and birth complications due to poor oral health, and other acute and chronic health conditions that are linked to oral disease.

We appreciate your consideration of this testimony, and we urge you to pass this bill.

The Hawai'i Appleseed Center for Law and Economic Justice is committed to a more socially just Hawai'i, where everyone has genuine opportunities to achieve economic security and fulfill their potential. We change systems that perpetuate inequality and injustice through policy development, advocacy, and coalition building.

Hawai'i Oral Health Coalition

EQUITY - COMMUNITY - PONO - INTEGRITY

increasing access and equity in oral health care
through collaborative partnerships, advocacy, and education

Date: ~~January 29, 2019~~ February 3, 2020

To: The Honorable Senator Russell E. Ruderman
Chair Senate Committee on Human Services

The Honorable Senator Rosalyn H. Baker,
Chair Senate Committee on Commerce, Consumer Protection, and Health

Re: Strong Support for SB2459 Making an Appropriation to Restore Certain Adult
Dental Benefits to Medicaid Enrollees

Hrg: Wednesday, February 5, 2020 at 2:45 PM at Conference Room 016

The Hawai'i Oral Health Coalitionⁱ is in **Strong Support of SB2459** which makes an appropriation to restore certain adult dental benefits to Medicaid enrollees.

SB2459 appropriates funds to the DHS to restore basic diagnostic, preventive, and restorative adult dental benefits to adult Medicaid enrollees. In a survey conducted by Ward Research for HIPHIⁱⁱ, 9 in 10 registered Hawaii voters (89%) strongly agreed that preventative dental benefits should be included in adult Medicaid coverage.

Oral health in our state is a public health crisis, with Hawaii receiving a failing grade of "F" in three recent oral health report cards released by The Pew Center for the States. Unfortunately, drastic cuts in 2009 eliminated comprehensive benefits for Medicaid enrollees and reduced coverage to emergency only (extraction and pain management). Hawai'i has suffered the consequences:

- In FY 2017, for the 234,258 adults who had emergency-only dental coverage, only 17,889 (8%) of them received ANY dental services for the year.
- In 2016, there were more than 3,000 emergency room visits due to preventable dental problems, 67% more than in 2006. As a result, aggregate hospital charges for dental emergency visits were just over \$17,000,000 compared to \$4,000,000 in 2006. Over half of all dental ER visits were residents on Neighbor Islands and 66% were Medicaid beneficiaries.
- An estimated 79% of ER dental visits could be diverted to community settings, saving about 48% of the cost of each visit.
- Significant disparities exist State-wide with rural and low-income families experiencing higher ER utilization rates for dental issues. For example, overall population rates of ER utilization for oral health in 2016 were 82.2 per 10,000 in the Kau primary service care area compared to 5.0 per 10,000 in the Mililani primary care service area.

Oral health is a crucial part of overall physical, psychological, social, and economic wellbeing. Adults with poor oral health often struggle to manage chronic co-conditions such as diabetes. Researchers have linked poor oral health with cardiovascular disease, stroke and bacterial pneumonia. Pregnant women with poor oral health are at an increased risk of delivering preterm and/or low-birth-weight infants. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

The HOHC has been working collaboratively with MedQuest-DHS and the Health Policy Institute of the American Dental Association for the past 8 months to gain a more specific fiscal analysis for Legislative consideration about the costs versus cost-savings in reinstating preventive and restorative dental benefits for adults on Medicaid. We are hopeful that the new analysis will be available via MQD-DHS in February with the fiscal estimates that will respond to Legislator’s 2019 questions about the estimated costs and cost-savings of reinstating these much-needed dental benefits. The federal government does match up to 50% of the state’s investment in reinstating preventative and restorative dental benefits for all adult Medicaid recipients and to date, 34 states do offer limited or comprehensive benefits for its adult Medicaid recipients.

We **strongly support** the restoration of these benefits.

Thank you for the opportunity to provide testimony.

Mahalo,

Nicole Nakashima Anthony S. Kim, DMD, M.P.H.
Hawai'i Oral Health and Policy Coordinator, Hawai'i Public Health Institute Coalition
Chair



i The Hawai'i Oral Health Coalition (HOHC) is community driven/owned and led with fiscal sponsorship from the Hawaii Public Health Institute. Its members represent all Hawai'i islands and diverse sectors across the State. The mission of the Hawai'i Oral Health Coalition is to improve the overall health and wellbeing of all Hawai'i residents by increasing access and equity in oral health care through collaborative partnerships, advocacy, and education.

ii Findings from a Ward Research Study commissioned by the Hawaii Public Health Institute that summarizes findings from a phone survey among n=812 registered Hawaii voters (maximum sampling error of +/-3.3%) conducted between November 5 to 8, 2018. A copy of the results are available upon request.

Committee on Human Service
Senator Russell E. Ruderman, Chair
Senator Karl Rhoads, Vice Chair

Committee on Commerce, Consumer Protection, and Health
Senator Rosalyn H. Baker, Chair
Senator Stanley Chang, Vice Chair

Testimony on Senate Bill 2459
Relating to Medicaid Benefits
Submitted by Dr. Steven Pine, DDS., Dental Director
February 3, 2020

I, Dr. Steven Pine, DDS, currently work as the Dental Director at West Hawaii Community Health Center, (WHCHC) and I strongly support **Senate Bill 2459**, which appropriates funds for the restoration of basic adult dental benefits to Medicaid patients.

At WHCHC we believe that oral health indicates much more than simply healthy teeth, as the mouth can be both a cause and a window to individual and population health and well-being. Oral health is critical to general health and well-being as the mouth is the gateway to the rest of the body, providing clues about overall health. It is sometimes the first place where signs and symptoms of other diseases are noticed. Causes of poor oral health are complex and access to dental care for adults is crucial for overall health and well-being. However, adults in West Hawaii are less likely to see a dentist than adults on average for the state. 35.6% of West Hawaii adults have had no dental care compared to the state rate of 29%. Moreover, the rate of oral health emergency room visits in West Hawaii is 58.9 per 100,000, significantly greater than the rate of 16.8 per 100,000 statewide. (State of Hawaii Primary Care Needs Assessment Data Book, 2016)

WHCHC provides care to the most under-served people in our community who have the most complicated health needs. Individuals with a range of chronic conditions are more susceptible to oral disease. Oral disease can also exacerbate chronic disease symptoms.

