



JON PLUMER

STATE REPRESENTATIVE • 42nd ASSEMBLY DISTRICT

Assembly Committee on Health, Aging, and Long-Term Care November 15, 2023

Testimony AB 668

Good Morning Chairman Moses and Committee members. Thank you for holding a hearing and offering me the opportunity to testify in support of Assembly Bill 668, which provides a licensure process and framework for Dental Therapists in Wisconsin. And thank you to Senator Felzkowski for her hard work and leadership getting this important legislation crafted and important stakeholders on board.

Many Wisconsinites, especially individuals on Medical Assistance programs, suffer from a lack of adequate access to dental care. Significant areas of the state face dental access shortages. The end result is fewer individuals getting the preventative dental care they need and more emergency room visits when serious issues arise.

Assembly Bill 668 helps address the problem by allowing the licensure and practice of Dental Therapists to serve patients directly within their scope of care. This will result in more capacity and care options and reduced costs for those who need it. Dental Therapists provide the same type of important mid-level care as a Physician Assistant or Nurse Practitioner does in a doctor's office.

Under this bill, Dental Therapy education programs must meet specific accreditation requirements. Dental Therapists must also serve as an employee and under the supervision of a dentist. These requirements, along with additional parameters laid out in the bill, will ensure quality of care and allow Dental Therapists to operate smoothly within the dental infrastructure across the state.

I am proud to be the Assembly author of this important step in addressing a serious issue facing our state. Thank you again for hearing this legislation.



MARY FELZKOWSKI

STATE SENATOR • 12TH SENATE DISTRICT

Testimony on AB 668

Assembly Committee on Health, Aging and Long-Term Care

Senator Mary Felzkowski

12th Senate District

November 15th, 2023

Good morning Chairman Moses and Committee Members,

Thank you for taking the time to hear testimony on Assembly Bill 668, regarding the licensure of dental therapists.

Please imagine you are the parent of a child on Medicaid with several cavities in her mouth. Because she is one of more than 1 million people on medical assistance that live in one of Wisconsin's 64 of 72 counties with a dental professional shortage, she has very limited access to a dentist that can work with her on restorative and preventative oral health care. The wait for care your child needs can be months long. During that time, your child is in pain, in danger of infection, and she's not eating, learning, or growing like she should be. This is the reality for many families in rural Wisconsin and urban areas like Milwaukee who have untreated dental disease with limited access to current dental professionals.

With these struggles, it comes as no surprise that Wisconsin ranks as one of the worst states when it comes to low-income pediatric dental care. The good news is that the state legislature can help change this story by pursuing tools to alleviate our statewide oral health crisis. This bill provides one of those tools by allowing for the licensure of dental therapists in Wisconsin. Similar to physician assistants in the medical field, dental therapists, serving as a mid-level provider, help dental practices reduce the access gap. The most common dental needs are oral exams and fillings. This is especially true for the Medicaid population who do not have the same access to crucial preventative care.

While current law only allows dentists to perform these procedures, a dental therapist would be a new member of the dental team with extensive training to provide this type of dental care under the supervision of a dentist. The training that dental therapists would undergo for these procedures mirrors the training dentists go through on the same procedures -the programs that train them would have to meet standards approved by the Commission on Dental Accreditation (CODA), which is authorized by the U.S. Department of Education and housed within the American Dental Association. It is the exact same body that sets the training standards for all dental schools in the United States.

Since 2011, dentists in Minnesota have been hiring dental therapists to expand routine care to more patients, offer evening and weekend hours, and extend their reach to rural satellite clinics, low-income schools, and nursing homes – often using mobile equipment to reach less mobile individuals. Dental therapists also make it more affordable for practices to deploy providers to locations that are more convenient to patients. It is now easier for Minnesota dental practices to see more Medicaid patients, and for nonprofit clinics to see more Medicaid and uninsured patients with their limited dollars.

Dental therapy is a common sense approach that is a cost-effective way to grow a more flexible oral health workforce and one that an increasing number of states have adopted. Where they are on the ground in Minnesota and in Alaska, they have made a difference in the lives of thousands struggling to find accessible quality care. Over the years in Wisconsin, this legislation has been supported by over 60 groups across the spectrum. You'll hear from some of these groups today.

After working with the Wisconsin Dental Association on amendments relating to CODA accreditation, supervision requirements, and employment parameters over the last 2 sessions, they are neutral on this bill.

Thank you all for taking the time to listen to my testimony on this important legislation. Representative Plumer and I would be very happy to answer any questions you may have.



