

CATHY BETTS
DIRECTOR

JOSEPH CAMPOS II
DEPUTY DIRECTOR

STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

March 15, 2022

TO: The Honorable Representative Ryan I. Yamane, Chair

Committee on Health, Human Services, and Homelessness

FROM: Cathy Betts, Director

SUBJECT: SB 1294 SD2— RELATING TO MEDICAID BENEFITS.

HEARING: Thursday, March 17, 2022, 9:30 am

Via Videoconference, State Capitol

<u>DEPARTMENT'S POSITION</u>: The Department of Human Services (DHS) supports the intent of this measure to fund the restoration of adult dental benefits for the Medicaid program. However, we respectfully request that the Legislature consider adding the appropriation to the executive budget. As noted in STAND. COM. REP. NO. <u>2036</u>, the Governor's budget priorities include funding to restore a basic adult dental benefit of preventive, diagnostic, and some restorative dental services.

<u>PURPOSE</u>: The purpose of this measure is to appropriate funds to reinstate the basic package of diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. Effective 12/31/2050. (SD2) The SD1 amended the measure by:

- (1) Replacing the purpose section with the updated language for Senate Bill No. 2401, Regular Session of 2022;
- (2) Clarifying that the funds appropriated by this measure are for the purpose of reinstating coverage of the basic package of diagnostic, preventive, and restorative dental benefits for adult Medicaid enrollees;
- (3) Inserting an appropriation amount of \$10,195,082;
- (4) Inserting an effective date of December 31, 2050, to allow further discussion on whether the funding in the Executive Supplemental Budget for fiscal year 2022-2023

- for the Department of Human Services (HMS 401) to reinstate certain adult dental benefits will be appropriated or authorized; and
- (5) Making technical, nonsubstantive amendments for the purposes of clarity and consistency.

The SD2 amended the measure by blanking out the appropriation of \$10,195,082.

The Department supports the restoration of a basic oral health benefits for adult Medicaid and QUEST Integration beneficiaries. The current limited benefit of emergency-only coverage does not support the goals of whole-person care. Lack of access to 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. For these reasons, the executive budget includes \$10,195,082 (\$3,466,328 A funds/\$6,728,754 N funds) to restore dental services for adult Medicaid beneficiaries. This amount is the equivalent of Option 1: Limited dental benefit focused only on prevention and oral disease control (e.g., dental procedures such as diagnostics (x-rays), cleanings, and fillings), and the same as the package of benefits referenced in this measure.

As background, in 2020, DHS Med-QUEST Division (MQD) with the Health Policy Institute of the American Dental Association (HPI ADA) released a study that updated cost estimates for the restoration of the adult dental benefit. MQD identified three coverage options, ranging from a basic dental coverage to a comprehensive option, which is also referenced in this bill.

Option 1. Limited dental benefit focused only on prevention and oral disease control (dental procedures such as diagnostics (x-rays), cleanings, and fillings).

Option 2. Basic dental benefit focused on oral disease control and some restoration of chewing functions (diagnostics, cleanings, fillings, some root canals, some crowns, and some dentures).

Option 3. Comprehensive coverage that includes most dental procedures with some limits.

Since the study's release in 2020, the number of adult beneficiaries has increased substantially.

Accordingly, the costs of each option were also updated:

	Option 1 (SB1294 SD2 & Gov recommended)	Option 2	Option 3
Total Cost	10,195,082	25,952,297	47,384,075
Federal Funds	6,728,754	17,128,516	31,273,490
State Funds	3,466,328	8,823,781	16,110,586

Lastly, if an appropriation is forthcoming, we respectfully request that the Legislature consider adding the appropriation to the executive budget. Including an appropriation via this measure would only be a one-time appropriation which would not support the necessary continuity of an adult dental program.

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

DAVID Y. IGEGOVERNOR OF HAWAII

ELIZABETH A. CHAR, M.D. DIRECTOR OF HEALTH



CAROLINE CADIRAO DIRECTOR

Telephone (808) 586-0100

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STATE OF HAWAII EXECUTIVE OFFICE ON AGING

NO. 1 CAPITOL DISTRICT 250 SOUTH HOTEL STREET, SUITE 406 HONOLULU, HAWAII 96813-2831

Testimony in SUPPORT of SB1294 SD2 Relating to Medicaid Benefits

COMMITTEE ON HEALTH, HUMAN SERVICES, & HOMELESSNESS REPRESENTATIVE RYAN I. YAMANE, CHAIR REPRESENTATIVE ADRIAN K. TAM., VICE CHAIR

Testimony of Caroline Cadirao
Director, Executive Office on Aging
Attached Agency to the Department of Health

Hearing Date: March 17, 2022 Room Number: 329

9:30 a.m. Via Videoconference

- **EOA's Position:** The Executive Office on Aging (EOA), an attached agency to the Department
- of Health, supports SB1294 SD2, Relating to Medicaid Benefits.
- 3 **Fiscal Implications:** This measure appropriates an unspecified amount of funds for FY 2022-
- 4 2023 to be expended by the Department of Human Services to restore the basic package of
- 5 diagnostic, preventive, and restorative dental benefits, as listed in Option 1 of the measure, to
- 6 adult Medicaid enrollees.
- 7 **Purpose and Justification:** The purpose of this bill is to expand access of care by restoring
- dental benefits to adult Medicaid enrollees. In 2009, the State eliminated all adult dental benefits
- 9 to Medicaid clients except emergency dental. Since then, EOA's long-term care disability
- specialist, Mr. Philip Ana, has received calls from the disability and aging community looking
- for assistance for necessary dental work. Often, the dental work required surgery and
- replacement of dentures. In the meantime, the individual had difficulty eating. Mr. Ana looks for

- free or low-cost services and a willing provider. While the individual may be able to find a dental
- 2 provider who is willing to volunteer their time, the cost of testing and materials is not free.
- 3 Restoring dental benefits to Medicaid enrollees is definitely needed. Poor oral health, combined
- 4 with co-existing chronic diseases, have been shown to lead to increased disability and death.
- 5 **Recommendation**: EOA supports this measure provided that its enactment does not reduce or
- 6 replace priorities with the Administration's budget request.
- 7 Thank you for the opportunity to testify.

EMPLOYEES' RETIREMENT SYSTEM
HAWAI'I EMPLOYER-UNION HEALTH BENEFITS TRUST FUND

OFFICE OF THE PUBLIC DEFENDER

STATE OF HAWAI'I
DEPARTMENT OF BUDGET AND FINANCE

P.O. BOX 150 HONOLULU. HAWAI'I 96810-0150 CRAIG K. HIRAI

GLORIA CHANG DEPUTY DIRECTOR

ADMINISTRATIVE AND RESEARCH OFFICE BUDGET, PROGRAM PLANNING AND MANAGEMENT DIVISION FINANCIAL ADMINISTRATION DIVISION OFFICE OF FEDERAL AWARDS MANAGEMENT (OFAM)

WRITTEN ONLY

TESTIMONY BY CRAIG K. HIRAI
DIRECTOR, DEPARTMENT OF BUDGET AND FINANCE
TO THE HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES,
& HOMELESSNESS
ON
SENATE BILL NO. 1294, S.D. 2

March 17, 2022 9:30 a.m. Room 329 and Videoconference

RELATING TO MEDICAID BENEFITS

The Department of Budget and Finance (B&F) offers comments on this bill.

Senate Bill No. 1294, S.D. 2, appropriates an unspecified amount of general funds in FY 23 to the Department of Human Services to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

B&F notes that the FY 23 Executive Supplemental Budget already includes \$3,466,328 in general funds and \$6,728,754 in federal funds in HMS 401's budget in FY 23 to restore certain adult dental benefits.

B&F also notes that, with respect to the general fund appropriation in this bill, the federal Coronavirus Response and Relief Supplemental Appropriations Act requires that states receiving Elementary and Secondary School Emergency Relief (ESSER) II funds and Governor's Emergency Education Relief II funds must maintain state support for:

 Elementary and secondary education in FY 22 at least at the proportional level of the state's support for elementary and secondary education relative to the state's overall spending, averaged over FYs 17, 18 and 19; and Higher education in FY 22 at least at the proportional level of the state's support for higher education relative to the state's overall spending, averaged over FYs 17, 18 and 19.

Further, the federal American Rescue Plan (ARP) Act requires that states receiving ARP ESSER funds must maintain state support for:

- Elementary and secondary education in FY 22 and FY 23 at least at the proportional level of the state's support for elementary and secondary education relative to the state's overall spending, averaged over FYs 17, 18 and 19; and
- Higher education in FY 22 and FY 23 at least at the proportional level of the state's support for higher education relative to the state's overall spending, averaged over FYs 17, 18 and 19.

The U.S. Department of Education has issued rules governing how these maintenance of effort (MOE) requirements are to be administered. B&F will be working with the money committees of the Legislature to ensure that the State of Hawai'i complies with these ESSER MOE requirements.

Thank you for your consideration of our comments.

DAVID Y. IGE GOVERNOR OF HAWAII



STATE OF HAWAI'I

STATE COUNCIL
ON DEVELOPMENTAL DISABILITIES
PRINCESS VICTORIA KAMĀMALU BUILDING

1010 RICHARDS STREET, Room 122 HONOLULU, HAWAI'I 96813 TELEPHONE: (808) 586-8100 FAX: (808) 586-7543 March 17, 2022

The Honorable Representative Ryan I. Yamane, Chair House Committee on Human Services and Homelessness The Thirty-First Legislature State Capitol State of Hawai'i Honolulu, Hawai'i 96813

Dear Representative Yamane and Committee Members:

SUBJECT: SB1294 SD2 Relating to Medicaid Benefits

The Hawaii State Council on Developmental Disabilities **STRONGLY SUPPORTS SB1294 SD2** which appropriates funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

The Council cannot emphasize the importance of dental care services that include preventive, restorative, prosthetic, and emergency services for people with intellectual and developmental disabilities. 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 severe health problems because necessary dental services were not available because of the termination of the Medicaid adult dental benefit coverage in 2008. Compounding these issues is the limited number of dentists on the Neighbor Islands who are available and willing to serve Medicaid enrollees.

Not only does lack of preventative oral care affect one's overall health. It profoundly impacts these individuals' abilities to obtain gainful employment. It is hard to have self-confidence during an interview when you are missing teeth or have poor dental care. Many individuals with intellectual and or developmental disabilities are already at a disadvantage within our current job market; our population does not need poor dental care to add to this issue.

Thank you for the opportunity to submit testimony in strong support of SB1294 SD2.

Sincerely,

Daintry Bartoldus

Executive Administrator

<u>SB-1294-SD-2</u> Submitted on: 3/14/2022 6:01:51 PM

Testimony for HHH on 3/17/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Louis Erteschik	Hawaii Disability Rights Center	Support	Written Testimony Only

Comments:

Support.



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The State Legislature The House Committee on Health, Human Services and Homelessness Thursday, March 17, 2022 9:30 a.m.

TO: The Honorable Ryan Yamane, Chair

RE: Support for S.B. 1294 S.D.2, Relating to Medicaid Benefits

Aloha Chair Yamane and Members of the Committee:

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 over 140,000 members in Hawai'i.

AARP strongly supports S.B. 1294 S.D.2 which appropriates funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

- According to an issue paper on improving dental coverage for older adults, (Henry J. Kaiser Family Foundation, July 2021), nearly one half of the Medicare population (47%) or 24 million beneficiaries 65 years and older, do not have dental coverage.
- Almost half of all Medicare beneficiaries did not have a dental visit within the past year (47%), with higher rates among those who have low incomes (73%), or who are in fair or poor health (63%), as of 2018.
- Average out-of-pocket spending on dental services among Medicare beneficiaries who had any dental service was \$874 in 2018. One in five Medicare beneficiaries (20%) who used dental services spent more than \$1,000 out-of-pocket on dental care.

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. 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 of costly medical care and emergency room visits.

Thank you very much for the opportunity to support S.B. 1294 S.D.2.

Sincerely,

State Director



March 14, 2022

The Honorable Ryan I. Yamane, Chair The Honorable Adrian K. Tam, Vice Chair House Committee on Health, Human Services, & Homelessness

Re: SB 1294 SD2 – Relating to Medicaid Benefits

Dear Chair Yamane, Vice Chair Tam, and Committee Members:

Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 1294, SD2, which appropriates funds to reinstate the basic package of diagnostic, preventive, and restorative dental benefits to adult medicaid enrollees. Effective 12/31/2050.

HMSA supports access to dental coverage and oral health care for our members. We believe that preventive and restorative dentistry services are important as they can decrease potential health care complications for individuals living with chronic diseases, such as heart disease and diabetes.

Thank you for the opportunity to testify in support of SB 1294 SD2.