In 2019 WHCHC provided 2,023 adult dental visits. Of these visits 232 were emergency visits for low-income adults; 918 visits were provided to adults with low-income who qualified for the sliding fee payment program - these dental patients live at 100% of the federal poverty level and qualified for paying only a minimal payment on the sliding fee discount program. In 2019 the WHCHC Adult Dental program expenditures totaled \$1,286,982 - program revenue totaled \$576,230 - equating to a \$710,751 financial loss for the adult dental program. This is an unsustainable business model. Because our mission is to provide dental care to those with low-income, and other high-risk populations, the only way this adult dental program can become viable is Medicaid funding adult dental treatments.

Research shows that adults who receive Medicaid frequently go without comprehensive oral treatment due to high treatment costs which must be paid for out-of-pocket (Hawaii Oral Health: Key Findings, 2015). A recent CDC report shows that the cost of treatment or lack of insurance was the main reason 42% of adults, 18-64 years of age, went without a dental visit for an oral health problem in the past 6 months. Consistent with national statistics that demonstrate disparity in dental care for the low-income vs high income adults, a recent survey on Hawaii Oral Health noted there are substantial dental health disparities in Hawaii. Adults with low income are more likely to have dental problems and less likely to see a dentist each year. Only 52% of low-income adults saw a dentist during the past year compared to 82% of high-income adults. In addition, adults with low-income (<\$15,000/year) are more likely to have lost a permanent tooth because of dental problems compared to adults with high-income (>\$70,000/year). These differences may be partially explained by low income adults having lack of access to receiving dental care (Hawaii Oral Health: Key Findings, 2015).

The state of Hawaii has one of the highest cost of living rates in the U.S. - for those living in poverty it becomes a choice between paying for dental treatments out-of-pocket, or, paying for food and housing.

Emerging evidence shows an association between periodontal infection and adverse pregnancy outcomes, such as premature delivery and low birth weight. Studies also show that controlling oral diseases improves a

woman's quality of life and has the potential to reduce the transmission of oral bacteria from mothers to children. Most pregnant women in Hawaii DO NOT see a dentist during their pregnancy. Only 41% of pregnant women in Hawaii reported seeing a dentist during their pregnancy in 2009-2011. Pregnant women who live in Hawaii County, who are between the ages of 20-29 years, who have less than a high school education, who are low-income, and who receive Medicaid/QUEST health insurance, are particular group with the lowest estimates of seeing a dentist during pregnancy.

By passing this bill you will improve oral health outcomes for the most disadvantaged adults in our community. Providing adult dental services for those living in poverty will serve the public in the following ways:

- Reduce costs associated with emergency department visits for preventable oral health problems.
- Improve pregnancy outcomes for low- income women.
- Improve self-esteem, employability, decrease absenteeism, and improve mental health of disadvantaged adults.
- Improve chronic health condition for underserved and disadvantaged adults.
- Improve access to dental services for adults living in poverty.

For these reasons I strongly support **SB 2459**. Thank you for the opportunity to testify.



Papa Ola Lokahi
Nana I Ka Pono Na Ma

LATE

Papa Ola Lokahi
894 Queen Street
Honolulu, Hawaii 96813

Phone: 808.597.6550 ~ Facsimile: 808.597.6551

Papa Ola Lokahi

is a non-profit Native Hawaiian organization founded in 1988 for the purpose of improving the health and well-being of Native Hawaiians and other native peoples of the Pacific and continental United States.

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SENATE COMMITTEE ON HUMAN SERVICES

Sen. Russell E. Ruderman, Chair

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Sen. Rosalyn H. Baker, Chair

Sen. Stanley Chang, Vice-Chair

IN SUPPORT

SB 2459 - RELATING TO MEDICAID BENEFITS

Wednesday, February 5, 2020, 2:45 PM

Conference Room 016, State Capitol

Aloha to the Chairs, Vice-Chairs and members of the committees.

Papa Ola Lōkahi (POL)—the Native Hawaiian Health Board established 30 years ago—is in strong support of SB 2459, which will restore adult Medicaid coverage for adult dental care services that were revoked in 2009.

Papa Ola Lōkahi is authorized by the federal Native Hawaiian Health Care Improvement Act (Title 42 USC 122), or NHHCIA, to address the health and well-being of native Hawaiians, which we do through multiple strategies: policy, research and data, traditional Hawaiian healing, education and training, workforce development, and more. The NHHCIA also created five Native Hawaiian Health Care Systems that serve seven islands by providing primary, behavioral health, outreach and enrollment services. Two provide dental services directly, the others provide referrals to dental health partners.

The Systems have all witnessed increasing numbers of patients and clients in need of dental benefits. Gum disease and cavities are rising in adults throughout Hawai'i. Most significantly, The Hawai'i Department of Health reported that in 2017, 3,000 residents visited emergency rooms around the islands for preventable dental health services.

This bill is open of the most important to our Native Hawaiian Health Care Systems this year. With Medicaid coverage for adults, preventive oral health care will save millions of dollars in restorative services and relieve emergency care.

We strongly urge the passage of this bill. Mahalo nui for the opportunity to provide testimony IN SUPPORT of SB 2459.



Pono Hawai'i Initiative

Josh Frost - President • Patrick Shea - Treasurer • Kristin Hamada
Nelson Ho • Summer Starr

Tuesday, February 4, 2020

Relating to Medicaid Benefits
Testifying in Support

Aloha Chair and members of the committee,

The Pono Hawai'i Initiative (PHI) **supports SB2459 Relating to Medicaid Benefits**, which makes an appropriation to restore certain adult dental benefits to Medicaid enrollees.

Dental benefits are necessary for a wide range of reasons (physical, emotional and economical). Having dental benefits can help reduce emergency room visits, reduce complications for diabetics and pregnant women. Poor oral health has been clinically proven to have adverse impacts on an array of acute and chronic health conditions leading to poor health outcomes and a lower quality of life.