Dr. Morna K. Foy, President

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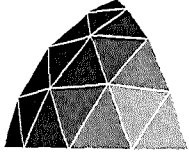
**Assembly Bill 668
Committee on Health, Aging and Long-Term Care
November 15, 2023**

Chairman Moses and Members of the Committee:

The Wisconsin Technical College System (WTCS) asks for your support for Assembly Bill 668. This bill provides for the licensure of dental therapists, creating a pathway to expand access to dental care and address dental access shortages that are persistent throughout the state.

As providers of dental assistant and dental hygienist programs, WTCS colleges are well positioned to be a key provider of dental therapy education and training. Wisconsin's technical colleges currently offer dental hygienist programs accredited by the American Dental Association's Commission on Dental Accreditation (CODA) and can build upon existing educational infrastructure to prepare dental therapists using methods that are industry-aligned and responsive to community needs.

Please support Assembly Bill 668 and the opportunity it provides to expand access to dental care in Wisconsin. Thank you for your consideration.



WISCONSIN TECHNICAL COLLEGE DISTRICT BOARDS ASSOCIATION

November 15, 2023

Assembly Committee on Health, Aging and Long Term Care
Layla Merrifield, Executive Director, WTCDBA

AB-667 - Funding for Technical College Oral Health Care Programs
AB-668 - Licensure of Dental Therapists

Thank you, Chairman Moses, and Members of the Committee, for the opportunity to speak today. Wisconsin's technical colleges ask for your support for this package of bills to expand and support the oral health care workforce pipeline.

Technical colleges currently operate eight dental hygiene programs and 14 dental assistant programs, either as short-term technical diplomas or one-year CODA programs. Employment rates for these graduates range from 96% to 99%, six months after graduation. We know from our employer-partners that even more graduates are needed, and every year, we have more qualified students than we can accommodate in our hygienist programs. We also know that most of Wisconsin's counties are considered dental health shortage areas, and simply don't have enough dentists, hygienists, or assistants.

That shortage is pervasive in rural northern, western, and central Wisconsin counties. North-central Technical College (NTC) is uniquely well-situated to help address these shortages, headquartered as they are in Wausau, with successful hygiene and assistant programs, ready and willing to expand into dental therapy. Thanks to NTC President Jeannie Worden for being here today to speak to the community need that she is seeing.

On the other hand, dental education is uniquely challenging to provide at scale. Our students receive hands-on education from industry experts, who have years of experience as working dentists. Accreditation standards mandate that clinical process courses have student-faculty ratios no higher than 5 to 1 for hygienists, or 6 to 1 for assistants. Each student requires dedicated lab space to practice their skills. All of these factors contribute to operating costs of up to \$30,000 per year, per hygiene student. Dental chairs and other operatory equipment are highly specialized and capital-intensive. Even modestly-sized labs cost hundreds of thousands of dollars to properly equip, and easily surpass \$1 million when necessary facility improvements are included. At the same time, technical colleges are also hearing growing demands for more qualified graduates in health care programs, IT, skilled trades, manufacturing, emergency responders, and many other fields. We are increasingly challenged to meet each of these needs.

We appreciate our partners, particularly the bill authors, the Joint Finance Committee, and the Wisconsin Dental Association. We thank them for their ongoing support and collaboration on behalf of oral health programs offered by technical colleges. Thanks also to the Marquette dental school, rural public health advocates, and Wisconsin's community health centers, and all who have worked tirelessly toward the shared goal of access to dental care for all Wisconsinites. We ask for this committee's support to continue this important work. Thank you.

Chair Moses and members of the Committee,

My name is Jennifer Lehto, I am the Immediate Past President of WI-DHA. I am a Registered Dental Hygienist and Certified Dental Assistant. I work at Chippewa Valley Technical College (CVTC) as a dental assisting instructor, dental hygiene instructor, and a clinical hygienist. I am pleased to testify again in support of this bill.

Although I am not interested in becoming a dental therapist I want to advocate for it to better serve our communities in Wisconsin. I have witnessed the incredible deficit of available dental care providers in underserved populations. Especially rural residents, children, the elderly, veterans, and those with special needs. I am passionate about volunteering, especially at events like Give Kid's a Smile and Give Vet's a Smile. At these one-time yearly events, this would often be the only time these individuals and families would see a dental provider. They would drive hours, wait hours, and in the minimal time available we would do our best to provide whatever we could.

