



STATE SENATOR
LaTonya Johnson

WISCONSIN STATE SENATE

6TH DISTRICT

Testimony of State Senator LaTonya Johnson
Senate Committee on Health
Tuesday, February 6, 2018

Thank you Chairwoman Vukmir, and members of the committee for holding a public hearing on legislation included in the Speaker's Task Force on Foster Care.

All of our kids deserve to live in great communities that have their best interest in mind. To achieve this, the Foster Care Task Force met and listened to the individuals on the front lines of this issue who work hard each and every day to make living in safe and healthy communities a reality for all of our children.

I want to thank the many Wisconsinites who came to share their experiences, expertise, and suggestions with the Task Force. Without the input of the caseworkers, parents, foster parents, advocates, and children who have experienced the foster care system firsthand, this legislative package would not have been possible.

I am proud of the work of the Speaker's Task Force on Foster Care, which resulted in a bipartisan package of legislative proposals aimed at addressing issues facing the child welfare system, including:

Senate Bill 673

Oral health is an essential part of health care--good oral and dental hygiene can help prevent bad breath, tooth decay and gum disease, but research also shows that a healthy mouth may help you ward off medical disorders like heart disease, stroke, and preterm labor. So, it is essential that children who are in the state's care have access to basic dental services.

Currently in our statutes, the term "ordinary medical and dental care" is not defined for children in out-of-home care and this causes confusion when it comes to what dental services a foster parent can and can't consent to. SB 673 defines ordinary dental care in statute to give certainty to legal guardians and dental care professionals when providing these services for children placed in out-of-home care.

Without greater clarity in our law, these routine dental services will continue to be provided inconsistently to children in out-of-home care. The last thing we want is for children to end up in the ER to deal with an issue that could have been easily addressed in a routine dental visit.

Alberta Darling

Wisconsin State Senator

Co-Chair, Joint Committee on Finance

Testimony before the Senate Committee on Health
Senate Bill 673
January 25, 2018

Thank you Chair Vukmir and committee members for holding a public hearing on Senate Bill 673. This bill is crucial to ensuring that our most vulnerable youth have access to dental services.

In Wisconsin, approximately 7,000 children are part of the child welfare system at any given time. In addition to the trauma of being removed from their home, foster youth have incredible barriers to health services because as minors, they cannot consent to treatment, and our laws are frequently lagging behind providing these youth with the services they need. In the past few sessions, we have made strides to ensure the mental, behavioral, and physical health needs of these Wisconsin children are being met.

Senate Bill 673 builds upon the work we have already done. Under current law, foster parents are already responsible for providing ordinary medical and dental care for that child. Notably, "ordinary dental care" is not defined in statute. As such, providers have been reluctant to provide care without knowing exactly what constitutes ordinary dental care. This has created an inequality in access to dental care for youth in foster care, as providers have not been providing the same level of care across the state.

Senate Bill 673 defines ordinary dental care in the statute. This bill makes it clear that ordinary dental care means both prevention and treatment services. As such, this bill will ensure that foster youth have access to routine checkups, as well as the ability to have a cavity treated or a tooth pulled. The bill in front of you is a commonsense reform to ensure that foster youth have universal access to dental care, by simply clearing up the vague language currently in statute.

Not only will this bill remove barriers to treatment for foster youth, but it will also reduce unnecessary emergency room spending. When foster youth have access to standard care, they do not need to go to the emergency room for dental pain. In turn, this lowers the cost to the state, simply by ensuring that children have access to the proper form of treatment.

I'd like to thank Representative Billings for her work on this bill. I urge your support on Senate Bill 673.



JILL BILLINGS
STATE REPRESENTATIVE

February 6, 2018

Chairperson Vukmir and Members of the Senate Committee on Health and Human Services,

Thank you for holding a hearing on SB 673, which will add clarity to the definition of "ordinary dental care" in relation to a legal custodian, or foster parent, providing care for a child.

Currently, under Wisconsin State Statutes Chapter 48, a custodian is able to provide "ordinary medical or dental care", however, what services are included in this definition of care are not specified. This legislation defines "ordinary dental care" as "routine dental care, including diagnostic and preventative services, and treatment including restoring teeth, tooth extractions, and use of nitrous oxide."

Senate Bill 673, came forth as part of the Speaker's Foster Care Task Force. During our hearings across the state we heard from many foster care parents, kids and providers about the barriers they face within the system. The vague definition in our statutes of "ordinary dental care" is one such barrier. The current definition leaves "ordinary" treatment to be defined by health care providers and counties, creating a lack of uniformity of practice throughout the state. A consequence of this lack of uniformity, is that some children in the foster system are unable to receive necessary care without the consent of their birth parent. Although, parental consent is important, this can often slow the process for the child to receive necessary care.