Having access to dental coverage means more dental visits and a greater chance of preventing dental issues before they start. Currently comprehensive dental coverage is mandatory for children enrolled in Medicaid but benefits for adults is optional. Dental benefits should be apart of basic care received under Medicaid.

For all these reasons, we urge you to move this bill forward.

Mahalo for the opportunity,
Gary Hooser
Executive Director
Pono Hawai'i Initiative

SB-2459

Submitted on: 2/4/2020 2:13:03 PM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Taylor Ashford	Testifying for Easterseals Hawaii	Support	No

Comments:

February 5, 2020

SB2459

COMMITTEE ON HUMAN SERVICES (CHS) and COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH (CPH)

Senator Russell E. Ruderman CHS Chair, Senator Rosalyn N. Baker, CPH Chair, Senator Karl Rhoads CHS Vice Chair, Senator Stanley Chang, CPH Vice Chair and Committee members,

I am submitting this letter in support of SB2459 on behalf of Easterseals Hawaii and the families we serve. Easterseals Hawaii provides Home and Community Based Service (HCBS) Programs to 250 adults with Intellectual and Developmental Disabilities in nine locations statewide. Our Mission is to ensure that all people with disabilities or special needs and their families have equal opportunities to live, learn, work and play in their communities. Most adults that participate in the Home and Community Based Services program receive their health services through the Med-Quest program and would benefit from the restoration of dental services.

Oral health is a crucial part of a person’s physical, psychological, social and economic health and wellbeing. Missing or broken teeth create social and economic barriers for adults to make friends and find and maintain gainful employment in our service-based economy.

Due to the lack of oral care, our emergency rooms have been over utilized for unmet oral health needs. Of the 3,000 ER visits for acute dental emergencies in 2016, 56% were people with disabilities. Coverage of routine and preventive oral health would reduce ER visits and the cost of this more expensive care.

Thank you for the opportunity to submit this letter of support for SB 2459.

Michelle Befi

VP of Clinical Services, Easterseals Hawaii



CATHOLIC CHARITIES HAWAII

TESTIMONY IN SUPPORT OF SB 2459: Relating to Medicaid Benefits

TO: Senator Russell Ruderman, Chair, Senator Rosalyn H. Baker, Chair; and Members, Committees on Human Services and Commerce, Consumer Protection, and Health

FROM: Rob Van Tassell, President and CEO, Catholic Charities Hawaii

Hearing: Wednesday, 2/5/20; 2:45 PM; CR 016

Chair Ruderman, Chair Baker, and Members, Committee on Human Services and Commerce, Consumer Protection, and Health

Thank you for the opportunity to provide testimony **in support** of SB 2459, which makes an appropriation to the Department of Human Services to restore adult dental benefits to Medicaid enrollees. I am Rob Van Tassell, with Catholic Charities Hawaii.

Catholic Charities Hawaii (CCH) is a tax exempt, non-profit agency that has been providing social services in Hawaii for over 70 years. CCH has programs serving elders, children, families, homeless and immigrants. Our mission is to provide services and advocacy for the most vulnerable in Hawaii. Access to dental care is an important social justice issue for CCH.

We support this bill since poor oral health can have a serious impact on peoples' overall health and their ability to live productive lives. We have found a number of kupuna who do not have access to primary dental care. Even with the knowledge that special programs like Kupuna Smiles provides, these seniors cannot afford to see a dentist. It is also of great concern for the homeless who already are at high risk of ill health due to their unstable living situations. Lack of dental care affects a wide range of Hawaii residents since access to regular oral health care varies greatly across the State. **Our rural and neighbor island residents and persons/families with lower incomes have disproportionate access issues.**

In 2009, Hawaii's adult dental benefits were removed. Data shows that this is having a significant impact on our residents. There were over 3,000 ER visits for acute oral health conditions in 2016, costing the state over \$17 million in direct costs. Compare this with 1,800 visits to the ER in 2006, with \$4 million in costs. Medicaid beneficiaries constitute over half (53%) of the dental emergencies seen, statewide, in emergency rooms.

Restoring adult dental benefits could cut costs by diverting an estimated 79% of ER dental visits to community settings, with a much lower cost. An emergency seen by a community dentist costs an estimated 48% of the cost of an ER treatment.

Good oral health is important since it can improve the beneficiaries' ability to obtain and maintain employment and engage with others.

We urge your support of this bill to enhance the dental and overall health of Hawaii's residents.

Please our Legislative Liaison, Betty Lou Larson, at bettylou.larson@catholiccharitieshawaii.org or (808) 373-0356, if you have any questions.





February 3, 2020

Date of hearing: February 5, 2020 at 2:45 PM at Conference Room 016

Bill #: SB2459 Committee: Committee on Human Services and Committee on Commerce, Consumer Protection, and Health

Aloha Chair Ruderman, Chair Baker and Committee Members,

My name is Jim Kilgore and I am representing Full Life, which provides services for adults with developmental disabilities through the State of Hawaii Medicaid Waiver Program.

I am writing in strong support of SB2459. This bill proposes an appropriation for the expansion of adult dental benefits under Medicaid to include reinstate basic diagnostic, preventive and restoration benefits.

Hawaii's oral health services has not been given adequate attention and resources necessary to support good oral health care in our state since Medicaid adult dental benefits were drastically cut in 2009.

Oral health is a crucial part of a person's physical, psychological, social and economic health and wellbeing. In fact, pain due to oral disease in children results in thousands of hours of missed school every year; while adults with poor oral health often struggle to manage chronic co-conditions such as diabetes and heart disease.

Adults with developmental disabilities are not able to afford dental diagnostic, preventative care, or restoration. Often their only option is emergency extraction which could be prevented with routine dental care. This negatively impacts self-esteem and imposes barriers to independence such as obtaining employment.

As a part of our commitment to improve oral health in Hawaii, we believe that basic coverage of dental services for adults is a critical factor in ensuring access to appropriate and timely oral health care,

Mahalo for the opportunity to testify in strong support of this very important health bill.