A few things I would like for you to know about CVTC. CVTC is a working and learning dental clinic. CVTC has a partnership with Marquette to provide care to our community members who lack a dental home due to patients' financial situations. We are not a free clinic, but we provide inexpensive dental care for low-income and Medicaid patients. We do our best to serve our community needs but have extensive waiting lists due to dental shortage areas in our county and the surrounding counties. Annually, we provide services for patients who reside in 20-24 different counties. I hear countless stories about how many hours they drove to find a clinic that would provide care and accept their insurance. They were grateful to be able to find someone after exhaustive searches for providers and the endless waitlists. Many would try to seek relief using ill-equipped Emergency Rooms as their only option. Still, I wonder how many more were not able to find any care at all.

I would like to emphasize the importance of recognizing the incredible need in Wisconsin. One viable solution is dental therapy in Wisconsin. Dental therapists will work collaboratively under the supervision of a dentist or dentists. These providers allow the underserved quicker and more availability to necessary care. Dentists could also benefit from dental therapists by helping to lower overhead costs while increasing access to care. This will help serve their communities without worrying about the burden of Medicaid reimbursement rates, thus better-serving patients that are viewed as not as profitable. Dental therapists are a more cost-effective option for simple procedures allowing dentists more flexibility to perform more complex, profitable ones. I believe strongly that all dental team members should be encouraged and allowed to work to their full scope to maximize office production, meet the needs of patients, and serve Wisconsin citizens. Dental therapy is a solution to help provide access to care to all members of our community, regardless of socio-economic barriers and location, and that is why I am speaking in support of this bill.

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Wisconsin
DENTAL HYGIENISTS'
ASSOCIATION

Testimony in SUPPORT of AB-668, Licensure of Dental Therapists

Good morning Chair Representative Moses and members of the committee:

My name is Robin Hemerley, I am the current President of the Wisconsin Dental Hygienists Association (WI-DHA). On behalf of the WI-DHA statewide membership, we **support** Assembly Bill 668 and would like to express our appreciation to all those legislators who have worked diligently over the past several years to advance dental therapy legislation, particularly Senator Mary Felzkowski. We believe this is an exciting opportunity for the whole oral health community and we are hopeful to see it come to fruition during this session.

I am honored to offer testimony on behalf of the WI-DHA. We continue to be **in support** of dental therapy and believe that incorporating another licensed oral health provider will help to provide better access to care and improve oral health in Wisconsin. A multi-faceted approach to care, that includes dental therapy, allows each provider to work to the top of his or her scope of practice, providing thorough, inclusive care in all populations.

I would also like to offer **support** for this bill based on my own personal perspective. Since 2010, my career has been focused in public health with a mobile dental program serving in areas of rural Wisconsin with a large population of uninsured or medicaid-dependent children and adults. Part of this experience has been working with a school-based sealant program. In schools I have seen many children who live with untreated tooth decay. Some of these children are in pain, have an abscessed infection, or have other dental needs that should be urgently addressed. I am able to connect these families and children with my local federally qualified dental clinic to get scheduled for further evaluation and care. However clinics are often limited to the number of patients that can be seen by the available providers. Children dependent on Medicaid often have further limitations to available dental care.

Another aspect of my experience with mobile dental care is to offer preventative services in long-term care and nursing home settings. Many residents have limited mobility and other health issues that put them at a high risk for dental concerns and can prevent them from seeking dental care in a traditional

setting. Loss of teeth, untreated cavities, and other oral disease leaves these adults in pain and unable to eat properly.

I am proud to see Wisconsin continue to take strides towards mitigating the concern of access to dental care. Increase of Medicaid reimbursement and increasing the practice settings for dental hygienists has helped bring care to the underserved. However, there is still a large population of Wisconsin residents who struggle to find dental care. I believe the next step towards increasing access to care in Wisconsin, is to add an additional licensed provider - a dental therapist.

A dental therapist easily fits into a mobile care model. Following the guidelines laid out in this bill, once a collaborative management agreement has been established and supervision period fulfilled, this type of provider could work remotely to offer care in schools or long-term care facilities like nursing homes. By utilizing a dental therapist and mobile equipment, mobile programs could offer more comprehensive care and restorative services when people are unable to be seen for treatment in a traditional setting.

I have seen, firsthand, the impact that poor access to dental care has, and I truly believe that incorporation of dental therapists into the dental team will improve access to dental care in smaller, rural areas. Better access to dental care will certainly make a lasting impact on the health and well-being of Wisconsin's residents throughout their lives.

Thank you for taking the time to hear testimony on dental therapy. Your time and commitment is sincerely appreciated.

Respectfully submitted:

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A handwritten signature in black ink, appearing to read 'Robin Hemerley', written in a cursive style.