Sincerely,

Matthew W. Sasaki Assistant Vice President

Government & External Relations

Bill: SB1294, SD 2, Relating to Medicaid Benefits

Hearing Date &Time: Thursday, March 17, 2022, 9:30am

Committees: House Committee on Health, Human Services, and Homelessness

Testifier: Nancy Partika, RN, MPH

Aloha Chair Yamane, Vice-Chair Tam and Members of the House HHH Committee:

My name is Nancy Partika, and I am the Hawaii grassroots representative for OPEN (the Oral Health Progress and Equity Network). I have worked to help identify and address oral health disparities in Hawaii at the community level for the past 5 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 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 newly-completed 2021 JABSOM/HOHC study of ER use statewide for acute oral health conditions, adult Medicaid beneficiaries represent about 25% of Hawaii's population, but they are 47% of all dental services provided by ERs statewide.

Between 2016 and 2020, Medicaid recipients averaged 2,700 emergency room visits per year for acute oral health conditions, totaling \$21,700,000 in charges for outpatient emergency room services alone. Neighbor island ERs on Hawaii island and Kauai have higher rates of ER use for acute dental conditions.

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 heath, and the care of the oral health of chronically ill or pregnant can be another significant potential area for return on investment. We now recognize that not intervening in oral health conditions early and preventively will cost much more later on in unintended direct and indirect costs.

Currently most states now offer adult Medicaid recipients preventive and restorative adult oral health benefits. By adding a comprehensive or limited dental services benefit, Hawaii's adults on Medicaid should be able 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.

The Hawaii MQD-DHS and the State Legislature received the Hawaii-specific fiscal analysis from the Health Policy Institute of the American Dental Association in February 2020 that projected both costs and cost-benefits to restore Hawaii adult dental benefits. Three options for reinstating dental benefits were provided at that time.

It has been 12 years since adult dental benefits (other than emergency) have been accessible, and so we should anticipate that many adults on Medicaid will be needing more than basic/skeletal preventive

dental care. It is therefore recommended that the House HHH Committee advocate for Option 2, which would enable Medicaid recipients to get a wider range of diagnostic, preventive and restorative services. as well as basic prosthodontic and periodontal services, as needed.

The difference in State funding would be \$8,823,781 in state funds for option 2, versus \$3,466,328 in State funds for option 1. Federal funding from would provide the remainder of the costs of the benefits under the Federal Medicaid Assistance Percentage (FMAP).

Limited coverage under option 1 would be capped per recipient and may only cover an annual exam, fluoride treatment, bi-annual cleanings, one set of bite wing X-rays per year and one non-emergency tooth extraction or filling per year. As you can imagine, dental care for someone who has been without any for a long while is likely to exceed this limited benefit. It seems that reinstating coverage to the second option makes more sense, given the high costs paid for poor oral health exacerbated co-conditions and visits to the ER for acute dental care.

What is important to note that this fiscal analysis also projects that over time, additional medical care cost savings estimates range from \$1.9 million per year to \$5.3 million, due to health status improvements in co-occurring health conditions such as diabetes, heart disease, pregnancy, and fewer ER visits for services

Your strong support for SB1294, SD 2 is respectfully requested—Mahalo for this opportunity to testify.

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Summary of Findings for Statewide ER Visits with a Dental-Related Diagnosis: Hawaiii 2016-2020 (JABSOM-HOHC Study-2021)

- 1. There was a total of 29,536 ER visits with a dental related diagnosis by adults aged 21 years and older
- 2. 67% (19,691) of the adult visits had a principal dental diagnosis that they visited the ER
- 3. A significant proportion of the ER visits with a principal dental-related diagnosis were treated:
 - in Honolulu County (56%, 11,118)
 - for those aged 21-44 years old (62%, 12,138)
 - for Medicaid recipients (49%, 9,680)
 - Native Hawaiian/Part Native Hawaiian (24%, 5,018) patients
- 4. A large portion of Medicaid claims for ER visits with a principal diagnosis were submitted for Native Hawaiians/Part Native Hawaiian (31%, 2,991) patients
- 5. Medicaid claims constituted 45% of the cumulative total charges for the ER visits with a principal dental-related diagnosis (\$12.3M/27.5M)
- 6. An average of 10% of patients who visited ER for dental-related conditions revisited the ER at least twice in the same year
- 7. Higher rates of ER visits with a dental-related diagnosis were found for Hawai'i County, Kaua'i County, and in 21-44 year old patients.



March 15, 2022

To: The Honorable Ryan I. Yamane, Chair,

The Honorable Adrian K. Tam, Vice Chair, and

Members of the House Committee on Health, Human Services, and Homelessness

Re: SB 1294, SD 2 – RELATING TO MEDICAID BENEFITS

Hearing: Thursday, March 17, 2022, 9:30 a.m., Room 329 & videoconference

Position: Strong support

Aloha Chair Yamane, Vice Chair Tam, and members of the House Committee on Health, Human Services and Homelessness:

The Health Committee of the Democratic Party of Hawai'i strongly supports SB 1294, SD 2. This measure would restore adult preventative dental services to Medicaid beneficiaries effective upon the effective date of the bill.

For many years, Medicaid included regular preventive dental services for adults and children. Then, in 2009, in her last year in office, Governor Linda Lingle cut funding for adult preventive dental services in Medicaid, leaving only emergency room services limited to pain relief, injuries, trauma, and tooth removal and extraction. Unfortunately, her successors as governors have failed to rectify that decision.

This decision has been an unmitigated moral, fiscal, and logical failure from the very beginning. It has failed to save any money, and it has caused massive amounts of avoidable pain and suffering.



March 17, 2022 Page 2

Oral disease is a significant health problem among many Hawaii residents, affecting their overall health and well-being. Since 2010, Hawaii has received a failing grade of "F" in three oral health report cards published by the Pew Center on the States due to multiple policy and systems issues in the State that have left the oral health of Hawaii's families and children worse than the rest of the nation.

Moreover, Covid-19 has made this bad situation much worse. It has greatly impacted dental care and oral health access in the State. Covid-19 has led to the closure and reduced hours of dental practices except for emergency and urgent services, exacerbating challenges to connect patients to dental care. Because of Covid, many patients have deferred dental visits and timely treatment for their dental needs. Limited care options, and loss of income and employer-sponsored health benefits, have led to increased care in hospital emergency departments, worsening oral health disparities within the Medicaid population, particularly among native Hawaiian and Pacific Islander enrollees.

The disparity of access to dental coverage and oral health care is a health and social justice issue. The lack of preventive and restorative dentistry services for adult Medicaid beneficiaries increases potential health care complications for individuals living with chronic diseases such as diabetes and heart disease. These complications can all lead to increased disability and death.

Moreover, other sources of insurance available in Hawaii tend to fail to cover dental services: commercial dental coverage comes with significant co-pays, is not mandated by Hawaii's Prepaid Health Care Act, and is not a covered benefit for adults under the Affordable Care Act, Medicare, or Medicaid.

The Hawai'i Department of Health's report *Hawaii Oral Health: Key Findings* issued in 2015 revealed that, among low-income adults aged eighteen and over, 51% had experienced tooth loss compared to 32% of higher income adults, and only 52% of the lower income group had made an annual dental visit compared to 82% of those with higher incomes. In addition, Hawai'i fails to meet national recommendations for dental care for women during pregnancy, as only 41% of pregnant women obtain an annual dental visit. The rate for those covered by Medicaid is even lower at 27%, a rate likely depressed by the lack of dental benefits.

Nationally, studies have shown that reducing or eliminating Medicaid adult dental benefits has led to significant increases in dental-related emergency room visits and associated costs. In 2012 alone, Hawai'i Medicaid paid \$4,800,000 for 1,691 adult emergency room visits for preventable oral health problems.



March 17, 2022 Page 3

In Hawai'i, a disproportionate number of adult Medicaid beneficiaries ages twenty-one and older utilize emergency dental services. While these adult Medicaid beneficiaries represented 25% of Hawai'i's population, they represented 56% of all emergency dental services. Just over three thousand emergency room visits for acute oral health conditions occurred in 2016, totaling more than \$17,000,000 in direct costs, a total that has more than doubled since 2007. Data also indicated that rural residents of the State, primarily from the north shore of O'ahu and the islands of Kaua'i and Hawai'i, were more likely than urban residents to go to the emergency room for dental problems.

Recent analysis suggests that investing in dental benefits for Medicaid-enrolled adults will, in the long term, lead to reductions in medical costs financed by Medicaid. In other words, the decision to terminate diagnostic, preventive, and restorative dental services from Medicaid has not only failed to effectuate fiscal savings, but it has backfired, resulting in net fiscal losses of some \$1,900,000 to \$5,300,000 every year since 2009 as compared to what the Medicaid program's dental-related expenditures would have been if the original policies had simply been left in place.

Moreover, these comments merely address the financial failures of this policy decision, and do not address the long-term pain and suffering and adverse effects on the health and well-being of the Medicaid beneficiary population, which has suffered seriously as a result of this ill-considered policy decision.

For this multitude of reasons, adult Medicaid preventative dental services need to be restored, first by this bill, and then as a part of the regular State executive budget. We must emphasize also that the appropriation for this benefit should not be made conditional on any search for other funds. When the State makes an appropriation for Medicaid benefits, the federal government will, as a matter of course, make a matching grant of somewhat more than 100% of the State's appropriation. The release of the State's funds should not be delayed by any search for counterpart funds.

Thank you very much for the opportunity to testify on this very important bill. Please pass it.

Respectfully yours,

Melodie R. Aduja

Chair, Health Committee

/s/ **Melodie R. Aduia**

Democratic Party of Hawai'i

Contact: legislativepriorities@gmail.com (808) 258-8889

|s| Stephen B. Kemble, M.D.

Stephen B. Kemble, M.D. Member of the Hawai'i Health Authority and Member of the Health Committee Democratic Party of Hawai'i

s Marion Poirier, R.N.

Marion Poirier, R.N. Member of the Hawai'i Health Authority and Vice-Chair, Health Committee Democratic Party of Hawai'i

<u>|s| **Alan 98. Burdick, Esq.**</u>

Alan B. Burdick, Esq. Treasurer, Health Committee Democratic Party of Hawai'i



Testimony of

Chaslynn-Nicole Kapuaonalani Gaspar

The University Of Hawaii - PHOCUSED, Hawai'i

March 15, 2022

Current Referral: HHN, FIN

FROM: Chaslynn-Nicole K. Gaspar, PHOCUSED with Hawai'i Appleseed SUBJECT: Testimony: RELATING TO MEDICAID BENEFITS.

Hearing: Bill is scheduled to be heard by HHH on Thursday, 03-17-22 at 9:30 AM in House conference room 329 Via Videoconference.

Chair San Buenaventura, Vice-Chair Ihara, and Members of the Committee on Human Services,

Thank you for the opportunity to provide testimony in **STRONG SUPPORT** of SB 3201.

Purpose: Appropriates funds to reinstate the basic package of diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. Effective 12/31/2050. (SD2)

We respectfully request that the Legislature consider adding the appropriation to the executive budget. Including an appropriation via this measure would only be a one-time appropriation which would not support the necessary continuity of an adult dental program. However, if the appropriation will be via this measure, DHS requests that Section 2 be revised to accurately reflect the appropriation by the means of financing (MOF) or

source of funds

PHOCUSED is a nonpartisan project of the Hawaii Appleseed Center for Law and Economic Justice. It comprises health and human service organizations and their people across Hawai`i. We have been collaborating on advocacy about critical procurement and service delivery issues that directly impact our providers.

We strongly urge you to consider the passage of SB 1294 SD2.

Mahalo, for your consideration.



PHOCUSED IS A PROJECT OF HAWAI'I APPLESEED 733 BISHOP STREET, SUITE 1180 · HONOLULU, HI 96813 · (808) 587-7605 · PHOCUSED.ORG



To: Representative Yamane, Chair Representative Tam, Vice Chair

House Committee on Health, Human Services, & Homelessness

Re: SB 1294 SD2- Relating to Medicaid benefits

9:30 AM, March 3, 2022

Chair Yamane, Vice Chair Tam, and committee members,

On behalf of HCAN Speaks!, thank you for the opportunity to **testify in strong support of Senate Bill 1294 SD2**, relating to Medicaid benefits. We believe that basic coverage is too minimal and will not be sufficient to adequately address the significant needs of adult Medicaid patients, due to 12 years of no preventive and restorative coverage. We request that the amount inserted into the bill reflect a comprehensive benefit.

Since 2009, we have treated oral health like a luxury instead of a need. It is costly to both individuals and the state. Extending dental coverage to patients with chronic health conditions like diabetes and heart disease can lead to cost savings in related areas ofhealth care spending. It's estimated additional medical care cost savings range from \$1.9 million to \$5.3 million.

This is a multi-generation issue. Hawai'i'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. Oral health habits are a family issue and if parents have access to dental prevention services, the whole family will benefit. Our most vulnerable families had this benefit previously and we believe it should be restored.

Oral health is health and reinstating these benefits is a cost-effective, person-centered approach to making our communities healthier. For these reasons, HCAN Speaks! respectfully requests the Committee to support this measure.