Jim Kilgore

Executive Director



95 Mahalani Street, Room 21, Wailuku, HI 96793
Phone: 808-244-4647, Fax: 808-242-6676

Date: February 4, 2020

To: The Honorable Senator Russell E. Ruderman, Chair Senate Committee on Human Services

The Honorable Senator Rosalyn H. Baker, Chair Senate Committee on Commerce, Consumer Protection, and Health

Re: SB2459 Relating to Medicaid Benefits

Hrg: Wednesday, February 5, 2020 at 2:45 pm at Capitol Conference Room 016

My name is Emi Eno Orikasa and I am the Oral Health Director at Hui No Ke Ola Pono, the Native Hawaiian Health Center on Maui. Hui No Ke Ola Pono focuses on health enhancement and disease prevention through programs on nutrition, health management and health care referrals for the community of Maui in a culturally caring manner.

Hui No Ke Ola Pono is in strong support of SB2459 which makes an appropriation to restore certain adult dental benefits to Medicaid enrollees.

Significant gaps exist in the oral health of Native Hawaiians, in part due to the lack of preventive and comprehensive dental benefits for adult Medicaid beneficiaries. Despite having a sliding-scale discount for dental services, many of our patients are still unable to afford even basic, preventive dental care. Thus, patients are delaying or avoiding preventive dental treatment, leading to more severe dental problems, and seeking care only when they have an emergency.

In 2016, there were more than 3,000 emergency room visits due to preventable dental problems, 67% more than in 2006. As a result, aggregate hospital charges for dental emergency visits were just over \$17, 000,000 compared to \$4,000,000 in 2006. Over half of all dental ER visits were residents on Neighbor Islands and 66% were Medicaid beneficiaries.

Oral health is a crucial part of overall physical, psychological, social, and economic wellbeing. Many of our adult patients are also afflicted with co-morbidities such as diabetes and cardiovascular disease, making preventive care essential in helping to managing these conditions. Pregnant women with poor oral health are at an increased risk of delivering preterm and/or low-birth-weight infants. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

As a part of our commitment to improve oral health in Hawaii, we believe that basic adult dental coverage, at minimum, is a critical factor in ensuring access to appropriate and timely oral health care.

We strongly support the restoration of these benefits.

Mahalo for the opportunity to provide testimony.

“A Native Hawaiian Association to Strengthen and Perpetuate Life”



HO'OLA LAHUI HAWAI'I
P.O. Box 3990; Līhu'e, Hawai'i
Phone: 808.240.0100 Fax: 808.246.9551

February 4, 2020

COMMITTEE ON HUMAN SERVICES

Senator Russell E. Ruderman, Chair

Senator Karl Rhoads, Vice Chair

COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

Senator Rosalyn H. Baker, Chair

Senator Stanley Chang, Vice Chair

Testimony in Support of SB 2459

MAKING AN APPROPRIATION TO RESTORE ADULT DENTAL BENEFITS TO MEDICAID ENROLLEES.

Wednesday February 5, 2020, 2:45pm, Conference Room 016

Ho`ola Lahui Hawaii the only Federally Qualified Health Center and Native Hawaiian Health Care System on Kauai is strongly **SUPPORTING** this bill to restore adult dental benefits for those on Medicaid.

Dental care is vital to the overall health of individuals. Nearly 50% of all adults aged 30 or older have some form of gum disease according to the Centers for Disease Control and Prevention and adult cavities is on the rise. Around 90% of all adults have had a cavity and 1 in 4 adults have untreated cavities.

It is vital to support the dental benefit restoration to Medicaid for those who are most in need. Prevention will save millions of dollars in restorative care services in the long term.

Since 2009 when this benefit was removed, we have witnessed increasing numbers of individuals who are in dire need of care including major decay and infection.

This is the single most important bill currently in the legislature to our patients. We strongly encourage the committee to pass this bill and restore benefits to those most in need.

Respectfully Requested,

David Peters
Chief Executive Officer



ALOHACARE

February 5, 2020
2:45 pm
Conference Room 016

To: The Honorable Sen. Russell E. Ruderman, Chair
The Honorable Sen. Karl Rhoads, Vice Chair
Committee on Human Services

The Honorable Sen. Rosalyn H. Baker, Chair
The Honorable Sen. Stanley Change, Vice Chair

From: Paula Arcena, Executive Vice President, External Affairs
Peggy Mierzwa, Government Affairs

Re: SB2459 Relating to Medicaid Benefits

AlohaCare is pleased to submit this testimony in **strong support** of SB2459 making an appropriate to restore certain adult dental benefits to Medicaid enrollees; requires maximization of federal matching funds.

Without dental coverage, 180,000 adults in the Hawaii Medicaid program are not getting the benefit of early detection and treatment for better overall health. Instead, adults with Medicaid are covered for emergency dental coverage only. In 2012 alone, Hawaii Medicaid paid \$4.8 million for 1,691 adults for emergency room visits for preventable oral health problems, according to the Department of Health, Hawaii Oral Health: Key Findings report.

Children in Hawaii's Medicaid program currently have comprehensive dental coverage. Senior citizens who are Medicaid eligible have multiple options for dental coverage from Medicare Advantage plans. It's been over 10 years since adults in Hawaii's Medicaid program have had dental coverage.

Clinical studies show that without proper dental care pregnant mothers are at higher risk for having premature births and underweight babies. Bacteria in the mouth can get into the bloodstream and cause a heart infection called endocarditis. Some mental health medications cause dry mouth, putting people at risk for tooth and gum disease. Diabetes can make people more susceptible to serious gum disease, such as gingivitis or worse, periodontitis.



ALOHA CARE

To encourage AlohaCare members to seek dental care, AlohaCare is voluntarily providing its members with basic dental coverage. Starting January 1, 2019, AlohaCare has covered basic dental services to adult members who rely on Medicaid as their primary health insurance. By absorbing the cost of an annual dental exam, biannual cleanings and fluoride treatment, two bitewing x-rays and one filling or non-emergency extraction, we hope to help adults with Medicaid get into a dentist chair before they have a dental crisis.