Support for Legislation Authorizing Licensure of Dental Therapists (LRB-4950/1 & LRB 5024/1)



The connection between oral health and overall health is well documented, and Wisconsin is lagging in several oral health indicators, especially for children. Advocates agree that authorizing licensure of Dental Therapists in Wisconsin would directly improve access to care in our state. Recent annual data show that less than one-third of individuals under the age of 21 enrolled in Wisconsin's Medical Assistance program received preventative dental services. There are numerous documented cases across the country of patients dying because of preventable dental infections going untreated, and sadly many patients experiencing oral health pain and decay miss work and school due to preventable oral health issues. Further, untreated oral health issues cause costly emergency room visits. In Wisconsin, nearly 23,000 emergency room visits for preventable dental conditions were reported in 2019.



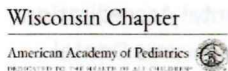
Ascension



The authorization of Dental Therapists in Wisconsin is an important step to improve access to dental care. There is no one silver bullet that will fix this problem. However, our neighbors in Minnesota have allowed dental therapists to practice and have well documented the success this change has made. There are currently 13 states that have authorized the practice of Dental Therapy across the country and it's time Wisconsin is added to this list of innovators. The coalition of organizations supporting Dental Therapy in Wisconsin is broad, including disability rights organizations, a free-market think tank, primary care clinics, hospitals, insurers, and community-based service providers. We encourage state lawmakers to pass Dental Therapy legislation as an important tool to improve oral health in Wisconsin. The undersigned draw your attention to the following elements of the legislation:



1. Dental Therapists are intended to be a member of the dental team and not work independent of a Dentist. Wisconsin's Dental Therapy legislation requires a licensed Dental Therapist, after the completion of their education and receiving their license, to practice under direct or indirect supervision for 2,000 hours before they can practice under general supervision. Dental Therapists are required to enter into a collaborative management agreement with a licensed Dentist. This allows the Dental Therapist and Dentist to collaborate on treatment planning and the provision of care. This model is working well in Minnesota with more than 100 licensed Dental Therapists practicing across the state since the first dental therapist graduates in 2011 became licensed.
2. Dental Therapists are well trained and educated. The Commission on Dental Accreditation (CODA) adopted standards for Dental Therapy education in 2016. CODA ensures Dental Therapy training programs educate their graduates to meet a level of competency in the services which they will be providing. CODA has recently granted accreditation to programs in Alaska, Oregon, and Minnesota.
3. To support improved access to dental care for those populations that are currently most severely impacted by provider shortages and poor oral health outcomes, Wisconsin's Dental Therapy legislation requires that Dental Therapists practice in a dental health professional shortage area or provide care to special populations. "Special populations" as defined by the bill include a patient base where at least 50% of clients served are from any of the following groups: Medical assistance patients, uninsured patients, patients at free and charitable clinics, patients at Federally Qualified Health Centers, individuals who reside in long term care facilities, patients who are members of federally recognized tribe or band or those residing on tribal lands, veterans, and patients that have a medical disability or chronic condition limiting their access to dental care.



- Dental Therapists, similar to Physician Assistants on a medical team, provide cost-effective preventive and routine restorative care. Dentists in Minnesota who have hired Dental Therapists are seeing more patients and have increased revenue. A 2014 report released by the Minnesota Board of Dentistry and Department of Health shared in addition to more patients being seen, more than 80% of new patients seen by Dental Therapists were publicly insured. Patients experienced less travel time and decreased wait times. More recent estimates in Minnesota show dental therapists have provided more than 107,600 patient visits.
- With a CODA accredited dental school and eight CODA accredited dental hygiene schools in Wisconsin, there is already an educational infrastructure to explore training programs in our state. Several technical colleges have already expressed interest in developing training programs once Wisconsin's legislation is passed.

For these reasons, our organizations support Dental Therapy in Wisconsin. Dental Therapists will be well educated, trained, licensed and provide high quality and most importantly much needed care to many in Wisconsin who currently lack access to dental care. **We urge you to authorize Dental Therapy in Wisconsin and sign on in support of LRB-4950/1 & LRB 5024/1.** Sincerely,

