



STATE OF HAWAII
DEPARTMENT OF HEALTH
KA 'OIHANA OLAKINO
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Testimony COMMENTING on H.C.R. 32
REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE AN ORAL
HEALTH TASK FORCE TO REVIEW INFORMATION ON THE STATUS OF
ORAL HEALTH IN THE STATE AND MAKE RECOMMENDATIONS TO
IMPROVE ORAL HEALTH INFRASTRUCTURE IN HAWAII.

REPRESENTATIVE DELLA AU BELATTI, CHAIR
HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

Hearing Date: 03/23/23

Room Number: CR 329

Fiscal Implications: The Department of Health does not have the personnel, expertise, or funding resources to implement the work outlined in this resolution. The Department defers to the Governor's Executive Biennium Budget Request for appropriation priorities.

Department Testimony: The Department of Health (DOH) appreciates the intent of this resolution to establish an oral health task force to review information on the status of oral health in the state, the feasibility of expanding community service dental licensure requirements, and make recommendations to improve oral health infrastructure in Hawai'i.

An oral health program is a critical part of all state public health departments. However, the DOH Dental Health Division was eliminated as part of the 2009 budget cuts. Oral health disease is a particularly critical issue in Hawai'i with many children and adults suffering from preventable dental disease. Access to dental care is a challenge since most of the primary and specialty oral health providers are in the urban areas of the City and County of Honolulu. The lack of access to oral health care is particularly serious in rural communities on the neighbor

islands and in low income urban/rural areas of O‘ahu.

Rebuilding the Department’s oral public health program will help to fulfill the basic core public health functions of assessment, assurance, and policy development and meet the dental health mandates of Hawai‘i Revised Statutes Title 19, Chapter 321, Part V §321-61 to §321-63.

The Department lacks the necessary funding, personnel, and expertise to facilitate an oral health task force of this size and scope. The Department would need personnel and funding to procure and administer a contract to hire a consultant to facilitate the work of the oral health task force, including completing the task force’s interim and final reports. Also, for a task force of this size and scope, it may take at least 12-18 months for the task force to have an interim report of findings and about 24-30 months to submit a final report including findings and proposed legislation.

Based on the specialized topic and comprehensive membership of this task force, it may be difficult to recruit members that currently work together on oral health issues as part of their employment or associations if they will be prohibited from continuing these professional interactions during their tenure on the task force based on Part I, Chapter 92, Hawai'i Revised Statutes.

Thank you for the opportunity to testify.

Offered Amendments:

Amend the resolution with:

“BE IT FURTHER RESOLVED that no member of the task force shall be made subject to section 84-17, Hawaii Revised Statute, solely because of that member's participation on the task force. The task force shall be exempt from part I, chapter 92, Hawaii Revised Statutes.”

Change lines 37-41, Page 5 to read:

“BE IT FURTHER RESOLVED that the [~~task force is requested to submit an interim report of its findings and initial recommendations, including any proposed legislation, to the Legislature no later than twenty days prior to the convening of the Regular Session of 2025]~~ oral health task force shall submit an interim report of its findings and recommendations to the legislature no later than December 1, 2024. The department of health shall submit a final report of the oral health task force’s findings and recommendations, including any proposed legislation, no later than December 1, 2025, pursuant to section 321-63, Hawaii Revised Statutes.”

JOSH GREEN, M.D.
GOVERNOR



KEITH T. HAYASHI
SUPERINTENDENT

STATE OF HAWAII
DEPARTMENT OF EDUCATION
KA 'OIHANA HO'ONA'AUAO
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 03/23/2023

Time: 10:40 AM

Location: 329 VIA VIDEOCONFERENCE

Committee: House Health &
Homelessness

Department: Education

Person Testifying: Keith T. Hayashi, Superintendent of Education

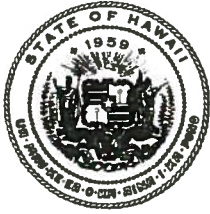
Title of Resolution: HCR 0032 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE AN ORAL HEALTH TASK FORCE TO REVIEW INFORMATION ON THE STATUS OF ORAL HEALTH IN THE STATE AND MAKE RECOMMENDATIONS TO IMPROVE ORAL HEALTH INFRASTRUCTURE IN HAWAII.

Department's Position:

The Hawaii State Department of Education (Department) offers comments on HCR 32, which requests the Hawaii State Department of Health (DOH) to convene an Oral Health Task Force to review information on the status of oral health in the State and make recommendations to improve oral health in Hawaii.