This legislation will provide uniformity throughout the state and clarity of care for our foster parents, birth parents, providers and kids so they can receive proper dental care. I thank you for your consideration of this legislation.

Sincerely,

A handwritten signature in black ink that reads "Jill Billings". The signature is written in a cursive, flowing style.

Jill Billings
State Representative
95th Assembly District

TO: Senate Committee on Health & Human Services
FROM: Dr. Colleen Greene, Pediatric Dentist, Children's Hospital of Wisconsin
DATE: Tuesday, February 6, 2018
RE: Support for SB 673—Defining dental care for children in out-of-home care

Chairwoman Vukmir and members of the committee, thank you for allowing Children's Hospital of Wisconsin the opportunity to submit testimony today. My name is Dr. Colleen Greene and I am a pediatric dentist at Children's Hospital of Wisconsin. I am also a foster parent to Nick, who is 16 months old. I want to thank the Committee for holding a hearing on SB 673, which defines ordinary dental care for children in out-of-home care. We also want to thank the Speaker's Task Force on Foster Care for holding public hearings last year and to the authors, Representative Billings and Senator Darling, for sponsoring this legislation.

Children's Hospital provides dental and oral health care services in four clinic locations, as well as in the operating room at Children's Hospital and our Surgicenter. Oral health care is integrated within our primary care network as well as urgent and emergent settings. Over 90 percent of our dental patients present with Medicaid insurance.

Children's Dental Centers service more than 15,000 unique dental patients each year, resulting in more than 30,000 visits. In 2017, more than 300 children enrolled in Care4Kids, an innovative program designed to offer comprehensive and coordinated care for children and youth in foster care, became new patients in our dental program. Over 40% of dental patients have a special health care need and more than 500 adult patients continue to be cared for at Children's Hospital due to the lack of adult dental providers available to transition their care. Annually, there are more than 800 visits to Children's Hospital's Emergency Department for oral health issues. Over half of these visits are related to preventable oral health issues, such as dental decay, gum disease and infections. Last year, only 5 children enrolled in Care4Kids had a dental-related Emergency Department visit.

Children's Hospital is the largest not-for-profit, community-based agency serving children and families in the state, providing community services to more than 15,000 children and families annually. In partnership with the Division of Milwaukee Child Protective Services, Children's Hospital is responsible for the ongoing case management of approximately half of the youth and families involved in out-of-home care in Milwaukee County. The majority of children and youth have some degree of physical, behavioral and emotional needs stemming from the trauma they have experienced in their lives. Many of them also have oral health care issues that need attention. These patients are often some of my most resilient, but the burden of dental decay can be severe. Any measure to streamline necessary dental care will be positive progress for Wisconsin's most vulnerable children.

Currently, there is no definition for "ordinary medical and dental care" that children in foster care are entitled to receive. SB 673 would define what ordinary dental care is, and in doing so, would provide clarity for case workers, parents/guardians, out-of-home care providers like foster parents and dental providers like me. These critical services include routine dental care, diagnostic and preventive services and restoring and extracting teeth. Without this important standard, children will continue to receive varying levels of care because today there is no clear standard of what is considered ordinary dental care. This sometimes results in defaulting to using the emergency room which is costly and often unequipped to deal with the root causes of dental problems.

As I mentioned at the beginning of my testimony, I am both a pediatric dentist whose patients include children in foster care, as well as being a foster parent myself; my work and family passions are aligning perfectly in this legislation. Foster parents have a significant difficulty finding a dental home for foster kids. As a foster parent in Milwaukee, I am fortunate to be able to have my foster child's dental needs cared for by Children's Hospital. As a provider, along with my colleagues at Children's Hospital, we are honored to care for more than half of the foster kids in Milwaukee. Having a standardized definition of what is ordinary dental care will help me as a foster parent and will help parents/legal guardians know what kind of services the foster child is able to receive under ordinary dental care.

Providing clarity to the definition will also help child welfare case workers avoid the need to pursue paperwork and authorizations that are unnecessary because it will be clear as to what services can be provided – should SB 673 become law. As dental providers, we will be able to spend more time treating kids and less time playing phone tag and trying to fill out paperwork. After almost five years, I have never had a biological parent worry openly to me that their children are getting too much great dental care.

SB 673 would increase transparency and provide a much needed definition in state statutes of what ordinary dental care is. This will eliminate confusion, expedite the process, while at the same time helping facilitate the dental care that foster children need.

Chairwoman Vukmir and committee members, thank you again for the opportunity to submit written remarks in support of SB 673. If you have any questions, comments or concerns, please feel free to contact me via email at cgreene@chw.org or via phone at 414-266-2040.