- Access Community Health Centers
- American Family Children's Hospital
- Alliance of Health Insurers
- Anthem Blue Cross Blue Shield of Wisconsin
- Ascension
- Bad River Health and Wellness Center
- Badger Institute
- Disability Service Provider Network
- Children's Health Alliance of Wisconsin
- Children's Wisconsin
- Delta Dental of Wisconsin
- Kids Forward
- Minnesota Dental Therapy Association
- NorthLakes Community Clinic
- Oneida Nation
- Penfield Children's Center
- Rural Wisconsin Health Cooperative
- Sixteenth Street
- Social Development Commission
- Southwestern Wisconsin Community Action Program, Inc.
- UW Health
- UW Health Kids
- The Arc Wisconsin
- Wisconsin Oral Health Coalition
- Wisconsin Association of Health Plans
- Wisconsin Association of Free and Charitable Clinics
- Wisconsin Assisted Living Association
- Wisconsin Association of Local Health Departments and Boards
- Wisconsin Chapter American Academy of Pediatrics
- Wisconsin Dental Hygienists' Association
- Wisconsin Hospital Association
- Wisconsin Primary Health Care Association
- Wisconsin Public Health Association



November 15, 2023

Wisconsin State Assembly
Committee on Health, Aging and Long-term Care

Testimony in favor of AB 668: Licensure of Dental Therapists

Dear Chairman Moses, Vice-Chair Rozard and Members of the Committee:

On behalf of Ascension Wisconsin, thank you for the opportunity to submit this testimony in support of AB 668, Licensure of Dental Therapists. Ascension Wisconsin operates 17 hospitals and more than 100 related clinics and other health care facilities from Racine to Appleton. We employ more than 1,100 primary and specialty care clinicians and serve 629,000 unique patients annually. We are committed to providing quality care and ensuring that the unique needs of our patients and larger communities are being met. This commitment extends beyond medical care in Milwaukee and Racine. Ascension Wisconsin provides dental care in both Milwaukee and Racine through the Ascension Wisconsin Smart Smiles program and Ascension Seton Dental Clinic.

Ascension Wisconsin supports AB 668, which would create a new licensure for dental therapists in Wisconsin, allowing dental care teams to operate with greater efficiency and allowing dentists to focus on the most complex patient care. We believe licensed dental therapists will allow each member of our care team to practice at the top of his/her license while expanding access to preventive and restorative dental care to the many vulnerable patients who seek care through Ascension's dental services.

Ascension currently operates two critical dental programs, Ascension Smart Smiles and Seton Dental Clinic. Our care team regularly witnesses how limited access to dental care negatively impacts the health of children, families and our communities at large. The impact is especially acute for people who are most vulnerable in our communities, including those living in poverty. As of November 1, 2023, Kaiser Family Foundation reports that Wisconsin currently has 180 Health Provider Shortage Areas, leaving over 1.6 million without adequate dental resources. An estimated 279 practitioners are needed to fill this gap.

Smart Smiles and Seton Dental Clinic teams currently include 10 dental assistants, 7 full-time dental hygienists and 3 full time dentists. In 2022, the Smart Smiles served approximately 11,500 students in 107 Milwaukee schools and over 800 students in 10 Racine schools each year, making this program Wisconsin's largest provider of school-based oral health care. Smart Smiles provides students preventive care including screening, cleanings, and fluoride application.

Nearly 40% of Smart Smiles patients have untreated cavities and other early restorative needs. Another 1,000 students annually have acute dental needs that have progressed to the point where they need urgent treatment to receive care for abscess, infection and tooth extractions. These patients are often referred into Ascension Seton Mobile Dental Clinic, which provides follow-up care at the schools for students without a dental home.

November 12, 2023

Wisconsin State Assembly
Committee on Health, Family and Labor Law

The Ascension Seton Dental Clinic has two locations in Milwaukee; within St. Francis Hospital and at the Outreach Community Health Center. The Seton Clinic team provides urgent care dental services, which include examinations, x-rays, cavity treatment, basic extractions and identifying other oral health needs or emergencies to those living in poverty. Many patients seen at these clinics are referred directly from our emergency department. In 2022, we served over 600 un- and underinsured patients with acute needs at these clinics.

Adding a dental therapist to our teams would allow our Ascension Smart Smiles and Seton Clinic to increase the breadth and talents of our dental care teams, ensure providers can practice at the "top of licensure" in a manner similar to our medical clinics, and expand our ability to reach more patients in need of scarcely available dental services. Dental therapists are needed now, more than ever, as we continue to experience professional shortages and see great need for care within our patient population.

Thank you for your consideration of this new licensure option. We respectfully urge you to support AB 668 to create a licensure for dental therapists, who could work under the supervision of and in collaboration with a dentist, as it is one way to quickly increase access to care.

Thank you for the opportunity to provide this written testimony. If you have any questions or if we can provide additional information, please contact Tracy Wymelenberg, Director, Advocacy and Government Relations, at tracy.wymelenberg@ascension.org.