Thank you,

Kathleen Algire
Director of Early Learning and Health Policy





HOʻŌLA LĀHUI HAWAIʻI

P.O. Box 3990; Līhu'e, Hawai'i Phone: 808.240.0100 Fax: 808.246.9551

March 15, 2021

COMMITTEE ON HEALTH, HUMAN SERVICES, & HOMELESSNESS

Rep. Ryan I. Yamane, Chair Rep. Adrian K. Tam, Vice Chair

Testimony in Support of SB 1294, SD2

Restoration of Full Adult Dental Medicaid Benefits

Thursday 03-17-2022, 9:00AM CR 329 & Videoconference.

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.

HLH believes that the committee should restore the adult dental benefit to its full capacity and that includes what the program covered in 2009 including restorative services (crowns, dentures, partials, fillings, root canals) along with preventive services (screenings, cleanings, treatments). Without the full range of dental benefits patients will not get the necessary care to maintain their oral health which affects the entire health of the patient.

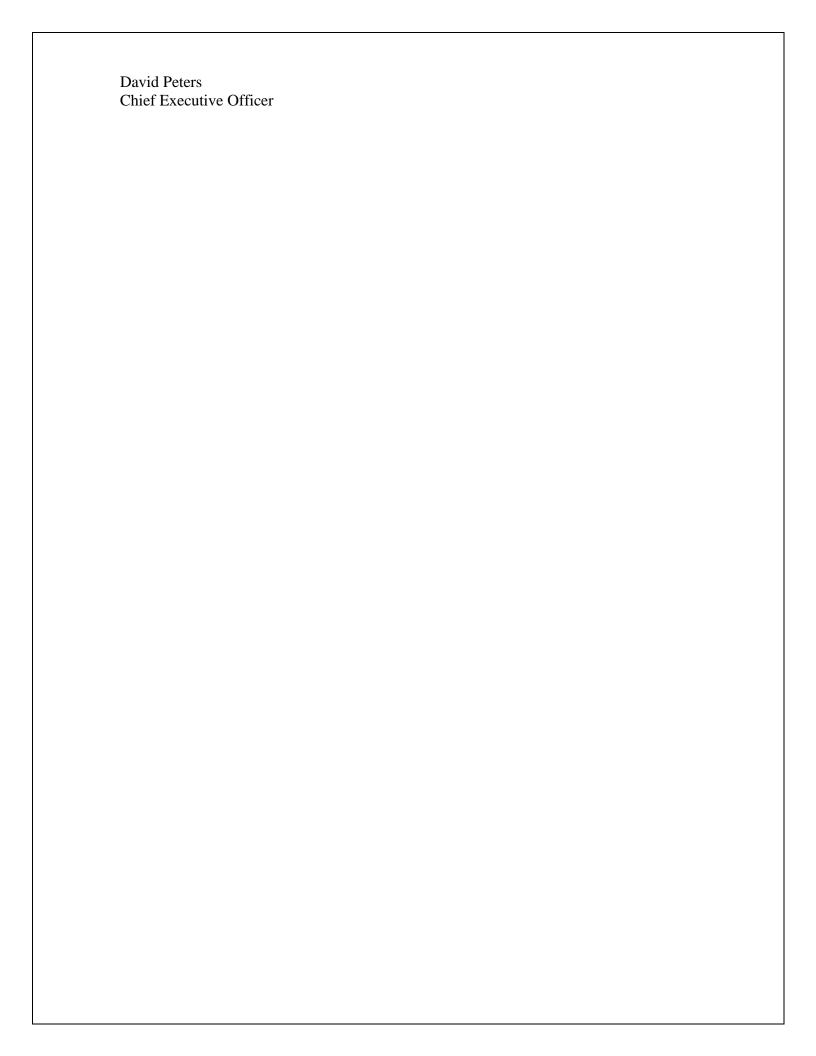
Treating patient in the emergency room for dental care is not financially prudent nor does it address the dental health of the patient as they will still need a dentist upon discharge to manage their long-term treatment. Covering preventive and restorative services are vital to the overall health of the patient.

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. Therefore, it is necessary to include restorative services.

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

Respectfully,

Darle





Testimony to the House Committee on Health, Human Services, and Homelessness Thursday, March 17, 2022; 9:30 a.m. State Capitol, Conference Room 329 Via Videoconference

RE: SENATE BILL NO. 1294, SENATE DRAFT 2, RELATING TO MEDICAID BENEFITS.

Chair Yamane, Vice Chair Tam, 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 <u>SUPPORTS</u> the reinstatement of dental benefits to adult Medicaid enrollees at federally qualified health centers (FQHCs).

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live 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.

The bill, as received by your Committee, would appropriate an unspecified amounts of general funds for fiscal year 2022-2023, respectively, to restore diagnostic, preventative, and restorative dental benefits to adult Medicaid enrollees.

The bill would take effect on December 31, 2050.

Since 2008, the HPCA has consistently urged the reinstatement of this essential benefit. At that time, the Legislature faced enormous fiscal challenges that forced your predecessors to make many difficult decisions. The elimination of adult dental Medicaid benefits was just one of many painful cuts that needed to be made for the good of all. As the economy rebounded, most of the programs cut were reorganized and many were reinstated to ensure that the needs of our citizens are met. Yet, adult dental Medicaid was never returned..

To ensure seamless transition should the Legislature agree to provide the state's portion for the reinstatement of the benefit, the benefit should appropriately be integrated into the State Medicaid Plan. The State would also need to show a continual funding source for this additional benefit.

Testimony on Senate Bill No. 1294, Senate Draft 2 Thursday, March 17, 2022; 9:30 a.m. Page 2

We note that the approval of a "stand alone" bill such as this vehicle would only provide a one-time appropriation for this purpose.

To ensure that the benefit would be eligible for federal match, it would need to be incorporated into the State budget. We note that according to the Budget-in-Brief submitted by the Governor in his Supplemental Budget request, that document contains a provision that indicates that funds for this expanded benefit is indeed contained in the proposed budget bill under Line Item HMS-401. Specifically, the Administration requests \$3,466,328 in general funds and \$6,728,754 in federal funds to "restore and expand... adult dental benefits". (See, 2023 Budget in Brief, pp. 744-745.).

We further note that as part of the Administration's Executive Budget request to the 2017 Hawaii State Legislature, DHS requested \$4,704,480 in general funds and \$7,056,720 in federal funds for fiscal year 2018, and \$9,408,960 in general funds and \$14,113,440 in federal funds for fiscal year 2019 for "the restoration of the adult dental benefits. (**See**, 2018 Budget in Brief, pages 1056-1059.).

In the purpose clause, three options were offered to address the need for dental benefits for Medicaid recipients:

OPTION 1. Basic package of diagnostic, preventative, and restorative services;

OPTION 2. Basic package plus core prosthodontic services; and

OPTION 3. A further expansion to a more robust set of prosthodontic services.

These packages of benefits, and the costs associated, were published by the American Dental Association's Health Policy Institute, in a report dated February 2020. (See, https://www.ada.org/media/project/ada-organization/ada/ada-org/files/resources/research/hpi/hpibrief 0220 1.pdf)

The HPCA asserts that the prolonged damage caused to the oral health of adult dental Medicaid recipients from fourteen (14) years of neglect and apathy by the State will necessitate significant resources to remediate this population. After all, what good are x-rays and cleanings if you don't provide the necessary resources to adequately treat these patients?

The HPCA further proclaims that the State has a moral obligation to provide the most robust package of benefits possible for this underprivileged and underserved population. At the very minimum, until such time as the oral health conditions of Hawaii's adult Medicaid population is stabilized, the benefit package should be at the OPTION 3 level.

Testimony on Senate Bill No. 1294, Senate Draft 2 Thursday, March 17, 2022; 9:30 a.m. Page 3

In sum, the HPCA asks this Committee approve an increase to Line Item HMS-401 in House Bill No. 1600, and that the amount of the increase be equal to the OPTION 3 level of benefits recommended in the American Dental Association's report dated February 2020.

As a postscript, the House Committee on Finance reported out House Bill No. 1600, House Draft 1, on February 14, 2022. (See, House Standing Committee Report No. 1027-22) Please note that on Page 36, lines 11-12 of House Bill No. 1600, House Draft 1, the appropriation for HMS401 was increased to \$993,036,474 for fiscal year 2022-2023. Comparing this amount to what was requested by the Administration (See, attached materials), it would appear that the House DID NOT include the appropriation for the reinstatement of adult dental Medicaid benefits.

As of writing, the budget worksheets for House Bill No. 1600, House Draft 1, have not been made public and as such, there is no way for the HPCA to confirm whether the funds for Medicaid reinstatement were not added to the budget. However, we wanted to bring this to your attention as this issue continues through the legislative process.

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@hawaiipca.net.

PROGRAM APPROPRIATIONS

					AP	PRO	PRIATIONS	
_	ITEM NO.	PROG. ID	PROGRAM	EXPENDING AGENCY	FISCAL YEAR 2021-2022	M O F	FISCAL YEAR 2022-2023	M 0 F
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17 18 19 20 21 22 23 24 25	19. OF	HMS236	- CASE MANAGEMENT	FOR SELF-SUFF HMS HMS HMS	CICIENCY 289.63	* A [— * N [—	289.63 15,952,885 16,750,036 228.37 25,977,079 25,893,369 30,237	3 * 5A 5A 7 * 9N
26 27 28 29 30	20. OF	HMS238 PERATING	- DISABILITY DETER	MINATION HMS	50.00 8,290,218		50.00 8,348,886 8,859,927	[44]
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39 40 41 42	22. OF	HMS237 PERATING	- EMPLOYMENT AND T	ATG RAINING HMS	15,880,241 469,505		15,880,241 469,505	

EXECUTIVE SUPPLEMENTAL BUDGET

REPORT: S61-A

PROGRAM ID:
PROGRAM STRUCTURE NO:
PROGRAM TITLE:
HEALTH CARE PAYMENTS

(IN DOLLARS)

0.46	5,642,082,383	5,616,041,040	2,834,061,863	26,041,343	2,808,020,520	2,808,020,520		2,808,020,520	TOTAL PROGRAM COST
•	,	:	:	:	:	:			TOTAL TEMP POSITIONS
									TOTAL PERM POSITIONS
	13,563,842	13,563,842	6,781,921		6,781,921	6,781,921		6,781,921	INTERDEPT. TRANSF
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3	26,949,590	26,949,590	13,474,795		13,474,795	13,474,795		13,474,795	OTHER FEDERAL FUNDS
•		:	:	:	:	**			
,	3,617,996,311	3,607,819,092	1,814,086,765	10,177,219	1,803,909,546	1,803,909,546		1,803,909,546	FEDERAL FUNDS
•		:			:	:			
٠	2,753,320	2,753,320	1,376,660		1,376,660	1,376,660		1,376,660	SPECIAL FUND
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	1,980,819,320	1,964,955,196	998,341,722	15,864,124	982,477,598	982,477,598		982,477,598	GENERAL FUND
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0.46	5,642,082,383	5,616,041,040	2,834,061,863	26,041,343	2,808,020,520	2,808,020,520		2,808,020,520	TOTAL OPERATING COST
	5,642,082,383	5,616,041,040	2,834,061,863	26,041,343	2,808,020,520	2,808,020,520		2,808,020,520	OTH CURRENT EXPENSES
PERCENT CHANGE	JM BIENNIUM	CURRENT	RECOMMEND APPRN	ADJUSTMENT	APPRN	APPRN APPRN	ADJUSTMENT	APPRN	PROGRAM COSTS
	VIUM TOTALS	BIEN		FY 2023 -			FY 2022		

Narrative for Supplemental Budget Requests FY 2023

Program ID: HMS 401
Program Structure Level: 06 02 03 05

Program Title: HEALTH CARE PAYMENTS

A. Program Objective

To ensure that qualified low-income and disabled individuals and families are provided appropriate health or long-term care services that meet their needs.

B. Description of Request

- Request to add \$9,948,756 in general funds to reallocate funds for Home and Community-based Services (HCBS).
- Request to add \$2,449,040 in general funds and \$3,448,465 in federal funds to extend coverage of post-partum benefits.
- Request to add \$3,466,328 in general funds and \$6,728,754 in federal funds to restore and expand of adult dental benefits.

C. Reasons for Request

- Section 9817 of the American Rescue Plan Act (ARPA) provides states with a temporary 10-percentage point increase to the Federal Medical Assistance Percentage (FMAP) for certain Medicaid expenditures for HCBS from April 1, 2021 to March 31, 2022. States must use this additional funding to supplement and not supplant HCBS spending to enhance, expand, or strengthen HCBS through March 31, 2024. This request accounts for the savings accrued from the 10-percentage point FMAP increase on HCBS expenditures during the current fiscal year and preserves the ability to spend these additional funds per federal requirements in the future fiscal years.
- ARPA Section 9812 gives states the option to extend Medicaid post-partum coverage from 2 months post-partum to 12 months post-partum, beginning on April 1, 2022, for a period of 5 years. This request will provide extended coverage of post-partum benefits for women who would not otherwise be eligible for coverage under the low-income adult category after 2 months post-partum.
- 3. This request provides Medicaid-enrolled adults a basic dental benefit, including diagnostic, preventive, and restorative services. Hawaii is 1 of 16 states that provide no dental coverage or emergency dental services only. Providing comprehensive dental benefits to Medicaid-enrolled adults has been shown to reduce costly emergency department visits for dental conditions, result in health care savings for people with chronic conditions, and positively impact an enrollee's ability to successfully interview for a job.