AlohaCare is a non-profit health plan founded in 1994 by Hawai'i Community Health Centers (CHCs) to provide high-quality health care services to Hawai'i's medically underserved populations and to ensure that communities have a voice in how their needs are served. We are the only community governed health plan in the state of Hawaii. Currently, AlohaCare is the second largest QUEST Integration plan statewide. We partner with nearly 3,500 physicians, specialists and providers in the care of our members. We have over 260 employees who work on Oahu, the Big Island, Maui and Kauai.

Thank you for this opportunity to testify.



Hawaii
Children's Action Network Speaks!
Building a unified voice for Hawaii's children

Hawai'i Children's Action Network Speaks! is a nonpartisan 501c4 nonprofit committed to advocating for children and their families. Our core issues are safety, health, and education.

To: Senator Ruderman, Chair
Senator Rhoads, Vice Chair
Senate Committee on Human Services

Senator Baker, Chair
Senator Chang, Vice Chair
Senate Committee on Commerce, Consumer Protection, and Health

Re: SB 2459- adult dental benefits
Hawai'i State Capitol, Room 016
2:45PM, 2/4/2020

Chair Ruderman, Chair Baker, Vice Chair Rhoads, Vice Chair Chang and committee members,

On behalf of Hawaii Children's Action Network Speaks!, we are writing to support in STRONG support SB 2459, relating to adult dental benefits.

Hawaii's children have some of the worst oral health outcomes in the country. Our third graders have the highest prevalence of tooth decay and 7 out of 10 third graders are impacted by tooth decay. We believe oral health is a family issue and that if parents have access to dental prevention services, their whole family will benefit. We know that dental health has a direct impact into overall health and therefore, should be a priority. Our most vulnerable families had this benefit previously and we believe it should be restored.

For these reasons, HCAN Speaks! respectfully requests the Committee to support this measure.

Thank you,

Kathleen Algire
Director, Public Policy and Research

Bill: SB2459, Relating to Medicaid

Hearing Date & Time: Weds, February 5, 2020, 2:45pm

Committees: Senate Committee on Human Services and Committee on Commerce, Consumer Protection and Health

Testifier: Nancy Partika, RN, MPH

Aloha Senator Ruderman, Senator Baker, and Members of the Senate Committee on Human Services and Senate Committee on Commerce, Consumer Protection and Health

My name is Nancy Partika, and I am a member of the Hawaii Oral Health Coalition, having worked to identify and address oral health disparities in Hawaii for the past 4 years.

Hawaii has visibly struggled for decades with oral health disparities and problems accessing care for its most needy. The 2009 abolishment of adult dental benefits under Medicaid and the problems that resulted from adults receiving nothing other than emergency-only care since then has spiraled, while the State continues to pay out millions per year in acute oral health emergency room care and for other health-related services statewide that does not provide adequate oral health care or support to our at-risk populations such as those on Medicaid.

According to a 2017-18 DOH study, 66% of all ER visits made statewide were Medicaid and/or Medicare recipients, and the costs in 2016 for these 3,000 total visits cost a staggering \$17 million dollars. Fiscally, it seems logical that these millions of dollars that could be potentially saved via fewer ER visits and instead wisely utilize a portion of those dollars to pay upfront for preventative and restorative dental care benefits for Medicaid recipients.

Poor oral health is already proven to be linked to an array of acute and chronic health conditions, including: heart disease, diabetes, stroke, depression, low birth weight and premature birth. Researchers have mapped linkages from chronic dental pain to end-stage renal disease, liver transplants, opioid-related emergency department visits, and opioid-related crime. These co-conditions are made worse by having poor oral health, and the care of the oral health of chronically ill or pregnant can be another significant potential area for return on investment. We are now recognizing that not intervening in oral health conditions early and preventively will cost much more later on in unintended direct and indirect costs.

Currently there are 34 states offering adult Medicaid recipients preventive and restorative adult oral health benefits. Many options exist as to how Hawaii could address the need for greater oral health benefits by expanding services covered that are preventive and restorative, rather than emergency-only care...

By adding a comprehensive or limited dental services benefit, Hawaii's adults on Medicaid are expected to experience fewer oral health-related ER visits, with improvements to their chronic disease risks and overall health status. Broader Medicaid dental benefits for adults would not only support individual health and well-being among Hawaii's most vulnerable adults, but could also improve the employment status and socio-economic strength of our communities.

We in the community fully understand and support the need to address multiple issues and crises at the Legislative level; however the issue of inadequate coverage of adults for oral health under Medicaid is now a chronic problem in need of immediate attention. More detailed analysis of the cost-benefits of implementing Improved Medicaid adult dental coverage is anticipated to be provided by MQD-DHS soon.

Improving oral health for adults and their families in Medicaid has widespread public and private support statewide and, as the unmet oral health needs continue to emerge, so does public support.

Your pro-active attention to this issue is respectfully requested—Mahalo for this opportunity to testify.

SB-2459

Submitted on: 2/3/2020 12:01:50 AM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Jennifer Azuma Chrupalyk	Individual	Support	No

Comments:

Restoring dental benefits to Medicaid insured people would be nothing short of genius in terms of long-term health, economy and productivity.

Health & Health Costs: While our overall health conditions increase to reflect better health and welfare of Hawai'i's residents, health care costs will inevitably decrease as a result because other health problems could have been prevented while they were only a tooth issue.

Economy: Poor dental health often limits job availability to individuals because of professional appearance. This often results in a heavier population dependence in both the long-term medical conditions as well as social welfare services. Fixing teeth can only be beneficial to people's ability to feel confident to go for the better paying jobs and aspire to do such.

Productivity: Once people look good, they feel good. When people feel good about themselves, their actions become aligned - which are all the psychological responses to a simple fix now - dental care.