Ascension currently operates two dental clinic programs: Ascension Smart Smiles and Seton Dental Clinic. Our care team regularly witnesses how limited access to dental care negatively impacts the health of children, families and our communities at large. The impact is especially acute for people who are most vulnerable in our communities, including those living in poverty. As of November 1, 2022, Kaiser Family Foundation reports that Wisconsin currently has 1.5 million people living in poverty, a 1.5 million increase since 2019. The number of people living in poverty is expected to increase to 1.8 million by 2030.

Smart Smiles and Seton Dental Clinic serve primarily underserved populations. Smart Smiles dental programs and Seton Dental Clinic dental programs serve underserved and vulnerable populations in the Milwaukee area and our 400+ locations in 10 counties across south and central Wisconsin. Ascension's rapid growth of acute-care dental health care, Smart Smiles dental programs and Seton Dental Clinic dental programs are increasing demand for dental services.

Many of our dental clinic patients have unmet dental needs and often face significant barriers to care. Our dental programs currently have acute dental needs that have progressed to the point where they need urgent treatment to prevent pain, infection, abscesses and tooth extractions. These patients are often referred into Ascension's Emergency Room, Urgent Care, which provides urgent care at the expense of the patient's out-of-pocket costs.



Assembly Bill 668 - Licensure of Dental Therapists
WAFCC Written Testimony
Assembly Committee on Health, Aging and Long-Term Care
November 15, 2023

Chairman Moses, Vice Chair Rozar, and Members of the Assembly Committee on Health, Aging and Long-Term Care, thank you for the opportunity to submit written testimony today in support of LRB-4950 – Licensure of Dental Therapists. My name is Dennis Skrajewski and I’m the Executive Director of the Wisconsin Association of Free & Charitable Clinics. Our small, non-profit organization exists to support the 95 free and charitable clinics (FCCs) throughout the State. These 95 clinics provide medical, dental and behavioral health care to >160,000 uninsured and underinsured Wisconsinites annually.

As you know, the state of Medicaid Dental services in Wisconsin is “challenged”. Access to Medicaid Dental services is quite limited and in many cases, unavailable to the neediest of our State. We believe that correcting this situation will require multiple, complementary initiatives and that utilizing Dental Therapists to increase cost-effective access to care is part of the overall solution. If allowed to practice in Wisconsin, Dental Therapists could:

- provide cost-effective routine dental care,
- free up their supervising dentists to provide more complex services,
- improve access to care, particularly in underserved communities, and,
- reduce disparities in accessing dental services.

I’m confident that, if authorized in Wisconsin, Dental Therapists would thrive in our free and charitable clinics. Our low-cost environments are perfect to effectively leverage these cost-effective, mid-level providers to extend dental care into the underserved in our communities.

We support the enhanced training and experiential language in this new bill and strongly support its passage. Thank you Chairman Moses, Vice Chair Rozas and Committee Members!

Respectfully,

Dennis Skrajewski

Dennis Skrajewski, PA, MBA, FACHE
Executive Director
Wisconsin Association of Free & Charitable Clinics
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Pewaukee, Wisconsin 53072

To Whom it May Concern:

I come from a dental family. My husband practiced for 40 years and I am a Hygienist who practiced with him. I speak from experience when acknowledging the need for Dental Therapists as part off the dental team.

I am currently working with the Bread of Healing Clinics. The need is seen daily. Bread of Hope dental clinic is 4 weeks out for dental appointments and hygiene is 6 months out.

We need to work together to ensure that every person has access to the means to achieve dental health and consequently overall health. Dental Therapists improve access to preventive and early dental care.

We need to educate the next generation of dental health care professionals which should now include Dental Therapists.

We need to be very aware of patients who are historically underserved. Those in rural communities, living in poverty, seniors and people with disabilities. Dental Therapists will have impact in all of these areas.

Please know how much the dental community appreciates what you are doing to improve our outreach. It has been a long time coming.

Thank You!!

Tommie Bohl
19125 Alta Vista Drive
Brookfield, WI

To: Chair Moses
Assembly Committee on Health, Aging, and Long-Term Care

Re: Assembly Bill 668, Licensure of Dental Therapists

Chair Moses and Members of the Committee,

Thank you for holding a hearing on multiple oral health bills today, including Dental Therapy. On behalf of the 19 Community Health Centers in Wisconsin, WPHCA supports AB 668 as one essential tool to address workforce challenges, increase team efficiency, and ultimately improve oral health access and outcomes for patients across Wisconsin.