D. Significant Changes to Measures of Effectiveness and Program Size

The COVID-19 pandemic has had a tremendous negative effect on Hawaii's local economy, resulting in a significant increase in Medicaid enrollment. In addition, the continuous coverage requirement in the Families First Coronavirus Relief Act prevents the disenrollment of any current Medicaid enrollees, except for a few limited reasons.



To: Chair Ryan Yamane

Vice Chair Adrian Tam

House Committee on Health, Human Services, & Homelessness

From: David W. Heywood, Health Plan CEO

UnitedHealthcare Community Plan Hawaii

Re: SB 1294 SD2, Relating to Medicaid Benefits; **In Support**

March 17, 2022; Conference Room 329

UnitedHealthcare (UHC) serves approximately 59,000 QUEST Integration (Medicaid) and 37,500 Medicare Advantage members in Hawaii. We also provide Medicare Part D, Medicare Supplemental, and other health programs/services in the islands. Our team is comprised of over 400 employees across the islands with offices in Honolulu, Kahului, and Hilo.

UHC **supports** SB 1294 SD2, which appropriates funds to reinstate the basic package of diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. Poor oral health is one of the more important issues facing our state, particularly with the adult Medicaid population. There is a clear relationship between preventative dental care and the deterrence of serious medical conditions. This investment in adult dental benefits not only improves the overall wellness for an underserved population of Hawaii's most vulnerable residents, but it will also lead to cost savings to the entire healthcare system.

We strongly urge the passage of SB 1294 SD2. Thank you for the opportunity to submit testimony on this measure.



March 14, 2022

The Honorable Ryan I. Yamane, Chair
The Honorable Adrian K. Tam, Vice Chair
House Committee on Health, Human Services, & Homelessness

Senate Bill 1294 SD2 - Relating to Medicaid Benefits

Dear Chair Yamane, Vice Chair Tam, and Members of the Committee:

The Hawaii Association of Health Plans (HAHP) appreciates the opportunity to testify on SB 1294 SD2. HAHP is a statewide partnership that unifies Hawaii's health plans to improve the health of Hawaii's communities together. A majority of Hawaii residents receive their health coverage through a plan associated with one of our organizations.

HAHP believes that preventive and restorative dental care improves health care outcomes, especially for those living with chronic disease such as diabetes and heart disease. HAHP supports the legislature's intent to restore funding for adult dental care benefits for the Medicaid population.

Thank you for allowing us to testify expressing our **support** for SB 1294 SD2.

Sincerely,

HAHP Public Policy Committee

cc: HAHP Board Members



American College of Obstetricians and Gynecologists District VIII, Hawaiʻi (Guam & American Samoa) Section

TO: House Committee on Health, Human Services & Homelessness

Representative Ryan I. Yamane, Chair Representative Adrian K. Tam, Vice Chair

DATE: Thursday, March 17, 2022

FROM: ACOG Hawai'i Section

Reni Soon, MD, MPH, FACOG, Chair

Re: SB1294 SD2 – Relating to Medicaid Benefits

Position: SUPPORT

The Hawai'i Section of the American College of Obstetricians and Gynecologists (ACOG HI) strongly supports SB1294_SD2 which would restore adult dental Medicaid benefits. Including dental benefits for Medicaid recipients creates an opportunity to improve the health of Hawai'i's most vulnerable patient populations: pregnant women receiving Medicaid.

Poor dentition is a risk factor contributing to pregnancy complications such as preterm birth, preeclampsia (high blood pressure in pregnancy), and low birth weight of the newborn. These conditions are costly with consequences often including prolonged hospitalizations for moms and newborns. Facilitating access to dental care through Medicaid coverage not only provides a direct benefit in reducing these types of pregnancy complications but additionally would provide an entry point into routine preventative dental care.

Pregnancy is a crucial time to establish preventative health care that optimally includes routine dental cleanings and treatment. Less than half of all pregnant women in the US report having dental cleanings during pregnancy, and this percentage is even lower among the most socially disadvantaged pregnant women (American Public Health Association, 2020). As poor dentition and dental disease can worsen in pregnancy, it is critical to provide access and coverage for patients to obtain care.

As of January 2021, 32 US States covered preventative services such as cleanings for adult Medicaid enrollees. We urge you to add Hawai'i to this list and ask you consider the health of pregnant patients in particular by adding dental benefits to adult Medicaid in Hawai'i.

Oral health is health. Reinstating these benefits is a cost-effective, person-centered approach to making our communities healthier. Please support adult dental Medicaid benefits as a direct way to improve the health of pregnant patients and newborns.

Mahalo for this opportunity to testify.

OFFICERS

John Bickel, President Alan Burdick, Vice President Keola Akana Dave Nagajji, Treasurer Doug Pyle, Secretary

Melodie Aduja Juliet Begley

Jan Lubin John Miller Jenny Nomura Stephanie Fitzpatrick Stephen O'Harrow

DIRECTORS

Bill South Zahava Zaidoff

P.O. Box 23404 Honolulu Hawaii 96823

MAILING ADDRESS

March 15, 2022

TO: Chair Yamane and Members of the HHH Committee

RE: SB 1294 SD2 Relating to Medicaid Benefits

Support for a Hearing on March 17

Americans for Democratic Action is an organization founded in the 1950s by leading supporters of the New Deal and led by Patsy Mink in the 1970s. We are devoted to the promotion of progressive public policies.

Americans for Democratic Action Hawaii supports this bill as it would restore Medicaid dental benefits. We believe this will save money in the long run and eliminate unnecessary pain and suffering. From the Hawaii Public Health Institute we find the following information:

Drastic cuts in 2009 eliminated essential dental services for Medicaid enrollees and reduced coverage to emergency only (extraction and pain management). Hawai'i has continued to suffer the consequences:

- Recent data show that between 2016 and 2020 there was a total of 29,536 ER visits with a dental related diagnosis among adults aged 21 years and older.
 - 67% (19,691) of these visits had a principal dental diagnosis as the reason they visited the ER.
- In that same time period, Medicaid claims constituted 45% of the cumulative total charges for the ER visits with a principal dental-related diagnosis, about \$12.3 million.
- This does not include the total charges for secondary dental-related diagnoses.
- Higher rates of ER visits with a dental-related diagnosis were found for Hawai'i County and Kaua'i County.
- A large portion of Medicaid claims for ER visits with a principal diagnosis between 2016 and 2020 were submitted for Native Hawaiians/Part Native Hawaiian (about 31%, or 2,991) patients.
- An average of 10% of patients who visited ER for principal dental-related conditions revisited the ER at least twice in the same year.

Thank you for your consideration.

Sincerely,

John Bickel, President



Testimony of Jonathan Ching Government Relations Director

Before:

House Committee on Health, Human Services, & Homelessness The Honorable Ryan I. Yamane, Chair The Honorable Adrian K. Tam, Vice Chair

> March 17, 2022 9:30 a.m. Via Videoconference

Re: SB 1294, SD2, Relating to Medicaid Benefits

Chair Yamane, Vice Chair Tam, and committee members, thank you for this opportunity to provide testimony on SB 1294, SD2, which appropriates state general funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees

Kaiser Permanente Hawai'i SUPPORTS SB 1294, SD2.

Kaiser Permanente Hawai'i is Hawai'i's largest integrated health system that provides care and coverage for approximately 265,000 members. Each day, more than 4,400 dedicated employees and more than 650 Hawai'i Permanente Medical Group physicians and providers come to work at Kaiser Permanente Hawai'i to care for our members at our 20 medical facilities, including Moanalua Medical Center, providing high-quality care for our members and delivering on our commitment to improve the health of the 1.4 million people living in the communities we serve.

Kaiser Permanente Hawai'i supports policies that ensure all Hawaii residents have access to affordable, high-quality health care. Further, Kaiser Permanente supports "whole-person care," including the provision of access to services and resources that address beneficiaries' physical health, mental health and social needs. We know that adults with poor oral health, often because they lack dental coverage, often struggle to manage other chronic conditions. Furthermore, poor oral health and gum disease (periodontitis) has been associated with an increased risk of developing heart disease and bacterial infection in the blood stream.

To that end, we endorse the provision of coverage through Medicaid for a full range of needs, including dental services. Oral health is a crucial part of overall physical, psychological, social, and economic wellbeing.





During the COVID-19 pandemic, we have seen a dramatic increase in Medicaid members; however, comprehensive benefits for Medicaid enrollees was eliminated in 2009 and reduced coverage to emergency only (extraction and pain management).

Given that Medicaid beneficiaries comprise some of the most vulnerable, complex patients, the Medicaid program should play a role in addressing these needs. Kaiser Permanente Hawai'i supports SB 1294, SD2 because it is an 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.

Mahalo for the opportunity to testify on this important measure.





Testimony in Support of SB1294 HD1 to Restore Adult Dental Medicaid Benefits

Rep. Ryan I. Yamane, Chair Rep. Adrian K. Tam, Vice Chair Committee on Health, Human Services, & Homelessness

March 15, 2022

Aloha Representative Yamane, Representative Tam, and Committee Members:

Hawaii Dental Service (HDS), the state's leading dental benefits provider and advocate for improved access to oral healthcare, strongly supports SB1294 to restore dental benefits for adults who are Medicaid beneficiaries.

The oral health community and Hawaii's legislature have made significant progress this session to address the gap in oral healthcare for Hawaii's adult Medicaid beneficiaries. For nearly 13 years, these adults have not had diagnostic, preventive, and restorative dental services simply because of their socioeconomic status and have been limited to reduced coverage for emergency only (extraction and pain management) – those most impacted are Native Hawaiians, Pacific Islanders, and Neighbor Island residents.

Oral health is essential to overall health. Extending dental coverage to underserved adult Medicaid beneficiaries with chronic health conditions like diabetes and heart disease would change the future course of their health. However, we would like to encourage the restoration of this benefit to be approached in a thoughtful, compassionate manner with the goal of creating sustained change.

We know there are different benefit levels and funding scenarios this committee is considering. We strongly believe that for this benefit to have a meaningful impact, there must be a corresponding level of coverage to meet the needs of adult Medicaid beneficiaries. For more than a decade, they have had to forgo preventive and restorative care, and we expect there will be a need for services beyond diagnostic, preventive, and restorative services.

We also recommend this committee adopt a long-term view and address the need for ongoing, annual funding for this adult Medicaid dental program. This will prevent having to start from ground zero each legislative session.

HDS joins with others in the Hawaii Oral Health Coalition to advocate for those who may not be able to advocate for themselves. With your support, we believe this can be the year of change and an opportunity to show our state's commitment to addressing health disparities and our ability to come together and coalesce around the issues that impact the most vulnerable in our community.

Telephone: (808) 521-1431 Toll-Free: 1-800-232-2533

Fax: (808) 529-9368

Mahalo for allowing HDS to share our concerns and for your support.

Sincerely,

Dr. Diane S.L. Paloma President & CEO

Hawaii Dental Service 900 Fort Street Mall, Suite 1900 Honolulu, Hawaii 96813-3705



Testimony in Support of SB1294, SD2

March 15, 2022

Dear Chair Yamane, Vice Chair Tam and Respected Members of the House Committee on Health, Human Services, & Homelessness

The Hawaii Dental Hygienists' Association (HDHA) strongly **SUPPORTS SB 1294**, **SD2**. 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. This provision would directly benefit Hawaii's seniors, as well as adults with developmental and physical disabilities, allowing them to gain access to necessary oral health treatment.

HDHA cannot emphasize enough the importance of dental care services that include preventive, restorative, prosthetic, and emergency services for all residents of Hawaii. As prevention specialists, dental hygienists are keenly aware of how oral health, or the lack thereof, can affect all aspects (physical, emotional, psychological, and social) of our lives. Time and again, research has shown that oral health has a direct correlation to over-all health. The mouth, is not a separate entity unto itself, it is connected to and shares a circulatory system with the rest of the body. Ignoring or limiting oral healthcare places Hawaii's adult Medicaid population at significant risk for increased health problems.

As the largest association representing Hawaii's licensed dental hygienists', HDHA strongly **SUPPORTS SB 1294, SD2 if Option 2 or 3 presented in the measure were passed.** Option 1 offers minimal coverage and will not be sufficient to adequately address the significant needs of the adult Medicaid population, due to the previous 12 years of no preventive or restorative coverage.

Thank you for your consideration.