The Department appreciates the intent of this measure and defers to the DOH on its implementation. Should this move forward, the Department agrees to send a representative to serve on the Oral Health Task Force, as the Centers for Disease Control and Prevention has observed that poor oral health can have a detrimental effect on children's quality of life, their performance at school, and their success later in life.

Thank you for the opportunity to provide testimony on HCR 32.



DISABILITY AND COMMUNICATION ACCESS BOARD

1010 Richards Street, Room 118 • Honolulu, Hawaii 96813
Ph. (808) 586-8121 (V) • TTY (808) 586-8162 • Fax (808) 586-8129

March 23, 2023

TESTIMONY TO THE HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

House Concurrent Resolution 32/House Resolution 33 – Requesting the Department of Health to Convene an Oral Health Task Force to Review Information on the Status of Oral Health in the State and Make Recommendations to Improve Oral Health Infrastructure in Hawaii

The Disability and Communication Access Board (DCAB) supports House Concurrent Resolution 32/House Resolution 33 – Requesting the Department of Health to Convene an Oral Health Task Force to Review Information on the Status of Oral Health in the State and Make Recommendations to Improve Oral Health Infrastructure in Hawaii.

Oral health is an important health issue for people with disabilities who are not able to access dental care. Barriers for people with disabilities, such as financial insecurity, limited number of dental providers who treat adults with Medicaid dental benefits, lack of dental providers who are trained to accommodate people with physical and mental disabilities, and inaccessible dental clinics and medical diagnostic equipment, combine to create significant challenges to obtaining dental care. This resolution would review the current oral health infrastructure and delivery of oral health services to all people including people with disabilities.

Thank you for the opportunity to provide testimony.

Respectfully submitted,

KIRBY L. SHAW
Executive Director



HAWAI'I ORAL HEALTH COALITION

Date: March 22, 2023

To: The Honorable Representative Della Au Belatti, Chair
The Honorable Representative Jenna Takenouchi, Vice Chair
Members of the Committee on Health & Homelessness

Re: HCR32, Relating to Oral Health Task Force

Hrg: March 23, 2023, at 9:30am - Conference Room 415 & via Videoconference

The Hawai'i Oral Health Coalition, a program of the Hawai'i Public Health Institute, **supports the intent** of HCR32, which requests the Hawai'i State Department of Health to convene an oral health taskforce to review information on the status of oral health in the State and make recommendations to improve or health infrastructure in Hawai'i. Pursuing the development of an oral health task force as proposed in **HB617 HD1** is more impactful because it provides clearer direction as well as the financial means to facilitate these activities.

The mission of the Hawai'i Oral Health Coalition (HOHC) is to improve the overall health and well-being of all Hawai'i residents by increasing access to and equity in oral health care through collaborative partnerships, advocacy, and education. HOHC is a community-driven organization comprised of members representing organizations and individuals from diverse sectors across Hawai'i. The HOHC operates under the auspice of the Hawai'i Public Health Institute.

Oral health is essential to the overall physical, psychological, social, and economic well-being of Hawai'i's residents. Yet, our residents suffer from poor oral health:

- Hawai'i has among the highest prevalence of dental decay in children and adults compared to other states.
- Low-income families, intellectually and developmentally disabled residents, kūpuna, Native Hawaiian and Pacific Islander populations, and neighbor island residents are disproportionately impacted by poor oral health.
- Lack of an in-state dental school, geographic isolation, lack of community water fluoridation, and societal inequities are significant contributors to our poor oral health status.

Forty-two states maintain dedicated public dental health staff responsible for assessing and monitoring the population's oral health status, community needs, and infrastructure; informing and educating the public about the importance of oral health; and working to reduce barriers to dental

care. With over 288,000 adults with Medicaid dental benefits, there is a lack of dental providers to adequately meet the need for services among the population.

Our state's Federally Qualified Health Centers (FQHCs) cared for approximately 40,000 dental patients in 2021ⁱ, and often have long wait lists due to the limited facility and staffing capacity. Additionally, only 240 FQHC and general practice dentists are active in Medicaid in Hawai'i. However, it is unclear how many currently accept new patients. While the legislature recently allocated funding to reinstate basic services to adults enrolled in Medicaid, the shortage of Medicaid providers and limited infrastructure hinders the provision of services across the state, primarily in rural and neighbor island communities.

It is imperative that we invest time and resources into further examining the oral health landscape in Hawai'i to better understand the full scope of oral health needs, resources, infrastructure, and to identify evidence-based best practices, which can best address the barriers and gaps in our existing oral health care systems. A dedicated oral health task force comprised of key stakeholders is necessary to identify and develop the strategies that address the critical needs of our communities.