WPHCA is the membership organization for the 19 Federally Qualified Health Centers (FQHCs or Health Centers) in Wisconsin. Community Health Centers are non-profit, community-directed medical, dental, and behavioral health providers. In 2022, Community Health Centers served nearly 300,000 patients in communities throughout the state, including patients from every county. One in five patients lack insurance, and 70% of patients are at or below 200% of the Federal Poverty Level, which is \$30,000 for a family of four. Since 2008, Community Health Centers have tripled their dental capacity to answer the call of Wisconsinites who are living without oral health care; over one-third of Community Health Center visits are for dental care. Today I am joined by a Health Center colleague who will provide testimony shortly.

WPHCA supports licensure of Dental Therapists as one way to improve access to oral health and improve oral health outcomes for patients. We appreciate the legislature's attention to addressing oral health access issues through various efforts such as the recent rate increase for private practices, oral health grants, and DHS's Oral Health Workforce Pathway Advisory Group.

The attached issue brief highlights sobering statistics about oral health care in Wisconsin. According to 2022 Medicaid data:

- Less than 40% of Medicaid-enrolled children received *any* dental services
- Only one in four working age adults received any dental care
- 26% of Medicaid members received an oral health exam and 28% received preventative services

WPHCA also analyzed licensure data from DSPS this summer and learned that more than half of Wisconsin's zip codes have no Dentists, and that an additional 22% of zip codes have less than two Dentists. This is an imperfect data set as Dentists may practice in areas other than their registration address, but provides some sense of geographic distribution of providers in the state.

WPHCA understands it will take an all-hands-on-deck approach from Community Health Centers, private practices, hospitals, public health agencies, free clinics, and partners in DHS and the legislature to improve oral health access and outcomes. Dental Therapy is a part of the solution. WPHCA has engaged with Health Center dental directors across the state on the

topic of dental therapy over the last several years and appreciate Senator Felzkowski and Representative Plumer's ongoing attention to addressing oral health care gaps through this bill. Thank you also to the 24 lawmakers who have already signed on to co-sponsor the bill.

We have carefully studied dental therapy models, including visiting Minnesota where we learned about the training and education requirements for Dental Therapists and the rigorous quality standards to which they are held. We are confident that adding Dental Therapists to the Community Health Center team would allow Dentists to focus on the most complex procedures, while Dental Therapists would assist in routine treatment, check-ups, and other services within their scope, *without sacrificing quality of care*. Adding Dental Therapists could shorten wait time for patients, provide cost-effective preventive and routine restorative care, and improve community health in multiple settings, such as through school-based services. We appreciate the updates to the bill this session that focus on high-need populations, and the attention to high-quality training for Dental Therapists, including building confidence in their skills through 2,000 hours of direct supervision.

WPHCA greatly appreciates the bipartisan support for licensure of Dental Therapy, continued coalition support, and thanks the Wisconsin Dental Association for their engagement on this topic this session.

Thank you for the opportunity to share information regarding the potential benefits for Community Health Centers and our patients, and for your consideration of AB 668.



Richelle Andrae
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ABOUT WPHCA:

WPHCA is the membership association for Wisconsin's 19 Federally Qualified Health Centers (FQHCs) also known as Community Health Centers (CHCs). Community Health Centers work to create healthier communities by improving access, providing quality health care and reducing health disparities for Wisconsin's underserved and low-income populations. Our aim is to ensure that all Wisconsinites achieve their highest health potential. We execute our mission and focus our aim through providing training and technical assistance to Wisconsin's Community Health Centers and advocating on their behalf.



Improving health. Improving lives.

November 15, 2023

To: Chair Moses
Members of the Assembly Committee on Health, Aging, and Long-Term Care

RE: In support of Dental Therapy (AB 668)

Chair Moses and Members of the Committee, thank you for the opportunity to testify today in support for Dental Therapy on behalf of Access Community Health Centers and for holding a hearing on Authorizing Licensure of Dental Therapists.

My name is Joanne Holland, the Chief Financial Officer of Access. For the past 20 years, I have worked to establish, develop and grow our dental practice so that we could address the need for dental care in southcentral Wisconsin. Each year, Access provides dental care to 20,000 people. We have clinics in Dodgeville, Madison and Sun Prairie. We also have a school-based dental program that includes restorative care. Access serves people from over 12 counties.