Date: March 17, 2022

To: The Honorable Ryan I. Yamane, Chair

The Honorable Adrian K. Tam, Vice-Chair

Committee on Health, Human Services & Homelessness

From: Peggy Mierzwa, Community and Government Relations

RE: SB1294 SD2 Relating to Medicaid Benefits-Support

AlohaCare appreciates the opportunity to provide testimony in **SUPPORT of SB1294 SD2**. This measure would appropriate funding to Department of Human Services to restore basic adult dental benefits, including diagnostic, preventative and restorative services to Medicaid members.

Founded in 1994 by Hawai`i's community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 80,000 Medicaid and dual-eligible health plan members on all islands. We are the only health plan in Hawai`i that exclusively serves Medicaid beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality health care for all. We believe that health is about supporting whole-person care.

For over a decade, Hawai`i's Medicaid program has covered only emergency dental services for adult beneficiaries. Preventative and restorative dental services, as cleanings and x-rays, are not covered for adults. As a result, individuals resort to the emergency room in order to get treatment for complicated infections and excruciating pain. Many times the individual has little options beyond tooth extractions in order to address problem areas. Many of these catastrophic events could have been avoided had preventative care been available.

Oral care has a significant impact on a person's overall health. Individuals with chronic diseases such as diabetes and heart disease lead to increased disability and death. A lack of preventive services commonly leads to gum disease, which is associated with an increased risk of heart disease. Poor dental health increases the risk of a bacterial infection in the blood stream, which can affect the heart valves; tooth loss patterns are connected to coronary artery disease; strong connection between diabetes and cardiovascular disease and evidence that people with diabetes benefit from periodontal treatment.¹ Pregnant women are at much greater risks to periodontal disease. Periodontitis has been associated with poor pregnancy outcomes, including preterm birth and low birth weight.² Women with poor dental health are more than 3 times more likely to have a child with cavities.³

 $^{^{1}\,\}underline{\text{https://www.mayoclinic.org/healthy-lifestyle/adult-health/expert-answers/heart-disease-prevention/faq-}}\\2005798\underline{6}$

² https://www.cdc.gov/oralhealth/publications/features/pregnancy-and-oral-health.html

³ https://www.cdc.gov/oralhealth/publications/features/pregnancy-and-oral-health.html



As written, basic coverage provided in the bill is inadequate for meeting the needs of Medicaid enrollees. Adult dental benefits were terminated from Hawai`i Medicaid coverage in 2009. After 13 years of oral health neglect, greater coverage is necessary to address the many complications that arise from years with no preventative care. We ask you increase the funding to at provide at minimum the Option 2 coverage, which includes the basic preventative package plus core prosthodontic services to better serve those who have had no oral health care for 13 years, and who are now are faced with catastrophic oral health complications.

We further request the funding be included in the state budget to ensure financial stability for this important and necessary benefit.

Restoring dental coverage to adults with Medicaid will allow people to gain good oral health through prevention and maintenance for avoidable health conditions. Adequate oral health coverage ensures whole person health, so people are able to care for their families, stay out of emergency rooms, and live fulfilling lives. This benefit will positively impact the overall well-being our communities.

We are grateful for your consideration of this important measure.



March 15, 2022

COMMITTEE ON HEALTH, HUMAN SERVICES, & HOMELESSNESS

Rep. Ryan I. Yamane, Chair Rep. Adrian K. Tam, Vice Chair

Testimony on Senate Bill No. 1294 S.D. 2

RELATING TO MEDICAID BENEFITS

Submitted by: Richard Bettini, President & CEO

The Waianae Coast Comprehensive Health Center strongly supports that funding be provided through SB 1294 S.D. 2 to restore basic adult dental benefits to Medicaid enrollees in the State of Hawaii.

Restoring support is sorely overdue to address the 42% of the adult population on the Waianae Coast that has not had a dental visit.

The Hawaii Primary Care Association, on behalf of community health centers, has consistently urged the reinstatement of this essential benefit that was eliminated when the state fiscal status was in jeopardy. As the economy rebounded, many programs were reinstated, but not adult dental benefits.

It is critical to restore adult dental benefits to address dental health needs and its relationship to other health conditions which impact upon one's social determinants of health.

Please note that the basic coverage (Option 1) is too minimal and will not be sufficient to adequately address the significant needs of adult Medicaid patients, due to 12 years of no preventive and restorative coverage. The preference is to have adequate funding allocated to the state budget to encourage continuity of funding for coverage.

Please consider the importance of this bill to the health and well-being of our adult Medicaid enrollees. Mahalo.



TESTIMONY IN SUPPORT OF SB 1294 SD2: RELATING TO ADULT DENTAL MEDICAID BENFITS

TO: House Committee on Health, Human Services, & Homelessness

FROM: Rob Van Tassell, President and CEO, Catholic Charities Hawai'i

Hearing: Thursday, 3/17/22; 9:30 AM; via videoconference

Chair Yamane, Vice Chair Tam, and Members, Committee on Health, Human Services, and Homelessness:

Thank you for the opportunity to provide testimony **in strong support** of **SB1294 SD2**, which appropriates funds to reinstate the basic package of diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. I am Rob Van Tassell, with Catholic Charities Hawai'i.

Catholic Charities Hawai'i (CCH) is a tax exempt, non-profit agency that has been providing social services in Hawai'i 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 Hawai'i. Catholic Charities Hawai'i has a long history of working in the areas of affordable housing and homelessness.

CCH strongly supports restoring these dental benefits to adults on Medicaid. Dental coverage and oral health care are needed not only for people to work and enjoy life, but are important to reduce health care costs in the future. Many Medicaid beneficiaries may have chronic conditions which could be impacted without adequate dental care. Hawaii families are living on tight budgets, especially the elderly, and so will put off dental care until there may be an emergency or other serious health impacts. Since eliminating these benefits for adults in 2009, Hawai`i has seen an increase in emergency room utilization and an increase in costs for preventable conditions.

We also are concerned about healthcare equity. Without these benefits, our Native Hawaiians, Pacific Islanders and neighbor island residents are at greater risk for poorer oral health and have limited access to oral health care.

Medicaid serves Hawaii's most vulnerable populations. It is time to restore these dental benefits. Catholic Charities Hawaii urges your strong support for these dental benefits.

Please contact our Legislative Liaison, Betty Lou Larson at <u>alohabettylou@hotmail.com</u> or (808) 373-0356 if you have any questions.







Papa Ola Lōkahi

894 Queen Street Honolulu, Hawaii 96813

Phone: 808.597.6550 ~ Facsimile: 808.597.6551

Papa Ola Lokahi

is the Native Hawaiian Health Board established in 1988 to improve the health and well-being of Native Hawaiians.

Board of Directors Member Organizations

Hoʻola Lahui Hawaii

Hui No Ke Ola Pono

Hui Malama Ola Na 'Oiwi

ALU LIKE

Ke Ola Mamo

E Ola Mau

University of Hawai'i

Hawai'i State Department of Health

Na Pu'uwai

Office of Hawaiian Affairs

Executive Director

Sheri-Ann Daniels, EdD

House Committee on Health, Human Services, & Homelessness

Representative Ryan Imane, Chair Representative Adrian Tam, Vice-Chair

Thursday, March 17, 2022, 9:30 AM, Videoconference

RE: SB 1294 SD 2 – Relating to Medicaid Benefits

Position: STRONG SUPPORT

Dear Chair Imane, Vice-Chair Tam, and Members of the Committee on Health, Human Services, & Homelessness,

Papa Ola Lōkahi testifies in **STRONG SUPPORT** of SB 1294 SD 2, which would provide funds to increase access to oral health care by restoring diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. The 2009 elimination of dental services from Medicaid appears to be linked to severe impacts, including increased emergency department utilization and more costly oral health concerns. Data from 2006 and 2012 in Hawai'i shows that Medicaid emergency department visits increased by 67%, translating into hospital charges rising from about \$4 million to over \$8.5 million.¹

Papa Ola Lōkahi supports efforts to provide protective and preventive measures through person-centered policies that guard and sustain the health of our communities. This bill calls for funding that impacts the Medicaid population; oral disease risk is higher for those who suffer from chronic conditions such as heart disease, emphysema, diabetes, hepatitis C, and obesity.² Native Hawaiians experience shorter life expectancies and higher mortality rates due to these chronic conditions and are overrepresented in the Medicaid population. Thus, dental services impact Native Hawaiian health disproportionately.

Native Hawaiians hold a holistic view of health, in which the health of the people, land and spiritual realms are interconnected. This perspective lends to envisioning health care policies, programs, and delivery that provide resources for all aspects of health and ensure equitable access to services. SB 1294 SD 2, as a step to those larger goals, works to provide a critical set of services to those most in need.

Thank you for the opportunity to testify in **strong support** of this critical legislation.

Papa Ola Lōkahi, the Native Hawaiian Health Board, authorized by the federal Native Hawaiian Health Care Improvement Act, is charged with raising the health status of Native Hawaiians to the highest possible level, which we achieve through strategic partnerships, programs, and public policy.



To: House Committee on Health, Human Services and Homelessness

Time/Date: 9:30 a.m., March 17, 2022

Location: State Capitol via Video Conference

Re: SB 1294, SD2, Relating to Medicaid Benefits

Aloha Chair Yamane, Vice-Chair Tam, and members of the Committee:

The Hawaii Dental Association (HDA) is in **support** of SB 1294, SD2, relating to Medicaid benefits. This bill appropriates funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

Oral health is essential for overall health and wellness. Oral health is linked with systemic health conditions and diseases as well as employment opportunities, economic stability, and social connectedness. One cannot be healthy without a healthy mouth. Yet thousands of low income adults in Hawai'i cannot afford the oral health care they need to stay healthy, work, socialize, and live pain free. Part of this disparity is driven by gaps in dental coverage in federal and state policy, particularly dental coverage for adults enrolled in Medicaid. For adults who rely on Medicaid, being able to afford oral health care could be the key to recovering their health or getting a new job. Notably, the people most likely to get sick and lose jobs during the pandemic are also the people who face the biggest barriers to oral health and are among those who would most benefit from improved oral health coverage in Medicaid. For these reasons, we strongly support this measure.

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 1294, SD2.

¹ Vujicic M, Fosse C, Reusch C, Burroughs M. Making the case for adults in all state Medicaid programs. Health Policy Institute White Paper. American Dental Association in partnership with Community Catalyst and Families USA. July 2021



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

March 17, 2022 9:30 a.m.

Via Videoconference and Conference Room 329

To: The Honorable Chair Ryan I. Yamane

The Honorable Vice Chair Adrian K. Tam

House Committee on Health, Human Services, & Homelessness

From: 'Ohana Health Plan

Rachel Wilkinson, Government Relations Manager

Re: SB1294 SD2, Relating to Medicaid Benefits; In Support

'Ohana Health Plan is pleased to offer our strong **support** of SB1294 SD2, which appropriates funds to reinstate the basic package of diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

'Ohana Health Plan is a wholly owned subsidiary of Centene Corporation, a leading multi-national healthcare enterprise committed to helping people live healthier lives. Since 2008, 'Ohana Health Plan has provided government-sponsored managed care services to families—from keiki to kupuna—and individuals with complex medical needs primarily through QUEST Integration (Medicaid), Medicare Advantage and Medicare Prescription Drug Plans across the state.

Poor oral health is one of the most important issues facing our state, particularly with the Medicaid population. In 2009, drastic budget cuts were made and essential dental services for Medicaid enrollees were reduced to emergency-only extractions and pain management. To date, Hawaii is one of only 13 states that provide emergency dental care only. And while oral health can often be overlooked, there is a clear correlation between oral health and overall health.

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 SB1294 SD2 and ask that you consider:

- 1. Funding the Option 2 coverage to better address the oral health needs of this population and
- 2. Please include the funding in the state budget.

Thank you for the opportunity to submit testimony on this measure.



March 16, 2022

House Committee on Health, Human Services, & Homelessness

Strong SUPPORT of fully funding Adult Dental Medicaid Benefits in SB1294, SD2

Aloha Chair Yamane, Vice-Chair Tam, and Members of the House Committee on Health, Human Services, & Homelessness:

Please SUPPORT the comprehensive restoration of Adult Dental Medicaid Benefits by placing an appropriate amount in the State budget for sustainable funding.

Sustained funding will improve the delivery of oral health services and rebuild the infrastructure to remedy over a decade of untreated oral disease in Hawaii.

A comprehensive restoration of benefits would be Option 3 as indicated in the previous bill version. It is also important to note that the cost estimates from the ADA HPI study were based on 120,000 adults enrolled in Medicaid. The 2022 enrollment exceeds 200,000 adults.

Please consider these points and **SUPPORT the comprehensive restoration** of Adult Dental Medicaid Benefits as a **budget line item for DHS/MQD**.

- Oral health is a vital part of overall health.
- The funding of this budget item will begin to rebuild the Medicaid Dental Provider infrastructure.
- Decreased funding results in less access, less services, and devastating health outcomes.
- The cost estimates based on the list of covered services clearly show that any option less than 3 would result in patients unnecessarily losing teeth should DHS choose to align covered services with the HPI study.
 - Options 1 and 2 do not cover root canals, partial dentures, or crowns. The only options for replacement of missing teeth would be the consideration of removing more teeth to have a full denture (this is a highly undesirable option by patients and providers).
 - According to the HPI study, if funding levels are less than Option 3, DHS would have to budget for a limited range of services. This would result in the unnecessary loss of teeth.

