



# Life Foundation

## WRITTEN TESTIMONY

Hawaii State Senate  
Committee on Health  
Committee on Human Services and Public Housing  
Wednesday, January 30, 2008, 1:15 p.m., Room 016

FIGHTING AIDS

IN HAWAII

AND THE PACIFIC

### SB 2541 - RELATING TO DENTAL CARE

Chairpersons Ige and Chun Oakland and members of the committees:

Life Foundation, Hawaii's oldest and largest AIDS program, asks to be recorded in support of the bill before you that seeks, among other things, to further enhance Medicaid and QUEST dental services for persons over the age of twenty-one years.

At this time, Life Foundation is providing case management and other services for more than 700 HIV positive people on Oahu. All but seven of these people are adults and more than half are income eligible for Medicaid.

In the past five years, Life Foundation has paid out approximately a half million dollars to cover critically needed dental care for more than 500 of our clients at an average cost of \$1,000 per client/patient. None of these services have been elective or cosmetic. They have all related to legitimate dental health issues including the elimination of pain, treatment of infection and restoration of the ability to successfully chew and eat.

At all times, we have attempted to keep costs low by using the state dental clinic and the dental clinic at the Queen's Hospital. Because dental services for Medicaid beneficiaries, even following the recent welcomed expansion of services, are so limited, we find that most of our clients derive little effective benefit from Medicaid and QUEST with the result that community programs such as Life Foundation often bear the brunt of the result.

For some reason, the mouth is no longer part of the body when health insurance is at issue. However, poor dental health can quickly compromise general health, especially for people with weakened immune systems.

The current situation, while somewhat improved, continues to be inadequate and should be addressed. On behalf of the clients of the Life Foundation, I would greatly appreciate your most serious consideration of this important bill. Mahalo.

  
Paul S. Groesbeck, Executive Director

677 ALA MOANA BLVD.

SUITE NO. 226

HONOLULU

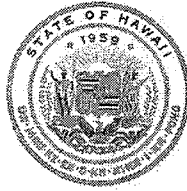
HAWAII

96813

FAX-808 / 521 1279

PHONE 808 / 521 2437

www.lifefoundation.org



**STATE OF HAWAII**  
STATE COUNCIL  
ON DEVELOPMENTAL DISABILITIES  
919 ALA MOANA BOULEVARD, ROOM 113  
HONOLULU, HAWAII 96814  
TELEPHONE: (808) 586-8100 FAX: (808) 586-7543  
January 30, 2008

The Honorable Suzanne Chun Oakland, Chair  
Senate Committee on Human Services and Public Housing  
and  
The Honorable David Y. Ige, Chair  
Senate Committee on Health  
Twenty-Fourth Legislature  
State Capitol  
State of Hawaii  
Honolulu, Hawaii 96813

Dear Senators Chun Oakland and Ige and Members of the Committees:

SUBJECT: **SUBJECT SB 2541 RELATING TO DENTAL CARE**

The position and views expressed in this testimony do not represent nor reflect the position and views of the Department of Health and the Department of Human Services (DHS).

The State Council on Developmental Disabilities (DD) **STRONGLY SUPPORTS SB 2541**. The purpose of this bill is to: 1) expand coverage under Medicaid and QUEST to include comprehensive dental care coverage for eligible persons 21 years of age or older, 2) appropriate funds for hospital dentistry for individuals with DD in the County of Hawaii, and 3) establish a task force to assist DHS in developing ways to recruit and retain dental care practitioners licensed under Chapters 447 and 448.

We applaud DHS in its initiative and the 2006 Legislature in its appropriation to provide funds to restore specific preventive and restorative dental services for eligible persons 21 years of age and older under the State's Medicaid and QUEST programs. While this was a positive accomplishment, it is not comprehensive in providing other dental care services, such as root canals, crowns, periodontal care, etc.