Date of hearing: Wednesday, February 5, 2020 at 2:45 PM

Bill #: SB 2459: COMMITTEE ON HUMAN SERVICES; COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

Testimony submitted by *Save Medicaid Hawaii*

Aloha Chair Russell E. Ruderman, Chair Rosalyn H. Baker, Vice Chair Karl Rhoads, Vice Chair Stanley Chang, and Committee members:

My name is Doris Segal Matsunaga and I am representing Save Medicaid Hawaii, a network of people advocating for NO CUTS in Medicaid and working towards a stronger health care system in Hawaii that provides high quality universal health care for all. We firmly believe Medicaid is good for everyone in Hawaii because when more people are insured, this lowers health care costs for all of us. <https://www.facebook.com/SaveMedicaidHawaii/>

We are writing in strong support of SB 2459. This bill proposes an appropriation for the expansion of adult dental benefits under Medicaid to include reinstate basic preventive and restoration benefits.

Oral health is a crucial part of a person's physical, psychological, social and economic health and wellbeing. In fact, pain due to oral disease in children results in thousands of hours of missed school every year; while adults with poor oral health often struggle to manage chronic co-conditions such as diabetes and heart disease. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

As a result of our past decade of minimal coverage for dental care, our emergency room have been over utilized for unmet oral health needs to the tune of thousands of visits per year, costing millions of dollars. On our neighbor islands, dental care provided for DoD training purposes (TropicCare) attracts large numbers of residents who cannot afford to pay for the prohibitive costs of their care in dental offices. Our adult dental Medicaid provider system is inadequate to care for the numbers of persons needing care. Needless pain and suffering is common due to our indifference to adults needing care in dental homes.

There were reported just over 3,000 emergency room (ER) visits for acute oral health conditions in 2016, totaling over \$17 million in direct costs. For all dental emergency services that were provided in 2015-16 in Hawaii, 56% were disproportionately Med-QUEST recipients, who represent about 25% of the overall Hawaii population. An estimated 79% of ER dental visits could be diverted to community settings, saving about 48% of the cost of each visit. (Example: treating a dental emergency might cost \$750 in an ER vs. \$390 in the community setting.).

These figures do not begin to count the costs of treating heart disease or pre-term birth than can and do result from untreated dental infections.

This can be the year we do this! Let's stop the flow of out migration by our youth and live up to our roots and reputation as a progressive state with a strong social compact.

Save Medicaid Hawaii, a network of people advocating for NO CUTS in Medicaid and working towards a stronger health care system in Hawaii that provides high quality universal health care for all.
<https://www.facebook.com/SaveMedicaidHawaii/>

Date: February 1, 2020

To: The Honorable Russell E. Ruderman, Chair
The Honorable Karl Rhoades, Vice Chair
Members of the Senate Committee on Human Services

The Honorable Rosalyn H. Baker, Chair
The Honorable Stanley Chang, Vice Chair
Members of the Senate Committee on Commerce, Consumer Protection and Health

Re: **Strong Support for SB2459**, Relating to Medicaid Benefits

Hrg: February 5, 2020 at 2:45 PM in Capitol Room 016

Aloha Senate Committees on Human Services and Commerce, Consumer Protection and Health,

I am writing in **strong support of SB2459**, which makes an appropriation to restore certain adult dental benefits to Medicaid enrollees and requires maximization of federal matching funds.

Oral health is crucial to a person's physical, psychological, social and economic health and wellbeing. Poor oral health makes it much more difficult and expensive to effectively manage chronic health conditions, including diabetes and heart disease. Missing or broken teeth create social barriers for adults to find and maintain gainful employment in our service-based economy.

Hawai'i's Medicaid adult dental benefits were drastically cut in 2009. Since then, rather than accessing less expensive, *preventative* oral health care, adults covered under Medicaid have had to seek *emergency* care for serious oral health problems in our overburdened hospital emergency rooms.

Emergency room care is far more expensive, and addresses oral health problems only after they have a significant negative health and quality-of-life impact, than preventative oral health care.

Each year the State of Hawaii spends millions more on emergency dental treatment for adults with serious oral health conditions than it would cost to provide preventative dental care to all adults covered under Medicaid. While costing less, preventive dental care would also reduce needless pain and suffering among adult Medicaid enrollees by preventing oral health problems before they become serious and debilitating.

By not providing preventative adult dental care, Hawai'i also misses out on matching federal funds available to offset the cost of preventative oral health care for adult Medicaid recipients.

SB2459 offers a common sense approach to ensuring appropriate and timely oral health care for adults covered by Medicaid, reducing pain and suffering among some of our most vulnerable community members, saving the State of Hawai'i and taxpayers money and reducing the burden on our over-stretched hospital emergency departments.

I **strongly support SB2459** and respectfully ask you to pass this bill out of committee.

Many thanks for your consideration,

Forrest Batz, PharmD
Kea'au, HI

**TESTIMONY FOR SENATE BILL 2459
RELATING TO MEDICAID BENEFITS**

Date of Hearing:

February 5, 2020

Committees:

Committee on Human Services

Senator Russell E. Ruderman, Chair

Senator Karl Rhodes, Vice Chair

Committee on Commerce, Consumer Protection, and Health

Senator Rosalyn H. Baker, Chair

Senator Stanley Chang, Vice Chair

February 1, 2020

Dear Committee Chairs, Vice Chairs, and members:

My name is Andrew Tseu and I am submitting testimony as a Hawaii resident.

I am writing in strong support of SB 2459. This bill proposes an appropriation for the expansion of adult dental benefits under Medicaid to include reinstate basic preventive and restoration benefits.

Hawaii's oral health services has not been given adequate attention and resources necessary to support good oral health care in our state since Medicaid adult dental benefits were drastically cut in 2009.

Oral health is a crucial part of a person's physical, psychological, social and economic health and well-being. In fact, pain due to oral disease in children results in thousands of hours of missed school every year; while adults with poor oral health often struggle to manage chronic co-conditions such as diabetes and heart disease. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

As a result of our past decade of minimal coverage for dental care, our emergency room have been overutilized for unmet oral health needs to the tune of thousands of visits per year, costing millions of dollars.

As a part of our commitment to improve oral health in Hawaii, we believe that basic coverage of dental services for adults is a critical factor in ensuring access to appropriate and timely oral health care.

Please feel free to contact me at (808) 781-3613 to discuss my testimony further.

Thank you for the opportunity to testify in strong support of this very important health bill.

Best regards,

A handwritten signature in black ink, appearing to read "Andrew Tseu". The signature is fluid and cursive, with a long horizontal stroke extending from the end of the name.