This isn't just about a dental plan, this is the right thing to do to improve overall health outcomes for a population facing the most challenging health and living conditions.

Mahalo,

Anthony S. Kim, DMD

Dental Director

Waimanalo Health Center

Testimony Presented Before the House Committee on Health, Human Services, & Homelessness Thursday, March 17, 2022 at 9:30 a.m.

Βv

Jerris Hedges, MD, Dean and
Lee Buenconsejo-Lum, MD, FAAFP
Associate Dean for Academic Affairs & DIO, UH JABSOM
John A. Burns School of Medicine
And
Michael Bruno, PhD
Provost
University of Hawai'i at Mānoa

SB 1294 SD2 – RELATING TO MEDICAID BENEFITS

Chair Yamane, Vice Chair Tam, and members of the committee:

Thank you for the opportunity to present testimony today. The John A. Burns School of Medicine (JABSOM) **supports SB 1294 SD2** which appropriates funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

Oral disease is a significant health problem for many Hawai'i residents, affecting their overall health and well-being. 223,438 adult Medicaid recipients have no diagnostic, preventive, or restorative dental coverage. In 2009, the State terminated all preventive and restorative dental care services for adult Medicaid recipients and reduced coverage to emergency-only care that is limited to pain relief, injuries, trauma, and tooth removal and extraction. The lack of preventive and restorative dentistry services for adult Medicaid beneficiaries increases potential health care complications for persons with co-existing chronic diseases, such as diabetes and heart disease. Poor oral health, combined with co-existing conditions like these, have been shown to lead to increased disability and death.

In Hawai'i, a disproportionate number of adult Medicaid enrollees ages twenty-one to forty-four use the emergency department for emergency dental services. Between 2016-2020, 29,536 adults aged 21 and older visited the emergency department with a dental-related diagnosis, and forty-nine percent (49%) of emergency department visits with a principal dental-related diagnosis were Medicaid recipients. On average during 2016-2020, Medicaid enrollees made two thousand seven hundred emergency department visits per year for acute oral health conditions, totaling \$21,700,000 in charges for outpatient emergency services only. Native Hawaiians and Pacific Islanders were disproportionately represented in emergency department visits for dental-related diagnoses.

Thank you for the opportunity to provide testimony on this bill.

SB-1294-SD-2

Submitted on: 3/16/2022 8:54:09 AM

Testimony for HHH on 3/17/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Tercia L. Ku	Individual	Support	Written Testimony Only

Comments:

Passing this bill is of utmost importance to disparate communities here in Hawaii. The time is right for us to do the right thing and serve those in need.

Mahalo.

TESTIMONY FOR SB 1294, SD2 RELATING TO MEDICAID BENEFITS

Date of Hearing/Time:

March 17, 2022, @ 9:30 am

Committee:

Committee on Health, Human Services, & Homelessness

Testifier:

Andrew Tseu, DDS, JD

March 15, 2022

Dear Chair Ryan I. Yamane, Vice Chair Adrian K. Tam, and Committee Members:

Thank you for the opportunity to testify in strong support on SB1294, SD2 relating to adult dental Medicaid benefits.

My name is Dr. Andrew Tseu and currently employed as a community center dentist. I am submitting testimony as a Hawaii resident. 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 essential to overall health. Oral health is a crucial part of a person's physical, psychological, social and economic health and well-being. Extending dental coverage to patients with chronic health conditions like diabetes and heart disease can lead to cost savings in related areas of health care spending. Missing or broken teeth also create social barriers for adults to find and maintain gainful employment in our community.

We are currently one of only 13 states that provide emergency care only. As a result of our past decade of minimal coverage for dental care, Hawaii's emergency rooms have been overutilized for otherwise preventable dental conditions to the tune of thousands of visits per year, costing millions of dollars annually.

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.

I strongly advocate for Option 2, which would enable Medicaid recipients to get a wider range of diagnostic, preventive, and restorative services. as well as basic prosthodontic and periodontal services, as needed.

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

SB-1294-SD-2

Submitted on: 3/16/2022 12:38:08 AM

Testimony for HHH on 3/17/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Jennifer Azuma Chrupalyk	Individual	Support	Written Testimony Only

Comments:

Thank you! Please make sure that Hui No Ke Ola Pono in Wailuku gets their share. They are helping people and have maxed out appointments. The people need to feel confident about their smile, in order to feel confident enough to go for a better job. This right here is a hand up and not a hand out, so thank you.

Additionally, if you did not know before, the conditions of a person's teeth are highly indicative of future health issues, therefore if you want to cut back on overall medical coverage costs, it would be prudent to increase dental coverage. In the long run, that is a favorable decision for your accounting department, and a win-win between the State and the Citizens.

Dear Hawaii Senators, Chair and members of the HHH Committee,

Re: SB1294 SD2

A dentist's testimony working in Hawaiian Community Health for 7 years, and a founding member of HOHC, Hawaii oral health coalition.

Many of us in the oral health medical field are very appreciative that you have become a noble champion for this vision! On behalf of thousands of your constituents that whom this bill can help smile again Mahalos Mahalos!

*Note, most relevant to today's HHH Committee meeting please scroll down to red text below.

After 27 years of being a dentist I've learned that every person deserves a healthy smile, enough teeth for chewing nutritious food, and to have their mouth free of pain, infection, and disease. One day our state charter may read, each of us living in Hawaii have a human right to life, liberty, a healthy smile and the ability to enjoy a plate lunch!

My name is Dr. Don Sand DDS. I have been working in the community health system of Hawaii for the last 7 years. I enjoyed practicing cosmetic dentistry in California for 20 years since most all my patients could afford dental care. But until moving to the islands I have never seen so many deserving people suffer from the lack of dental care.

Since transitioning my career to help the smiles of the underserved in Hawaii I have grown more passionate about the gift we can give each of our patients every day. Yet, I am often in pain over finding so many adults, especially Kupuna who do not have any kind of dental insurance. I'm still at a loss as to why the most overall most affected by the lack in Adult Medicaid coverage seems to be our Native Hawaiians, especially in North Shore Oahu. While working clinically in the Community Health care model I have also been able to visit and consult with about 8 of the dental directors of the 14 community health centers, in Molokai, Lanai, Maui, the Big Island and 7 on Oahu.

Oral health is the only disease in our modern times that is both preventable and curable. However when dental care is not available to a large percentage of our population then they will have untreated oral health disease that result in many collateral problems affecting a person's health, suffering/pain, mental health, low self-esteem, social alienation and often adds to a loss of personal financial health.

Dental infections not only result in unnecessary ER visits, but patients with chronic tooth and gums diseases are not able to chew food properly. This lack of nutrition results in exacerbating many whole-body diseases like cardiovascular diseases, diabetes and may result in decreasing the bodies' immune system. Untreated tooth infections can lead to facial infections which may result in death.

Without dental treatment our Island people cannot be competitive to get a job when they have no teeth to smile with in an interview. Having shame of their bad teeth results in loss of needed socializing needed to maintain emotional and mental health. Without adult Medicaid many deserving people and Kupuna continue to have teeth that could be saved become lost without insurance to help the costs to repair their teeth.

With an adequately funded adult Medicaid plan an early diagnosis and early dental treatment can resolve many problems that are small, then many teeth often can be fixed with very little cost. If easy treatment is unavailable then often there are huge costs from deferring dental treatment. One good example, is when one small cavity is diagnosed. If the cavity is fixed early it could have a low-cost treatment such as a simple filling. But if untreated this simple problem will continue to damage the tooth and could result in a root canal, a crown, a gum surgery that could cost \$3,000 or more when scaled to private practice fees. If the finances are still not available at that point then the tooth is most often removed. Without adult Medicaid there are minimal provisions helping adults even replace the missing teeth. This sad scenario can be repeated as 32 nightmares for the patient as each tooth that can be saved is lost.

We understand that our Representatives and our Senators must make difficult allocations with limited state funding to prioritize hundreds of sectors. With so much at stake we are hoping that your finances committees are getting a chance to share expert advice on the best packages that give the best ROI.

In the ADA, American Dental Association briefing on reinstatement options: by selecting option 3 many adults in Hawaii will have their health smiles back. Option 2 will make a difference but not for everyone. Due to the huge amount of oral health problems from the 12 years of deferred preventive dental access it would seem that Option 1 is not a practical enough of an investment and may result in taking one step forward, fixing a few teeth but then a return to sliding 3 steps backwards.

Option 1 seems to be so low that it might be like budgeting a housing contractor to fix all the leaking roofs of the Hawaiian homeland resident houses but having only enough money to take off the old roofs but not enough money to put a new roof back.

As the rain now floods the whole house many other lower budget items get neglected like fixing the plumbing that is causing black mold. For our dental treatment plans on new patients who have not seen a dentist in years a wise plan may need to happen in stages. Inadequate funding may allow us to address a limited number of acute problems but tie our hands on fixing many smaller cavities that will turn acute in a few years. Using an automobile analogy, working to fix damaged transmissions that did not get oil preventively without a follow up preventive program will result in the new transmission failing again in a few years. Like a car's systems where each system is connected to the function of all the other systems needing to drive, the oral health is intimately connected to all of the body systems needed for health. However for various unclear reasons the financial reimbursement systems have ended up disconnecting the value of oral health. There is a large disconnect in the medical systems understanding the critical nature of investing in a healthy mouth that is so close to the human brain, large nerves, and thousands of blood vessel and lymph system connection.

Option 2 appears to trigger a significant Federal investment in the oral health of our Island people and Option 3 will change the future and quality of thousands of lives for years to come.

As part of this bill it seems wise to appropriate reasonable funds to hire a skeletal team to help manage and implement the reinstated plan. This team, even working part time can gather the data to study the effectiveness of the existing programs and to study the best practices of successful adult Medicaid programs from other states. The team in the first stage would mirror in part the dental departments in fully funded State Public Health departments. This implementation team can be task with several key objectives:

- 1. Acquire the data to measure the **drop in ER hospital visits**
- 2. Acquire some basic data based on metrics showing the **impact of dental health** of our patient's returning. Relevant markers such as "caries risk assessment", number of teeth with active decay, diagnostic level of periodontal disease
- 3. Create an advisory board made of representatives from all the oral health stake holders: Hawaii chapter of CMS, Hawaii Dental Association, HOHC, our State Public Health department, Legislative Committees such as HHH, leaders in our 3rd party service programs like Quest and Aloha Care, Hawaii dental directors from our 14 community health centers, our State Primary Care Association, Papa Ola Lokahi and Ke Ola Mamo, the best practices division of NNOHA, National Network of Oral Health Access, a 5,000 member organization of dental thought leaders and CHC directors and a coalition of our private practice dentist who accept Medicaid reimbursements.

- 4. Work to **improve the current programs** from a QI and QA point of view (quality assurance and quality improvement)
- 5. **Increase capacity**. Research and develop business plans to increase capacity to see more patients in both the CHC system as well as private practice. Develop test deliver models and study basic metrics of effectiveness in order to report to all stake holders including our state legislature financial committees, the WAM committee and our Representative and our Senators.

With the lack of adequate oral health care for our people of Hawaii many will continue to lose their self-esteem, they will lose their ability to get nutrition, they will lose job opportunities, lose social opportunities, they lose the joy of being pain free and they lose many key aspects of quality life.

Having a healthy smile is worth millions for each deserving adult life that this bill touches. If there is one big thing that we can do within our influence today and that is to leave a humanitarian legacy where we can commit to a wise practical and systematic plan to restore the priceless oral health and well-being of our Island people.

Malama Pono,
Dr. Don Sand DDS
drsandsmiles@gmail.com
54-135 Honomu place, Hauula, HI 96717, cell 808-428-1572

Please Pass SB1294

Aloha Chair Yamane, Vice Chair Tam and committee members,

I support SB 1294 relating to adult dental Medicaid benefits. This bill appropriate funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

Poor oral health is linked with systemic health conditions and diseases as well as negatively affects employment opportunities, economic stability, and social connectedness. Funding for adult Medicaid dental coverage will improve the oral health of our community.

I am a non-practicing, retired dentist who has seen the deterioration of mouths of these underprivileged adults. It affects them nutritionally as well as with the loss of their self-esteem. Can you help them? Thank you.

Sincerely,

Chester Naka

Support for Senate Bill 1294

DATE: Thursday, March 17, 2022

TIME: 9:30 A.M.