The State is investing in the oral health of its most vulnerable residents by reinstating funding for the Medicaid adult dental benefit. If we are to adequately assess and address gaps, barriers, and opportunities within the current oral health infrastructure and support the success and sustainability of this investment, we strongly encourage that the development of an oral health task force that is funded be advanced through HB617 HD1.

Thank you for the opportunity to testify and provide our comments.

Mahalo,



Patrick Donnelly
Statewide Oral Health Coalition Manager
Hawai'i Public Health Institute

ⁱ <https://data.hrsa.gov/tools/data-reporting/program-data?grantNum=H80CS06640>



Hawaii Dental Association

To: House Committee on Health
Time/Date: 10:40 am, March 23, 2023
Location: State Capitol via Video Conference and Room 329
Re: HCR 32, HR 33 REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE AN ORAL HEALTH TASK FORCE TO REVIEW INFORMATION ON THE STATUS OF ORAL HEALTH IN THE STATE AND MAKE RECOMMENDATIONS TO IMPROVE ORAL HEALTH INFRASTRUCTURE IN HAWAII.

Aloha Chair Belatti, Vice-Chair Takenouchi, and members of the Committee:

The Hawaii Dental Association (HDA) supports HCR 32 and HR 33. These resolutions establish an oral health task force to review the status of oral health in the State and make recommendations to improve oral health infrastructure in Hawaii.

Oral health is essential for overall health and wellness. One cannot be healthy without a healthy mouth. It can show signs of nutritional deficiencies or general infection. Systemic diseases, those that affect the entire body, may first become apparent because of mouth lesions or other oral problems.

We wholeheartedly agree with the importance of the Adult Dental Medicaid program and its successful implementation. We believe that a complex system, rather than only the number of dentists, should be addressed. We note that multiple factors including the location of a dental clinic, its accessibility, the volume of patients served, and other factors such as the presence of care coordinators (e.g. Community Dental Health Coordinators), program navigators, and patient transportation are equally as or more important to the Medicaid program's successful implementation. We also note that only four states in the country have a higher dentist per capita population than Hawaii.

We are strongly interested in assisting the legislature in exploring the supports necessary to effectively implement the Medicaid program and improve overall health. **Therefore, we recommend naming at least one additional dentist from each county to this task force.** To create a task force premised on an assumption that there are too few dentists by seating only one dentist of a 20-member task force does not seem set up for optimal success.

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 provide these comments and to work together with the legislature for the health and wellbeing of our community.

HCR-32

Submitted on: 3/21/2023 6:26:59 PM

Testimony for HLT on 3/23/2023 10:40:00 AM

Submitted By	Organization	Testifier Position	Testify
B.A. McClintock	Respiratory and Environmental Disabilities Assoc of HI	Comments	Written Testimony Only

Comments:

This bill must *never* include community water fluoridation in order to protect all other patient populations in our state. This must be a top priority! We cannot trample others rights to a safe and healthy environment.

Date: March 23, 2023

Committee: House Committee on Health and Homelessness

HCR 32/HR 33: REQUESTING THE DEPARTMENT OF HEALTH TO CONVENE AN ORAL HEALTH TASK FORCE TO REVIEW INFORMATION ON THE STATUS OF ORAL HEALTH IN THE STATE AND MAKE RECOMMENDATIONS TO IMPROVE ORAL HEALTH INFRASTRUCTURE IN HAWAII.

Testifier: Nancy S. Partika, RN, MPH

Aloha Chairperson Au Belatti, Vice-Chair Takenouchi, and Committee Members;

My name is Nancy Partika, and, as a lifelong public health professional, I am supportive of the intent of HCR 32, but respectfully request that this resolution be held.

I wish to reinforce the need for timely passage of HB617, HD1, SD 1, which is currently under consideration in the Senate. HB627, HD1, SD1 is the preferred vehicle for funding and action to establish an oral health task force to comprehensively review the status of oral health in the State, and make recommendations to improve oral health infrastructure in Hawaii. Funds are also needed to support DOH staffing for oral health oversight, as mandated in the HRS.

Establishing the task force with funding to support the timely work of the task force is crucial in order to get our oral health system infrastructure in place and make recommendations for improved dental services access and delivery. Opting to study this issue for another year will create an unfunded mandate for DOH and will not provide the necessary resources for DOH and its partners to plan for and implement a strategic direction for Hawaii on oral health.

Mahalo for your consideration of this issue and support for HB 617.