Andrew Tseu, D.D.S., J.D.

To: Hawaii State Legislature - COMMITTEE ON HUMAN SERVICES; COMMITTEE ON COMMERCE, CONSUMER PROTECTION, AND HEALTH

Hearing: Date/Time: Wednesday, February 5, 2020 at 2:45 PM

Place: Hawaii State Capitol, Room 016

Re: Judith Ann Armstrong is in support of SB 2459 relating to Medicaid Benefits.

Aloha Chair Russell E. Ruderman, Chair Rosalyn H. Baker, Vice Chair Karl Rhoads, Vice Chair Stanley Chang, and Committee members,

I am writing in strong support of SB 2459. This bill proposes an appropriation for the expansion of adult dental benefits under Medicaid to include reinstate basic preventive and restoration benefits

Oral health is a crucial part of a person's physical, psychological, social and economic health and wellbeing. In fact, pain due to oral disease in children results in thousands of hours of missed school every year; while adults with poor oral health often struggle to manage chronic co-conditions such as diabetes and heart disease. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

As a result of our past decade of minimal coverage for dental care, our emergency room have been over utilized for unmet oral health needs to the tune of thousands of visits per year, costing millions of dollars. On our neighbor islands, dental care provided for DoD training purposes (TropicCare) attracts large numbers of residents who cannot afford to pay for the prohibitive costs of their care in dental offices. Our adult dental Medicaid provider system is inadequate to care for the numbers of persons needing care. Needless pain and suffering is common due to our indifference to adults needing care in dental homes.

I strongly urge our legislators to support this important benefit change.

Thank you for this opportunity to testify in support of this important measure.

Sincerely,
Judith Ann Armstrong
1717 Ala Wai Blvd
Apt 3006
Honolulu, HI 96815

baker8 - Jessica

From: Troy Abraham <wmrdocdoesfel@ujoin.co>
Sent: Tuesday, February 4, 2020 9:36 AM
To: CPH Testimony
Subject: Support SB 2459

From: tabraham08@gmail.com <Troy Abraham>

Message:

Aloha Chairs Baker and Ruderman, Vice Chairs Rhoads and Chang and members of the committee,

I write you today to ask that you support SB 2459.

Troy Abraham

Hilo

Hawaii

baker8 - Jessica

From: Luana Keakealani <cybffcnxpfvdsbu@ujoin.co>
Sent: Tuesday, February 4, 2020 10:06 AM
To: CPH Testimony
Subject: Support SB 2459

From: sonyandluana@yahoo.com <Luana Keakealani>

Message:

My name is Luana Keakealani and I am a licensed Social Worker. I write to you to share my thoughts on how restoring comprehensive dental coverage is in the best interest of Hawaii's adult population. A growing body of evidence has linked oral health, particularly periodontal disease, to several chronic diseases, including diabetes, heart disease, and stroke. Given what we already know about chronic disease in Hawaii, lack of dental coverage has a compounding effect upon our adult population, many of whom are already grappling with chronic disease health disparity. Please support SB 2459. Mahalo, Luana Keakealani, LSW

Aloha Chairs Baker and Ruderman, Vice Chairs Rhoads and Chang and members of the committee,

I write you today to ask that you support SB 2459.

Luana Keakealani

Kamuela

Hawaii

baker8 - Jessica

From: Michelle Lam <wuuqtvwgiajcvn@ujoin.co>
Sent: Tuesday, February 4, 2020 10:38 AM
To: CPH Testimony
Subject: Support SB 2459

From: michelle_l_808@yahoo.com <Michelle Lam>

Message:

I write you as a parent of a special needs adult asking that Medicaid benefits for dental is restored. As an involved member to this population, too often I see many of them with poor dental hygiene and very bad teeth. One of the things I cannot comprehend is why preventive care such as regular cleaning is not covered. To a population like this, such care should play a stronger role as most of the time they lack the ability to take better care of their teeth. This is also a population that is financially inept and relies on benefits from Medicaid to take care of their medical needs. I plead with you to strongly consider restoring dental Medicaid benefits. Thank you very much.

Aloha Chairs Baker and Ruderman, Vice Chairs Rhoads and Chang and members of the committee,

I write you today to ask that you support SB 2459.

Michelle Lam

Honolulu

Hawaii

SB-2459

Submitted on: 2/4/2020 9:13:52 AM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Rebecca Hartman	Individual	Support	No

Comments:

As a care coordinator, I frequently work with young adults with disabilities who transition to adulthood. During that transition, these individuals are frequently reliant on Medicaid services for all medical, behavioral health, and dental needs. When young adults transition from EPSDT to adult care on their 21st birthday, nothing significant has changed in their life except a sudden and rapid ineligibility for multiple types of care, dental care being one example. Access to appropriate dental care tends to be a struggle throughout the lifespan of many of these individuals. In individuals who do not communicate verbally, challenging or self-injurious behaviors can arise as a result of dental pain that is not diagnosed or treated. In worst-case scenarios, these behaviors can cause a rise in need for one-to-one services, or may be treated utilizing chemical restraints and medications, when in fact it is a simple dental issue that can be treated. It is known that preventive care, particularly for our most vulnerable populations, saves money.

SB-2459

Submitted on: 2/4/2020 10:13:14 AM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Barbara Barry	Individual	Support	No

Comments:

Aloha,

Please restore adult dental Medicaid benefits.

Oral health is important to overall health.

Mahalo,

Ms. Barbara Barry

SB-2459

Submitted on: 2/4/2020 9:50:44 AM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Franz Weber	Individual	Support	No

Comments:

SB-2459

Submitted on: 2/4/2020 1:07:15 PM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Joseph Kohn MD	Testifying for We Are One, Inc. - www.WeAreOne.cc - WAO	Support	No

Comments:

Strongly Support SB2459 and all health care services for all as a human right!

www.WeAreOne.cc

SB-2459

Submitted on: 2/4/2020 1:21:30 PM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Michelle Kobayashi	Individual	Support	No

Comments:

Date: February 4, 2020

To: The Honorable Senator Russell E. Ruderman

Chair Senate Committee on Human Services

The Honorable Senator Rosalyn H. Baker,

Chair Senate Committee on Commerce, Consumer Protection, and Health

Re: Strong Support for SB2459 Making an Appropriation to Restore Certain Adult

Dental Benefits to Medicaid Enrollees

Hrg: Wednesday, February 5, 2020 at 2:45 PM at Conference Room 016

My name is Michelle Kobayashi. I am a pediatric dentist with offices in Honolulu, Aiea, and Kahului. I am writing in strong support of SB2459. This bill proposes an appropriation for the expansion of adult dental benefits under Medicaid to include reinstate basic preventive and restoration benefits.