PLACE: VIA VIDEOCONFERENCE

Conference Room 329

State Capitol

415 South Beretania Street

Representative Ryan Yamane, Chair Representative Adrian Tam, Vice Chair Committee on Health, Human Services, and Homelessness

Re SB1294 SD2 Medicaid Benefits

Aloha Chair Yamane, Vice Chair Tam, and committee members,

Please pass SB 1294, a measure that will provide funding for adult dental Medicaid coverage. As Hawaii recovers from the COVID-19 pandemic and economic downturn, oral health coverage is a critical gap in our healthcare system. For adults who rely on Medicaid, being able to afford oral health care could be the key to recovering their health or getting a new job. Yet too many adults are left without oral health coverage, exacerbating health inequities. This bill would provide Medicaid coverage for preventive and restorative dental benefits would go a long way toward addressing those inequities.

Mahalo!

NEIL NUNOKAWA

Aloha Chair Yamane, Vice Chair Tam and committee members,

I support SB 1294 relating to adult dental Medicaid benefits. This bill appropriate funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

Poor oral health is linked with systemic health conditions and diseases as well as negatively affects employment opportunities, economic stability, and social connectedness. Funding for adult Medicaid dental coverage will improve the oral health of our community.

Funding this has long been overdue for this vulnerable population.

Please pass this important bill for the oral health of our community.

Mahalo,

Dr. Dayton Lum

Aloha Chair Yamane, Vice Chair Tam and committee members,

I support SB 1294 relating to adult dental Medicaid benefits. This bill appropriate funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees.

Poor oral health is linked with systemic health conditions and diseases as well as negatively affects employment opportunities, economic stability, and social connectedness. Funding for adult Medicaid dental coverage will improve the oral health of our community.

Please pass this important bill for the oral health of our community.

Mahalo,

Steven Kumasaka, DDS

DATE: Thursday, March 17, 2022

TIME: 9:30 A.M.

PLACE: VIA VIDEOCONFERENCE

Conference Room 329

State Capitol

415 South Beretania Street

Representative Ryan Yamane, Chair Representative Adrian Tam, Vice Chair Committee on Health, Human Services, and Homelessness

Re SB1294 SD2 Medicaid Benefits

Aloha Chair Yamane, Vice Chair Tam, and committee members,

Dental health is as vital as medical health. The two should not be exclusive.

Please pass SB 1294, a measure that will provide funding for adult dental Medicaid coverage. As Hawaii recovers from the COVID-19 pandemic and economic downturn, oral health coverage is a critical gap in our healthcare system. For adults who rely on Medicaid, being able to afford oral health care could be the key to recovering their health or getting a new job. Yet too many adults are left without oral health coverage, exacerbating health inequities. This bill would provide Medicaid coverage for preventive and restorative dental benefits would go a long way toward addressing those inequities.

Mahalo!

Sincerely,

Ha T. Kim, DMD

Please Pass SB1294

Aloha Chair Yamane, Vice Chair Tam and committee members,

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Please pass this important bill for the oral health of our community.

Mahalo,

Darrell Teruya, DDS

Support for Senate Bill 1294

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TIME: 9:30 A.M.

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State Capitol

415 South Beretania Street

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Mahalo!

Wesley Choy DDS

Please advance SB 1294

To: House Committee on Health, Human Services, and Homelessness

Time/Date: 9:30 a.m., March 17, 2022

Location: State Capitol via Video Conference

Re: SB 1294, SD2, Relating to Medicaid Benefits

Aloha Representative Yamane, Representative Tam and members of the Committee!

I am writing to support SB 1294. There is a clear link between Medicaid policy on dental coverage for adults and cost barriers to dental care, dental care utilization, oral health status, and employability. A recent study concluded that when adults gain dental coverage through Medicaid, they report improved oral health and employability.

This bill will provide important resources necessary to address health inequities in our state. Please advance SB 1294.

Mahalo for the opportunity to testify on this important measure.

Dr. Lili Horton

Please Pass SB1294

Aloha Chair Yamane, Vice Chair Tam and committee members,

I support SB 1294 relating to adult dental Medicaid benefits. This bill appropriate funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. Poor oral health is linked with systemic health conditions and diseases as well as negatively affects employment opportunities, economic stability, and social connectedness. Funding for adult Medicaid dental coverage will improve the oral health of our community.

Please pass this important bill for the oral health of our community.

Thank you, Bonnie Lau, DDS

Support for Senate Bill 1294

DATE: Thursday, March 17, 2022

TIME: 9:30 A.M.

PLACE: VIA VIDEOCONFERENCE

Conference Room 329

State Capitol

415 South Beretania Street

Representative Ryan Yamane, Chair Representative Adrian Tam, Vice Chair Committee on Health, Human Services, and Homelessness

Re SB1294 SD2 Medicaid Benefits

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Mahalo! Emi Eno-Orikasa To: House Committee on Health, Human Services, and Homelessness

Time/Date: 9:30 a.m., March 17, 2022

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This bill will provide important resources necessary to address health inequities in our state. Please advance SB 1294.

Mahalo for the opportunity to testify on this important measure.

Marsha Y Iwahiro-Tanabe DDS

Please Pass SB1294

Aloha Chair Yamane, Vice Chair Tam and committee members,

I support SB 1294 relating to adult dental Medicaid benefits. This bill appropriate funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. Poor oral health is linked with systemic health conditions and diseases as well as negatively affects employment opportunities, economic stability, and social connectedness. Funding for adult Medicaid dental coverage will improve the oral health of our community.

Please pass this important bill for the oral health of our community.

Mahalo, Amy Ogawa, DMD

Support for Senate Bill 1294

DATE: Thursday, March 17, 2022

TIME: 9:30 A.M.

PLACE: VIA VIDEOCONFERENCE

Conference Room 329

State Capitol

415 South Beretania Street

Representative Ryan Yamane, Chair Representative Adrian Tam, Vice Chair Committee on Health, Human Services, and Homelessness

Re SB1294 SD2 Medicaid Benefits

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Mahalo!

Jo Ann Chang DDS

Please advance SB 1294

To: House Committee on Health, Human Services, and Homelessness

Time/Date: 9:30 a.m., March 17, 2022

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Re: SB 1294, SD2, Relating to Medicaid Benefits

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This bill will provide important resources necessary to address health inequities in our state. Please advance SB 1294.

Mahalo for the opportunity to testify on this important measure.

Sincerely, David Sumikawa Aloha Chair Yamane, Vice Chair Tam and committee members,

Please Pass SB1294

I support SB 1294 relating to adult dental Medicaid benefits. This bill appropriate funds to restore diagnostic, preventive, and restorative dental benefits to adult Medicaid enrollees. Poor oral health is linked with systemic health conditions and diseases as well as negatively affects employment opportunities, economic stability, and social connectedness. Funding for adult Medicaid dental coverage will improve the oral health of our community.

Please pass this important bill for the oral health of our community.

Mahalo, Alvin Ngoap DATE: Thursday, March 17, 2022

TIME: 9:30 A.M.

PLACE: VIA VIDEOCONFERENCE

Conference Room 329

State Capitol

415 South Beretania Street

Representative Ryan Yamane, Chair Representative Adrian Tam, Vice Chair Committee on Health, Human Services, and Homelessness

Re SB1294 SD2 Medicaid Benefits

Aloha Chair Yamane, Vice Chair Tam, and committee members,

Please pass SB 1294, a measure that will provide funding for adult dental Medicaid coverage. As Hawaii recovers from the COVID-19 pandemic and economic downturn, oral health coverage is a critical gap in our healthcare system. For adults who rely on Medicaid, being able to afford oral health care could be the key to recovering their health or getting a new job. Yet too many adults are left without oral health coverage, exacerbating health inequities. This bill would provide Medicaid coverage for preventive and restorative dental benefits would go a long way toward addressing those inequities.

Mahalo! Curt S. Shimizu, DDS To: House Committee on Health, Human Services, and Homelessness

Time/Date: 9:30 a.m., March 17, 2022

Location: State Capitol via Video Conference Re: SB 1294, SD2, Relating to Medicaid Benefits

Aloha Representative Yamane, Representative Tam and members of the Committee!

I am writing to support SB 1294. There is a clear link between Medicaid policy on dental coverage for adults and cost barriers to dental care, dental care utilization, oral health status, and employability. A recent study concluded that when adults gain dental coverage through Medicaid, they report improved oral health and employability.

This bill will provide important resources necessary to address health inequities in our state. Please advance SB 1294.

Mahalo for the opportunity to testify on this important measure.

Sincerely, Patsy Fujimoto DATE: Thursday, March 17, 2022

TIME: 9:30 A.M.

PLACE: VIA VIDEOCONFERENCE

Conference Room 329

State Capitol

415 South Beretania Street

Representative Ryan Yamane, Chair Representative Adrian Tam, Vice Chair Committee on Health, Human Services, and Homelessness

Re SB1294 SD2 Medicaid Benefits

Aloha Chair Yamane, Vice Chair Tam, and committee members,

I am in support of HB 1754 and SB 1294. As a pediatric dentist, I am always committed to the oral health of my special needs patients. Many of these patients remain in my practice until adulthood since no other provider would be comfortable treating them. These adult special needs patients would benefit from the adult dental Medicaid legislation by providing them necessary care when they are no longer eligible under their parent's dental plan. Please help this vulnerable population and support HB 1754 and SB 1294. Thanking you in advance for your consideration.

Mahalo!

Dr. Lynn Fujimoto, Associate Director NYU Langone Post Doctoral Programs in Pediatric Dentistry, Hawaii Site



To: The Honorable Ryan I. Yamane, Chair The Honorable Adrian K. Tam. Vice Chair

Members, House Committee on Health, Human Services, & Homelessness

From: Jacce Mikulanec, Director, Government Relations, The Queen's Health Systems

Date: March 17, 2022

Re: Support for SB 1294 SD2 – 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 1294 SD2, which would allow for the appropriation of funds to reinstate the basic package of diagnostic, preventative, and restorative dental benefits to adult Medicaid enrollees. Restoration of these funds to provide comprehensive oral health coverage to adults in Medicaid helps avert unnecessary health care costs associated with emergency visits, reduces our State's overall dental spending, and has been shown to help the overall employment and economic security of enrollees.

Annually our Punchbowl facility cares for over 5000 patients who need dental procedures; of those served, roughly half are Medicaid enrollees or uninsured. Our services include preventative oral care, treatment of dental diseases, and higher acuity dentistry (dental procedures that can only be done in a hospital based clinic setting).

Thank you for allowing The Queen's Health Systems to testify in support of SB 1294 SD2.



TO: Chair Yamane, Vice Chair Tam and Members of the House Committee on Health, Human Services and Homelessness

FROM: Ryan Kusumoto, President & CEO of Parents And Children Together (PACT)

DATE/LOCATION: March 17, 2022; 9:30 a.m., Conference Room 329/Videoconference

RE: <u>TESTIMONY IN SUPPORT OF SB 1294 SD 2– RELATING TO MEDICAID</u> BENEFITS

We ask you to support SB 1294 which appropriates funds to reinstate the basic package of diagnostic, preventive, and restorative dental benefits to adult medicaid enrollees.

As one of Hawaii's social service providers, serving over 17,000 clients annually, we have a vested interest in helping Hawaii's resident to thrive. Thriving individuals and communities are healthy individuals and communities. For many of our clients, having access to preventative and restorative dental benefits would greatly benefit them – physically, mentally, emotionally and socially. Oral health affects overall health and reinstating these benefits is a cost-effective, person-centered approach to making our communities healthier.

Founded in 1968, Parents And Children Together (PACT) is one of Hawaii's not-for-profit organizations providing a wide array of innovative and educational social services to underresourced families. Assisting more than 17,000 people across the state annually, PACT helps families identify, address and successfully resolve challenges through its 20 programs. Among its services are: early education programs, domestic violence prevention and intervention programs, child abuse prevention and intervention programs, child hood sexual abuse supportive group services, child and adolescent behavioral health programs, sex trafficking intervention, poverty prevention and community strengthening programs.

Thank you for the opportunity to testify in **support of SB 1294**, please contact me at (808) 847-3285 or rkusumoto@pacthawaii.org if you have any questions.

SB-1294-SD-2

Submitted on: 3/16/2022 10:45:43 AM

Testimony for HHH on 3/17/2022 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Melanie Maykin	Individual	Support	Written Testimony Only

Comments:

Dear Chairperson Yamane and Vice Chairperson Tam,

I strongly urge you to pass SB 1294. I am a maternal-fetal medicine physician caring for high risk pregnancies within the state. Like nearly half of all births in the nation, a large portion of our pregnant patients and their births in Hawaii are publicly insured. Dental disease is a known risk factor for obstetric complications including preterm birth. Therefore, restoring adult dental Medicaid benefits would certainly enable pregnant individuals to access dental care for both prevention and treatment, which may impact their pregnancy outcomes.

Although the deleterious effects of oral disease on pregnancy is not well known, I'd like to share one of many real patient experiences that highlights this issue. I was caring for a 30 year old, Ms. A, who came to the hospital in preterm labor at 29 weeks, almost 3 months before she was due. This patient had Type I Diabetes which poses great risk to both her and her baby's well-being. On further evaluation, this patient was in diabetic ketoacidosis, which is when the body produces very high levels of acids which can lead to coma and even death. Unfortunately, Ms. A had to be delivered premature due to her condition and her baby had to go to the neonatal intensive care unit. The only identifiable culprit that triggered the acidosis and possibly in turn, the preterm labor, was a tooth infection. Ms. A had a history of tooth infections but the resources for her dental care were limited.

