

JAN 20 2012

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# A BILL FOR AN ACT

RELATING TO ORAL HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

**PART I**

SECTION 1. In *The State of Children's Dental Health:*

*Making Coverage Matter*, the Pew Center on the States gave our State an "F" for its performance in the area of children's dental health. Hawaii met only one of the report's eight policy benchmarks aimed at improving children's dental health, making our State the worst overall performer among the fifty states and the District of Columbia. The legislature finds that our State should be doing more to improve the dental health of our children.

The 2001 edition of the Hawaii Health Performance Plan (Plan) supports the Pew Center's assessment of the poor overall dental health of Hawaii's children. The Plan cites state department of health research from 1986 that demonstrated that greater than seventy-two per cent of six- to eight-year-old children in Hawaii had one or more dental caries. At the time, the national average for six- to eight-year-old children was thirty-five per cent. The state department of health research



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1 further showed that nearly sixteen per cent of five-year-old  
2 children in Hawaii had baby bottle tooth decay, as compared to  
3 five per cent of five-year-old children in the continental  
4 United States.

5 The purpose of this part is to improve the dental health of  
6 Hawaii's children by:

7 (1) Increasing public awareness of oral health through  
8 education programs provided by the department of  
9 health and cooperating public and private agencies;  
10 and

11 (2) Appropriating moneys to establish and implement an  
12 electronic system to track data on children's dental  
13 health.

14 SECTION 2. (a) The department of health shall cooperate  
15 with public and private organizations to educate the public  
16 about:

17 (1) Baby bottle tooth decay, including the dangers and  
18 risks posed by baby bottle tooth decay, as well as  
19 methods of prevention;

20 (2) Topical fluoride varnish for children greater than six  
21 months of age but not exceeding four years of age;



(3) Sealants for children between                      and                      years  
of age; and

(4) Regular annual dental visits for children not  
exceeding eighteen years of age.

(b) For the purposes of this part:

"Baby bottle tooth decay" means any tooth decay in children  
not exceeding four years of age.

"Fluoride varnish" means an adherent material composed of a  
high concentration of fluoride and a fast drying, alcohol and  
resin-based solution.

"Sealants" refers to the application of material on the  
surfaces of the teeth to prevent bacteria from lodging in the  
pits and grooves of the teeth.

SECTION 3. There is appropriated out of the general  
revenues of the State of Hawaii the sum of \$                      or so  
much thereof as may be necessary for fiscal year 2012-2013 for  
establishing and implementing an electronic system to track data  
on children's dental health.

The sum appropriated shall be expended by the department of  
health for the purposes of this Act.

**PART II**



1       SECTION 4. The legislature finds that healthy, nutrient-  
2 rich diets can improve the oral health of Hawaii's children, who  
3 may be especially vulnerable to dental decay. Many children in  
4 our State have limited exposure to the wide range of locally  
5 produced healthy food. The addition of locally produced fruits  
6 and vegetables to school meals will expose public school  
7 children to high quality, local produce and improve their oral  
8 health.

9       The purpose of this part is to improve children's oral  
10 health by mandating that the department of education operate  
11 school gardens or farms at every public elementary and secondary  
12 school to provide nutritional food for school meals.

13       SECTION 5. Chapter 302A, Hawaii Revised Statutes, is  
14 amended by adding a new section to be appropriately designated  
15 and to read as follows:

16       "§302A- School gardens or farms. The department shall  
17 operate school gardens or farms, as appropriate, at every public  
18 elementary and secondary school, for the purpose of growing  
19 fruits and vegetables that shall be offered, where appropriate,  
20 to students through school meal programs. Foods grown at school  
21 gardens or farms that are offered to students shall meet all  
22 appropriate laws, rules, and safety standards."



PART III

SECTION 6. The purpose of this part is to improve the oral health of individuals who receive medical assistance through QUEST or the QUEST expanded access program by increasing payments to dentists who provide dental services to those individuals.

SECTION 7. Section 346-59, Hawaii Revised Statutes, is amended to read as follows:

**"§346-59 Medical care payments.** (a) The department shall adopt rules under chapter 91 concerning payment to providers of medical care. The department shall determine the rates of payment due to all providers of medical care, and pay such amounts in accordance with the requirements of the appropriations act and the Social Security Act, as amended. Payments to critical access hospitals for services rendered to medicaid beneficiaries shall be calculated on a cost basis using medicare reasonable cost principles.