Hawaii's oral health services has not been given adequate attention and resources necessary to support good oral health care in our state since Medicaid adult dental benefits were drastically cut in 2009.

Oral health is a crucial part of a person's physical, psychological, social and economic health and wellbeing. In fact, pain due to oral disease in children results in thousands of hours of missed school every year; while adults with poor oral health often struggle to manage chronic

co-conditions such as diabetes and heart disease. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

As a result of our past decade of minimal coverage for dental care, our emergency room have been overutilized for unmet oral health needs to the tune of thousands of visits per year, costing millions of dollars. On our neighbor islands, dental care provided for DoD training purposes (TropicCare) attracts large numbers of residents who cannot afford to pay for the prohibitive costs of their care in dental offices. Our adult dental Medicaid provider system is inadequate to care for the numbers of persons needing care. Needless pain and suffering is common due to our indifference to adults needing care in dental homes.

As a part of our commitment to improve oral health in Hawaii, we believe that basic coverage of dental services for adults is a critical factor in ensuring access to appropriate and timely oral health care,

Mahalo for the opportunity to testify in strong support of this very important health bill.

Sincerely,

SB-2459

Submitted on: 2/4/2020 10:46:57 PM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Debbie Drummondo	Individual	Support	No

Comments:

Bill: SB2459, Relating to Medicaid Hearing Date & Time: Weds, February 5, 2020, 2:45 pm
Committees: Senate Committee on Human Services and Committee on Commerce, Consumer Protection and Health

Testifier: Debbie Drummondo, MSW Candidate

Myron B. Thompson School of Social Work-UH Manoa

Aloha Senator Ruderman, Senator Baker, and Members of the Senate Committee on Human Services and Senate Committee on Commerce, Consumer Protection and Health

I am writing in strong support of SB2459. This bill proposes an appropriation for the expansion of adult dental benefits under Medicaid to include reinstate basic diagnostic, preventive and restoration benefits. Hawaii's oral health services have not been given adequate attention and resources necessary to support good oral health care in our state since Medicaid adult dental benefits were drastically cut in 2009.

Oral health is a crucial part of a person's physical, psychological, social and economic health and wellbeing. In fact, pain due to oral disease in children results in thousands of hours of missed school every year; while adults with poor oral health often struggle to manage chronic co-conditions such as diabetes and heart disease. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our service-based economy.

I strongly support SB2459 and respectfully ask you to pass this bill out of the committee.

I strongly urge our legislators to support this important benefit change. Thank you for this opportunity to testify in support of this important measure.

Sincerely.

Debbie Drummondo

MSW Candidate MBT SW-UH Manoa

SB-2459

Submitted on: 2/5/2020 7:52:33 AM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Paul Strauss	Individual	Support	No

Comments:

Oral health is directly related to the overall health of the individual. Therefore, lack of access to care for dental health leads to poorer health outcomes overall, ultimately leading to a lower quality of life for the individual and higher health costs for everyone in the state of Hawai'i.

SB-2459

Submitted on: 2/5/2020 6:46:25 AM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
carol lee kamekona	Individual	Support	No

Comments:

SB-2459

Submitted on: 2/5/2020 10:28:11 AM

Testimony for CPH on 2/5/2020 2:45:00 PM

Submitted By	Organization	Testifier Position	Present at Hearing
Kahealani	Individual	Support	No

Comments:

Date: February 5, 2020

To: The Honorable Senator Russell E. Ruderman
Chair, Senate Committee on Human Services

The Honorable Senator Rosalyn H. Baker
Chair, Senate Committee on Commerce, Consumer Protection, and Health

From: Mark H. Yamakawa, President & CEO

Re: Strong Support for SB2459
Making an Appropriation to Restore Certain Adult Dental Benefits to Medicaid Enrollees

As Hawaii's largest dental benefits provider, Hawaii Dental Service (HDS) strongly supports SB2459, which would appropriate funds to the Hawaii Department of Human Services to restore basic diagnostic, preventive, and restorative dental benefits for adult Medicaid enrollees.

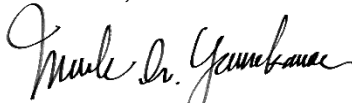
Oral health is an important component of an individual's overall physical, psychological, social, and economic health and wellbeing. Providing needed dental benefits for Hawaii's adult Medicaid population will not only provide access to quality preventive and restorative dental care, but also help to improve overall health. This ultimately will improve individual lives and lower healthcare costs for the state.

Good oral health is a foundation of good overall health. Due to drastic cuts to adult dental benefits since 2009, Hawaii has seen emergency room visits overutilized for unmet oral health needs, costing millions of dollars in unnecessary expenses. There were reported just over 3,000 emergency room visits for acute oral health conditions in 2016, totaling over \$17 million in direct costs, compared to 1,800 visits in 2006, with \$4 million in costs. For all dental emergency services that were provided in 2015-16 in Hawaii, 56% were disproportionately Med-QUEST recipients, who represent about 25% of the overall Hawaii population.

Having strong teeth and healthy gums allows us to eat for proper nutrition and enjoy speech and communication that are essential for work and socialization. A lack of access to oral health care results in productivity loss from absenteeism as well as underemployment or unemployment, causing adverse economic impacts for individuals and our community.

We respectfully urge the Committees to thoughtfully consider restoration of full adult dental benefits for adult Medicaid enrollees to improve quality of life in our state. Thank you for the opportunity to offer testimony on this bill.

Mahalo,



Mark H. Yamakawa
President and CEO