Reinstating adult dental medicaid benefits would benefit so many people in our state, including pregnant individuals and their babies.

Thank you for this opportunity to submit testimony,

Melanie Maykin, MD







HAWAI'I ORAL HEALTH COALITION

Date: March 17, 2022

To: The Honorable Representative Ryan I. Yamane, Chair

The Honorable Representative Adrian K. Tam, Vice Chair

Re: Support for SB1294 SD2, Relating to Medicaid Benefits

Hrg: March 17, 2022 at 9:30am - Conference Room 329 & via Videoconference

The Hawai'i Oral Health Coalitionⁱ, covened by the Hawai'i Public Health Institute, is in **support of SB1294 SD2**, relating to the reinstatement adult dental benefits to Medicaid enrollees.

SB1294 SD2 appropriates funds to the DHS to restore basic diagnostic, preventive, and restorative dental coverage to adult Medicaid enrollees. In a 2021 survey conducted by Ward Research for HIPHI^{II}, 9 in 10 registered Hawaii voters (92%) strongly agreed that preventative dental benefits should be included in adult Medicaid coverage. Additionally, 38 health and community organizations have expressed support for the reinstatement of dental coverage.

Oral health is critical to 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.

Unfortunately, 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 Statesⁱⁱⁱ. Drastic cuts in 2009 eliminated essential dental services for Medicaid enrollees and reduced coverage to emergency only (extraction and pain management).

As a consequence of these cuts, many in Hawai'i and across the nation have turned to emergency rooms for oral health care. The ADA reported in 2016 that ER visits nationwide continued to increase in 2012, costing the US health care system \$1.6 billion per year at an average cost of \$749 per visitiv. In Hawai'i, recent data' show that between 2016 and 2020 there was a total of 29,536 ER visits with a dental related diagnosis among adults aged 21 years and older, with an average of 10% of patients who visited ER for principal dental-related conditions having revisited the ER at least twice in the same year. Sixty-seven percent (19,691) of these visits had a principal dental diagnosis as the reason they visited the ER. In that same time period, Medicaid claims constituted 45% of the cumulative total charges for the ER visits with a principal dental-related diagnosis, about \$12.3 million. This does not include the total charges for secondary dental-related diagnoses. An estimated 79% of ER dental visits could be diverted to community settings, saving about 48% of the cost of each visit^{vi}.

SB1294 SD2 is a necessary health equity measure. The lack of coverage for diagnostic, preventative, and restorative dental services has had a disparate impact on Native Hawaiian and Pacific Islander populations, and those on Neighbor Islands, who are at greater risk for poor oral health and limited access to oral health care. Hawai'i County and Kaua'i County saw the state's highest rates of ER visits with a dental-related diagnosis, and a large portion of Medicaid claims for ER visits with a principal diagnosis between 2016 and 2020 were submitted for Native Hawaiians/Part Native Hawaiian (about 31%, or 2,991) patients.

In 2020, the Health Policy Institute of the American Dental Association published a specific fiscal analysis for Legislative consideration about the costs versus cost-savings in reinstating preventive and restorative dental benefits for adults on Medicaid^{vii}. This analysis highlights three funding options for coverage ranging from basic to comprehensive. The federal government does match up to 50% of the state's investment in reinstating diagnostic, preventative and restorative dental coverage for all adult Medicaid recipients and, to date, 34 states do offer limited or comprehensive benefits for its adult Medicaid recipients^{viii}.

In order to adequately address the high needs of this population, due to the lack of access to preventive and restorative care since 2009, adults on Medicaid will require greater coverage than what is offered in Option 1, as detailed in the ADA-HPI analysis. While covering exams, cleanings, and limited restorations is a step in the right direction, patients may continue to seek dental care from emergency departments across the state, or simply defer care due to continued lack of restorative care.

We strongly support the reinstatement of diagnostic, preventive, and restorative dental coverage for adults in Hawai'i enrolled in Medicaid and respectfully ask you to pass this important measure with careful consideration for what services and strategy will most effectively and sustainably address the oral health needs of this population. Thank you for the opportunity to testify.

Mahalo,

Patrick Donnelly

Statewide Oral Health Coalition Manager

Hawai'i Public Health Institute

ⁱ The Hawai'i Oral Health Coalition is community driven 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 Hawai'i Public Health Institute that summarizes findings from a phone survey among n=810 Hawaii registered voters (+/-3.3 margin of error) conducted between October 26 to November 30, 2021. A copy of the results are available upon request.

iii Hawai'i Oral Health: Key Findings, Hawai'i Department of Health. August 2015.

iv Emergency department use for dental conditions continues to increase. Health Policy Institute Research Brief. American Dental Association. April 2015.

^v Laulima Data Alliance Hawai'i inpatient and Outpatient dental ER data (2016-2020). Accessed October 12, 2021.

vi, vii Estimating the Cost of Introducing Comprehensive Medicaid Adult Dental Benefits in Hawai'i, Health Policy Institute Research Brief. American Dental Association. February 2020.

viii Medicaid Adult Dental Benefits Coverage by State, Center for Health Care Strategies, Inc., September 2019.

LATE *Testimony submitted late may not be considered by the Committee for decision making purposes.



HAWAII MEDICAL ASSOCIATION

1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814 Phone (808) 536-7702 Fax (808) 528-2376 www.hawaiimedicalassociation.org

HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES, & HOMELESSNESS

Representative Ryan I. Yamane, Chair Representative Adrian K. Tam, Vice Chair

Date: March 17th, 2022

From: Hawaii Medical Association

Elizabeth England MD, Vice Chair, HMA Legislative Committee Elizabeth Ann Ignacio MD, Chair, HMA Legislative Committee

Re: SB1294 SD2; RELATING TO MEDICAID BENEFITS

Position: Support

Recognizing the profound impact dental health has on the overall well-being of our patients, the Hawaii Medical association is in strong support of SB1294. The benefits of increasing dental insurance coverage were seen across the country after the Affordable Care Act supported Medicaid expansion with the option to include dental benefits¹. In states that included dental coverage, there was improved access to dental care, reduction in untreated dental disease, and increased rates of flossing. States that did not provide dental benefits had higher rates of tooth loss².

Dental disease disproportionately affects vulnerable, low-income communities³. Providing dental coverage is an imperative step towards reducing this disparity. The Center for Disease Control (CDC) performed a large data review of dental health outcomes after dental services for children were expanded under Medicaid. This increase in coverage led to reduction in dental caries and tooth decay, with the most significant improvements found in children from low-income families⁴.

While associated with an initial investment of finances, providing dental care can lead to cost savings. Without an affordable means to seek preventative measures, patients often seek care for dental concerns in the emergency department where the availability of high-end medical resources increases the cost of care. Providing dental benefits has been shown to reduce the number of dental related ED visits and lead to cost savings⁵. Unemployed beneficiaries of dental insurance reported that having dental coverage facilitated their job search, while employed members noted improved job performance⁶.

Over 20 years ago, former US Surgeon General David Satcher recognized the impact of dental health on medical heath, stating "you cannot be healthy without oral health". Poor dentition and gum disease are associated with dangerous conditions including heart disease, pneumonia, heart infections, premature births, and low birthweight. Chronic conditions also impact oral health and well-being, including diabetes, HIV, and osteoporosis⁷. Addressing one without the other leaves places patients at risk of inadequate treatment of both.

Dental and physical health are inextricably intertwined. We cannot protect our community's health without including care for dental health. Thank you for allowing the Hawaii Medical Association to testify in strong support of this measure.

Continued

HAWAII MEDICAL ASSOCIATION



1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814 Phone (808) 536-7702 Fax (808) 528-2376 www.hawaiimedicalassociation.org

REFERENCES

- 1. Medicaid State Plan Amendments | Medicaid.gov. (2022). Retrieved 17 March 2022, from https://www.medicaid.gov/medicaid/medicaid-state-plan-amendments/index.html
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- 5. Vujicic M, Fosse C, Reusch C, Burroughs M. Making the case for adults in all state Medicaid programs. Health Policy Institute White Paper. American Dental Association in partnership with Community Catalyst and Families USA. July 2021. Available from: https://www.ada.org/-/media/project/ada-organization/ada/adaorg/files/resources/research/hpi/whitepaper 0721.pdf.
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- 7. Oral health: A window to your overall health. (2022). Retrieved 17 March 2022, from https://www.mayoclinic.org/healthy-lifestyle/adult-health/in-depth/dental/art-20047475



1250 Connecticut Ave. NW, Suite 202 Washington, DC 20036 (888) 512-OPEN (6736) OPENoralhealth.org

Item: SB1294 SD2 (Funds for Option 2 dental coverage for adults on Medicaid)

Hearing Date & Time: Thursday, March 17, 2022, 9:30am

Committee: House Health, Human Services, & Homelessness

Testifier: Ifetayo Johnson, Executive Director, Oral Health Progress and Equity Network, Inc. (OPEN)

To the Honorable Chair Yamane, Vice-Chair Tam, Members of the Committee on Health, Human Services, & Homelessness:

The Oral Health Progress and Equity Network (OPEN) is a national collaborative with thousands of members working for oral health, health equity, and social justice. OPEN works to elevate the importance of oral health to overall health and advocates for good oral health for everyone.

OPEN members have been following, with much interest, the legislative discussions on dental care benefits for Medicaid recipients and its potential to reduce oral health related emergency room visits in Hawaii (HB 1600-DHS/MQD HMS 401). OPEN enthusiastically supports the adoption of Option 2 in the bill and respectfully requests your consideration for this option.

According to a longitudinal study published in the Journal of Dental Hygiene poor oral health is costly at every age level and has a negative impact on learning, employment, and chronic diseases.

"Poor oral health may lead to life-long problems; ... Adults with poor oral health are less likely to be employed than those with good oral health and are more likely to develop serious health conditions and chronic diseases." - Journal of Dental Hygiene (Vol. 91, No5, p26)

OPEN requests your support of Option 2 and the allocation of funds in the line-item budget under DHS/MQD HMS 401 to provide sustainable comprehensive dental coverage for adult Medicaid recipients. The more comprehensive dental benefits outlined in Option 2 will help mitigate the oral health needs that have accumulated over the last decade. The limited dental benefits in Option 1, though helpful, may prove insufficient for recipients who need more extensive care. This unmet need may drive recipients with a wider array of oral health care issues to seek relief at the emergency room.

Fiscal projections indicate that Option 2 will provide larger savings in medical care costs than Option 1 through reductions in emergency room utilization and co-morbidity risks. Additional savings will result from a stronger workforce and improved quality of life. Providing comprehensive oral healthcare is an investment in the future of Hawaii.

Hawaii is clearly one of the most beautiful places on earth. The only things most beautiful than the islands are the smiles of its Ohana. Mahalo for your continued effort to improve the lives of the people of Hawaii.

To: House Committee on Health, Human Services, & Homelessness

Hearing Date/Time: Thursday, March 17, 2022, 9:30 AM

Re: SB1294 SD2

Dear Chair, Vice Chair, and committee members,

Thank you for the opportunity to *testify in support* on SB1294 SD2 relating to adult dental Medicaid benefits. I strongly support this bill and urge funding at the Option 2 level.

In 2009, Hawaii eliminated diagnostic, preventive and restorative dental services for adults on Medicaid. Hawaii is currently one of only 13 states that provide emergency care only. Since 2009, we have seen increased emergency department (ED) utilization, particularly by Medicaid recipients, and increased costs related to otherwise preventable conditions.

The Hawaii Med-QUEST Division and the State Legislature received the Hawaii-specific fiscal analysis from the Health Policy Institute of the American Dental Association in February 2020 that projected both costs and cost benefits to restore Hawaii adult dental benefits. Three options for reinstating dental benefits were provided at that time.

It is recommended that the House advocate for Option 2, which would enable Medicaid recipients to get a range of diagnostic, preventive and restorative services, as well as basic prosthodontic and periodontal services, as needed. The difference in State funding would be \$8,823,781 in state funds for option 2, versus \$3,466,328 in State funds for option 1. Federal funding would provide the remainder of the costs under the Federal Medicaid Assistance Percentage (FMAP). Limited coverage under option 1 would be capped per recipient and may only cover an annual exam, fluoride treatment, bi-annual cleanings, one set of bite wing X-rays per year and one non-emergency tooth extraction or filling per year. Reinstating coverage to the second option makes more sense, given the high costs paid for poor oral health exacerbated co-conditions and visits to the ER for acute dental care. What is important to note that this fiscal analysis also projects that over time, additional medical care cost savings are expected due to health status improvements in cooccurring health conditions such as diabetes, heart disease, pregnancy, and fewer ER visits for services

Thank you for you time to testify in support of this bill,

David Derauf, MD, MPH Executive Director Kokua Kalihi Valley Comprehensive Family Services