We realize that the cost to expand coverage to include comprehensive dental coverage for the identified populations will be exuberant for the State at a time when our revenue forecast is dim. **We suggest that the Legislature consider an incremental increase of \$500.00 in addition to the current dental benefits of \$500.00.** Current Medicaid covered dental services include preventive/restorative up to \$500.00 per individual per year, and adult denture services up to \$500.00 limit for each denture,

The Honorable Suzanne Chun Oakland  
The Honorable David Y. Ige  
Page 2  
January 30, 2008

\$1,000.00 total for upper and lower every five years. Approved dentures are not counted against the \$500.00 preventive/restorative limit.

Dental care has been identified as one of the major health concerns for people with DD. They have faced great challenges in accessing dental care services in an appropriate and timely manner. The lack of dental care for this population is profound and unacceptable. Consequently, as an underserved population for dental services, this population remains at high risk for poor oral health and hygiene. The impact of the reduction of dental care services for Medicaid recipients in 1996 was significant. The remedy to a toothache became relief from a tooth extraction as opposed to restorative dental services. Due to medical conditions related to their disability and the frequent prescription of medication such as Dilantin and Mellaril, a full range of dental care services becomes essential and cost effective. Other factors adding to this dilemma is the limited number of dental professionals on the Neighbor Islands and those who want to serve this population, as well as individuals who are elderly or medically fragile. Clearly, it is vital to the health of participants who are Medicaid and QUEST eligible that comprehensive dental care services become available.

With regard to hospital dentistry for people with DD, we feel the provision in the bill will help to address the need for additional dental resources and provide other alternatives for dental care for the Big Island. The Big Island community has for many years expressed the challenges involved for people to access timely dental services without having to travel to Oahu. Although this provision is specific to the County of Hawaii, we recognize the need for access to dental services on a statewide basis and hope that other Counties can benefit from future legislative appropriations.

The Council welcomes the opportunity to participate in the task force to be convened by DHS to develop ways to recruit and retain dental care practitioners licensed under Chapters 447 and 448.

We appreciate the Legislature's initiative through SB 2541 in addressing the dental care needs of Hawaii's Medicaid and QUEST populations statewide and DD population on the Big Island. Thank you for the opportunity to present testimony in **strong support of SB 2541.**

Sincerely,



Waynette K.Y. Cabral  
Executive Administrator

**The Arc in Hawaii  
3989 Diamond Head Road  
Honolulu HI 96816**

**Testimony In Support of SB 2541  
Relating to Dental Care  
January 30, 2008 1:15 PM  
Conference Room 016**

**Senate Committee on Health  
Senate Committee on Human Services and Public Housing  
The Twenty-Fourth Legislature, Regular Session of 2008**

Senator Ige and Members  
Senator Chun Oakland and Members:

I am Thomas Huber, the volunteer President of The Arc in Hawaii and the parent of an adult with mental retardation.

The Arc in Hawaii thanks and congratulates the 2006 Legislature for its leadership in addressing the crisis in dental care for indigent people with disabilities and others by expanding Medicaid and QUEST dental coverage. And we especially thank the respective chairs of these committees for introducing **SB 2541**, which expands dental coverage under Medicaid and Quest, appropriates funds for that purpose and establishes a pilot program and a study task force to continue the improvement of delivery of dental services.

~~The Arc in Hawaii supports Senate Bill 2541.~~ Despite the improvement in the availability of preventive and restorative services, more needs to be done to broaden the scope of permitted services, increase the cap on the cost of services and facilitate the availability of dental professionals and facilities willing to do the work.

Therefore, The Arc in Hawaii supports any increase in the level of support for dental care for persons receiving Medicaid or QUEST coverage.

Thank you for the opportunity to provide this testimony.

Thomas P. Huber  
President

**From:** Cory (Martha) Harden [mailto:mh@interpac.net]  
**Sent:** Tuesday, January 29, 2008 7:16 AM  
**To:** testimony  
**Subject:** support SB 2541 1-30-08 1:15 pm joint hlth hum srvs, pub hsnng

Dear Legislators,

Would you like to wait four months with a toothache?

