Legislative Analysis



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PUBLIC HEALTH DENTAL HYGIENE

House Bill 4996 as passed by the House Sponsor: Rep. Barb Vander Veen Committee: Health Policy

First Analysis (9-6-05)

BRIEF SUMMARY: The bill would revise the criteria for an agency to be designated as a grantee health agency to increase the opportunities for dentists and dental hygienists to provide services in underserved areas.

FISCAL IMPACT: The bill would have minimal fiscal impact on state and local government. The bill will revise the applicant requirements and may encourage increased applicant entities for processing by the Department of Community Health.

THE APPARENT PROBLEM:

There are many reasons that people do not always receive appropriate dental care; one reason is that not all residents of the state have easy access to a dentist's office. Whether it results from geography, income level, or residence in a nursing home, lack of dental care can lead to other more serious health conditions. Studies are beginning to show a connection between oral disease (i.e., diseases of the gums) and diabetes, heart and lung disease, stroke, and even low-birth weight premature babies.

Under provisions of the Public Health Code enacted in 1991, dental hygienists, under the supervision of a dentist, can provide dental hygiene services to patients who have not first been examined by a dentist as part of a program for "dentally underserved" patients conducted by a local, state, or federal grantee health agency. However, due to several restrictions contained in these provisions, only a few programs have ever been instituted to serve these underserved populations.

Recently, members of the associations representing dentists and dental hygienists, along with representatives of the Department of Community Health and the bill's sponsor, have been exploring changes to the statute that may allow more underserved areas to receive the services of dentists or dental hygienists. Legislation incorporating their recommendations has been offered.

THE CONTENT OF THE BILL:

<u>House Bill 4996</u> would amend the code to revise the criteria for designation as a grantee health agency. Currently, an agency can receive a two-year designation as a grantee health agency by applying to the Department of Community Health and meeting certain criteria. The current requirements (<u>with proposed changes in parentheses</u>) are as follows:

- The agency is a public or nonprofit agency administering a program of dental care to a dentally underserved population. (The bill would instead specify a public or nonprofit entity, or a school or nursing home that administers a program of dental care to a dentally underserved population.)
- It employs or contracts with at least one dentist <u>and</u> one dental hygienist. (The bill would specify one dentist <u>or</u> one dental hygienist.)
- It receives more than fifty percent of its total revenue from public or nonprofit organization sources. (The bill would eliminate this provision.)
- It is <u>not</u> associated with a private dental practice or incorporated dental service provider whose only source of state or federal reimbursement was through Medicaid. (This provision would be eliminated.)
- It submitted a program overview that described the population to be served, the method of providing service, and how the program would be directed and overseen. (The bill would also require submission of the name and license number of the dentist and dental hygienist, if applicable, who were performing services under the program.)

In addition, the bill would require that within 10 business days of approving an application and designating a grantee health agency, the Department of Community Health would have to notify the Board of Dentistry of the designation in writing or make the information electronically available.

"School" would mean a public or private elementary or secondary institution of learning for any grade from kindergarten to 12. "Nursing home" would mean that term as defined in Section 20109 of the code.

MCL 333.16625

ARGUMENTS:

For:

Public Act 58 of 1991 amended the health code to allow dental hygienists to provide dental hygiene services in certain approved public health settings to "dentally underserved" patients who had not first been examined by a dentist. At the time, it was envisioned that many programs would arise to provide needed dental services to the poor, to migrant workers, to residents in nursing homes, and to those who live in areas where there is a shortage of dentists. However, due to other restrictions contained in the 1991 legislation, only a handful of programs have been initiated.

Now that studies are finding a connection between poor oral health and the onset of many serious (even life-threatening) health conditions, the importance of early and regular dental care cannot be ignored. Since the costs of treatment for serious diseases continue

to escalate, preventive measures must be encouraged and access to health care providers, including dentists and dental hygienists, increased as a way of controlling health care related costs.

<u>House Bill 4996</u> would do just that by amending the provisions of PA 58 of 1991 to remove barriers that have prevented many well-intended programs. As a result, more highly trained professionals, both dentists and dental hygienists, will be able to provide services to residents of nursing homes, schools, and other underserved groups. However, the bill would retain the same level of supervision by dentists over dental hygienists that the original legislation required.

As children receive early screenings and fluoride treatments, dental carries will decrease. As nursing home residents receive appropriate dental care, respiratory ailments associated with gum disease should also decrease. The bill is an example of good public policy; it would increase services to those without regular dental services, will have a positive impact on the health and well-being of the state's residents, and, due to the preventive health benefits of good dental health, may serve to decrease public spending on serious illnesses in the future.

POSITIONS:

The Michigan Dental Hygienists Association supports the bill. (6-28-05)

A representative of the Michigan Dental Association testified in support of the bill. (6-28-05)

A representative of the Department of Community Health indicated support for the bill. (6-28-05)

A representative of the Ottawa County Health Department indicated support for the bill. (6-28-05)

A representative of the Center for Civil Justice indicated support for the bill. (6-28-05)

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[■] This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.