February 6, 2018
Senate Committee on Health and Human Services
411 South

Re: Senate Bill 673

Chairperson Vukmir and members of the Health and Human Services Committee,

My name is Dr. Timothy Durtsche and I am a dentist, an Oral and Maxillofacial Surgeon, from La Crosse, Wisconsin. I have practiced in La Crosse since 1979 and I retired on the first of this year. I have also been fortunate to serve as the president of the Wisconsin Dental Association in 2012 - 2013.

During my entire career in Wisconsin, I have been a provider for Medical Assistance patients.

I speak in favor of Senate Bill 673. I speak as a provider for these patients and additionally as a spokesperson for others who treat Title XIX patients.

This legislation defines the definition of "Dental Care." Our duty as dentists is to examine, diagnose, and treat these minors who are our patients and to do so with informed consent.

Dental disease is the most common chronic disease of children. Untreated it can account for many missed days from school and pain and suffering for children.

For many children who are in out-of-home care, it is the legal custodian who will bring the child in for treatment. Many times the legal guardian or parent is not available even when they have been made aware of an upcoming appointment.

After the child has been examined and a diagnosis and treatment plan has been formulated, this will be discussed with the legal custodian and then attempts are made to contact the legal guardian or parent. If that person is not available then the child will have to be reappointed unless there is a compelling dental emergency necessitating treatment.

By noting in the statutes the care that can be provided, this will simplify the process and the proper care can be delivered in a timely fashion. In cases requiring "deep sedation" or hospitalization, the guardian or parent will still need to be informed and consent given.

This legislation will allow the vast majority of care to be provided to these children. It is difficult to always find dentists who will treat many of these patients for a variety of reasons, but having this legislation can eliminate one of the barriers to providing care.

I would be happy to answer any questions.

Respectfully submitted,

Timothy B Durtsche DDS
411 16th Street S
La Crosse, Wisconsin 54601



TO: Senate Committee on Health & Human Services
FROM: Rachael Wolfe, JD, Oral Health Project Manager, Children's Health Alliance of Wisconsin
DATE: Tuesday, February 6, 2018
RE: Support for SB 673—Defining dental care for children in out-of-home care

Chairwoman Vukmir and members of the committee, thank you for allowing Children's Health Alliance of Wisconsin the opportunity to submit testimony in support of SB 673. My name is Rachael Wolfe and I am the oral health project manager at Children's Health Alliance of Wisconsin. I want to thank the Committee for holding a hearing on SB 673 which provides clarity to the ordinary dental services that kids in out-of-home care, including foster kids, can receive care and treatment for. We also thank the authors, Representative Billings and Senator Darling, for sponsoring this legislation.

The Alliance was created in 1994 to work on children's health issues, specifically for underserved populations, in order to improve child health through system change, policy and best practice. We strive to be the voice for children's health in Wisconsin working to ensure that Wisconsin's children are healthy, safe and able to thrive. We are affiliated with Children's Hospital of Wisconsin. The Alliance works to raise awareness, mobilize leaders and people, impact public health, and implement programs proven to work through collaboration, advocacy and support to our partners.

The Alliance works on seven key initiatives based on recommendations from the Wisconsin Department of Health Services and the Alliance's advisory board. Currently, in addition to our work with the oral health initiative, the Alliance focuses on additional areas that include asthma, early literacy, emergency care, grief and bereavement, injury prevention and death review, and lead poisoning.

The oral health initiative at the Alliance includes the Healthy Smiles for Mom and Baby program, Wisconsin Seal-A-Smile and The Wisconsin Oral Health Coalition (Coalition). The Coalition consists of more than 200 organizations and members working to improve the oral health of all Wisconsin residents. All of our oral health programming is squarely focused on helping primarily children increase access to important oral health services. This bill clarifies the definition of ordinary dental services for kids in out-of-home care who might participate in one of our school-based oral health prevention programs that take place in more than 825 schools across the state. The Coalition has adopted policy that specifically supports programs and policies that expand the reach of the Wisconsin Seal-A-Smile program or other school-based programs providing high quality care. This bill will help provide that high quality care to vulnerable populations.

Foster kids are a particularly vulnerable population and many times have greater dental needs than children not involved with the child welfare system. Providers, parents, guardians, child welfare workers and dental providers all may have their own interpretation of what is considered ordinary dental care. Establishing a definition of these services, accomplished through SB 673, provides clarity which will reduce confusion, but most importantly enable more timely access to care for this vulnerable group of kids and get them on the path to better oral health.

Chairwoman Vukmir and committee members, thank you again for the opportunity to submit written remarks in support of SB 673. If you have any questions afterward, please feel free to contact me via email at rwolfe@chw.org or via phone at 414-337-4576.