(b) Rates of payment to providers of medical care who are individual practitioners, including doctors of medicine, dentists, podiatrists, psychologists, osteopaths, optometrists, and other individuals providing services, shall be based upon the Hawaii medicaid fee schedule. The amounts paid shall not



1 exceed the maximum permitted to be paid individual practitioners  
2 or other individuals under federal law and regulation, the  
3 medicare fee schedule for the current year, the state limits as  
4 provided in the appropriation act, or the provider's billed  
5 amount.

6 The appropriation act shall indicate the percentage of the  
7 medicare fee schedule for the year 2000 to be used as the basis  
8 for establishing the Hawaii medicaid fee schedule. For any  
9 subsequent adjustments to the fee schedule, the legislature  
10 shall specify the extent of the adjustment in the appropriation  
11 act.

12 (c) In establishing the payment rates for other  
13 noninstitutional items and services, the rates shall not exceed  
14 the current medicare payment, the state limits as provided in  
15 the appropriation act, the rate determined by the department, or  
16 the provider's billed amount.

17 (d) Payments to health maintenance organizations and  
18 prepaid health plans with which the department executes risk  
19 contracts for the provision of medical care to eligible public  
20 assistance recipients may be made on a prepaid basis. The rate  
21 of payment per participating recipient shall be fixed by  
22 contract, as determined by the department and the health



1 maintenance organization or the prepaid health plan, but shall  
2 not exceed the maximum permitted by federal rules and shall be  
3 less than the federal maximum when funds appropriated by the  
4 legislature for such contracts require a lesser rate. For  
5 purposes of this subsection, "health maintenance organizations"  
6 are entities approved as such, and "prepaid health plans" are  
7 entities designated as such by the Department of Health and  
8 Human Services; and "risk" means the possibility that the health  
9 maintenance organization or the prepaid health plan may incur a  
10 loss because the cost of providing services may exceed the  
11 payments made by the department for services covered under the  
12 contract.

13 (e) The department shall prepare each biennial budget  
14 request for a medical care appropriation based upon the most  
15 current Hawaii medicaid fee schedule available at the time the  
16 request is prepared.

17 The director shall submit a report to the legislature on or  
18 before January 1 of each year indicating an estimate of the  
19 amount of money required to be appropriated to pay providers at  
20 the maximum rates permitted by federal and state rules in the  
21 upcoming fiscal year.



1        (f) Notwithstanding subsection (b) to the contrary, as of  
2 January 1, 2013, fees payable to dentists shall be no less than  
3 per cent of fees prescribed in the Medicare Resource  
4 Based Relative Value Scale applicable to Hawaii as prepared by  
5 the United States Department of Health and Human Services."

6        SECTION 8. There is appropriated out of the general  
7 revenues of the State of Hawaii the sum of \$                    or so  
8 much thereof as may be necessary for fiscal year 2012-2013 to  
9 increase payments to dentists who provide dental services to  
10 individuals who receive medical assistance through QUEST or the  
11 QUEST expanded access program.

12        The sum appropriated shall be expended by the department of  
13 human services for the purposes of this part.

14                    **PART IV**

15        SECTION 9. If any part of this Act is found to be in  
16 conflict with federal requirements that are a prescribed  
17 condition for the allocation of federal funds to the State, the  
18 conflicting part of this Act is inoperative solely to the extent  
19 of the conflict and with respect to the agencies directly  
20 affected, and this finding does not affect the operation of the  
21 remainder of this Act in its application to the agencies  
22 concerned. The rules in effect as a result of this Act shall





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1 meet federal requirements that are a necessary condition to the  
2 receipt of federal funds by the State.

3 SECTION 10. New statutory material is underscored.

4 SECTION 11. This Act shall take effect on July 1, 2012.

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**Report Title:**

Oral Health; Dentists; Public Schools; Medicaid; Appropriations

**Description:**

Requires DOH to educate the public about issues that affect children's oral health. Requires DOE schools to operate school gardens or farms to grow fruits and vegetables to be offered to school children through school meal programs, subject to conditions. Requires fees paid by the State to dentists for dental services to individuals on QUEST or QUEST expanded access to be no less than a specified percentage of the fees prescribed in the United States DHHS fee schedule. Appropriates funds to increase payments for dental services to QUEST and QUEST expanded access program participants and to establish an electronic system to track data relating to children's dental health.

*The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.*