Please support SB 2541 re: Hospital Dentistry for the County of Hawaii, at the Joint Senate Health and Human Services and Public Housing Committees on Wednesday, January 30, 1:15 p.m.

Currently if a person needs acute hospital dental care on the Big Island, they are referred to Queens Hospital, which is running a wait-list till May 2008!

mahalo, Cory Harden, Hilo

# LATE TESTIMONY

The Honorable Suzanne Chun Oakland, Chair

Senate Committee on Human Services and Public Housing

and

The Honorable David Y. Ige, Chair

Senate Committee on Health

Twenty-Fourth Legislature

State Capitol

State of Hawaii

Honolulu, Hawaii 96813

RE:SB2541 RELATING TO DENTAL CARE

Dear Senator David Ige and Committee Members,

My Name is Howard Marks,

I am writing to you on behalf of both the East and West Hawaii Developmental Disabilities Committees, advisory committees to the Developmental Disabilities Council, comprised of self-advocates, family members, private and public service providers, and County agencies. I am also a member of the Hawaii Oral Health Task Force, which has prioritized supporting and developing the implementation of Hospital dentistry now for over three years. I respectfully ask for your support of SB 2541 Related to Dental Care.

Hawaii County residents who have Medicaid/Quest Insurance or are Low-Income Uninsured continue to have inadequate access to Dental Care. These include children (22,000), medically fragile, developmentally disabled, mentally ill and frail elderly. Hawaii County has the Federal Designation of a Health Professional Shortage Area (HPSA) - based on the number of available and accessible professionals in an area that serve our low-income population.

The tragic and costly consequences of oral neglect are enormous. There are no state dental clinics to support acute dental services in the County of Hawaii. Currently the Big Island has no Pediatric dentists accepting Medicaid

People with developmental disabilities in the County of Hawaii requiring acute dental care in a hospital face great challenges accessing care in an appropriate and timely manner. Hospital Dentistry offers access to anesthesia. There is nowhere in the County

# LATE TESTIMONY

of Hawaii that can provide anesthesia and dental care for someone with developmental disabilities receiving Medicaid. This need has been identified as a major health priority by the Hawaii County Oral Health Task Force. Currently there is a three month waiting list at Queens Hospital, our only point of access for acute care for people who require hospital dentistry services. The many who are waiting are suffering.

Hospital dentistry is critical in order to avoid the tragic and costly consequences of oral neglect. This bill will provide a cost effective means to assure that hospital dentistry services for acute care are available to our County's most vulnerable citizens.

According to data reported in the 2004 Hawaii Oral Health Profile, authored by the Dental Health Division, includes data reported by Community Case Management Corporation to the Med -Quest Division, Hawaii State Department of Human Services, from the years 2002-2004:

As reported in the year 2004, the number of "unique individuals" from Hawaii County receiving Medicaid projected to be transported off Island to receive dental services include 438 children. It was also projected in 2004, due to multiple trips needed for off island dental care, approximately 1,427 off island trips a were to be made by children to access dental care. This data does not include the number of inter-island trips requiring an attendant to assist the recipient. For example in 2003 86% of all trips included and accompanying attendant.

From 2002-2004 the data reports approximately 2,400 children traveled inter island for dental care. Over and 20% of these children required more than one round trip.

The current health disparity is a disservice to children and adults with developmental disabilities as well as wasteful disservice to the tax payers in our state.

We appreciate the Legislatures initiative through SB 2541 in addressing the dental needs of the DD population on the Big Island. Thank you for the opportunity to present testimony in strong support of SB 2541.

Sincerely,

Howard Marks

Program Specialist

## References:

2004 Hawaii Oral health Profile Mark H. K. Greer, DMD., M.P.H, Dental Health Division, Hawaii State Department of Health, October, 2004 page 18