I support the Dental Therapy bill as one tool to improve access to oral health and improve oral health outcomes for patients. Dental Therapists will help all members of the oral health team to be efficient and allow Dentists to focus on the most complex care. Dental Therapists are highly trained professionals who will graduate from accredited programs. They will practice under the direct or general supervision of a Dentist. Authorizing licensure of Dental Therapists in Wisconsin will allow us to adapt our dental practice with a workforce that will have a greater likelihood of being sustainable over time and provide the access to care and continuity thereof that our community deserves.

The Dental Therapy Profession offers the potential of a meaningful career path for dental professionals that complements that of the Dentist. As an example, our Dodgeville Clinic currently has 3 dentists, and it may more than a year before we are able to add a fourth dentist. Yet, this practice is an excellent example of where a provider mix that included a Dental Therapist would be optimal, especially if the candidate trained in Fennimore at Southwest Wisconsin Technical College. Our patients, like all of us, have a range of dental care needs. By having a range of professionals available to treat our patients, Access and other dental providers will be better positioned to meet the needs of our community. Access' dentists are highly trained professionals who are skilled in performing complex procedures such as root canals, crowns, dentures and extractions. While some of our patients need those services, a Dental Therapist would offer capacity for less intense needs that are instrumental to maintaining one's oral health.

Our Dodgeville Dental Clinic will treat over 3,000 patients this year. Based on the number of calls we receive and community data, we estimate that at least 3,000 more people need our services in the area surrounding Dodgeville. Many of our patients travel more than one hour to reach our clinic. The clinic

manager has gas cards available because sometimes our patients have to travel so far that they run low on fuel and may not have the funds to otherwise return home. The Dental Therapy profession could help alleviate the problem of how far people have to travel as there would be more dental professionals available.

I will also add that from the perspective of one's career pathway, Dental Therapy represents a wonderful opportunity for a someone already connected to the dental field who would like to expand their skillset without having to relocate to a dental school. Access already has several staff who have trained at the technical college and see additional training in Dental Therapy as the potential for natural augmentation of their career.

The examples I offered today highlight needs experienced by people who live in a rural setting. I also want to state that Dental Therapy would be beneficial at all of Access' locations and would likely provide similar benefits in an urban setting as well.

At Access Community Health Centers, we are especially excited to see multiple bills focusing on oral health, including the new interstate licensure compact, funding for oral health training programs, and a focus on the rural workforce.

Thank you for the opportunity to testify in support of Dental Therapy on behalf of Access Community Health Centers and our patients, and for your consideration of Dental Therapy legislation. I will be happy to answer any questions you have at this time.

Thank you.

CONTACT:

Joanne L. Holland, CPA, MHA
Chief Financial Officer
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joanne.holland@accesshealthwi.org

DENTAL THERAPY: AN OPPORTUNITY TO IMPROVE ORAL HEALTH CARE IN WISCONSIN

WHAT IS A DENTAL THERAPIST?

A Dental Therapist is a mid-level provider, similar to a Physician Assistant in medicine.¹ They practice under the supervision of a Dentist and work in a team model with other oral health providers including Dental Assistants and Hygienists. Dental Therapists provide preventive and routine restorative care, including filling cavities, placing temporary crowns, and extracting baby teeth and adult teeth that are extremely loose. This allows Dentists to focus on the most complex care and work at the top of their license. Dental Therapists are not currently authorized to practice in Wisconsin.

WHY SUPPORT DENTAL THERAPY?

Many Wisconsinites, especially individuals who are uninsured, low-income, or experience health disparities, face barriers accessing preventative oral health care. COVID-19 exacerbated existing challenges, as many patients needed to delay in-person care and clinics experienced record staff departures.²

Preventative oral health care is important for both children and adults. Studies show that when children receive preventive dental care, they miss fewer days of school, and adults can avoid missing work.³ Tooth decay, pain, and poor oral health can also lead to expensive emergency room visits. The 2015 Wisconsin Healthy Smiles Survey found that ninth-grade students experiencing tooth or mouth pain two or more times in the prior year were more than twice as likely to receive lower grades in school compared to students experiencing pain less frequently.⁴

ONLY 180,000 (30%) OF THE 590,000 WISCONSINITES UNDER 21 WHO ARE ENROLLED IN MEDICAID RECEIVED PREVENTATIVE DENTAL SERVICES IN 2022⁵

ONE-FIFTH OF WISCONSIN THIRD-GRADERS HAVE UNTREATED DENTAL DECAY AND 5% HAVE AN URGENT CONDITION CAUSING PAIN AND/OR INFECTION⁶

The good news is that most oral health issues are preventable, if caught early. Authorizing practice of Dental Therapy will add options for new oral health team members, increase the efficiency of existing oral health staff, and help close the gap for needed preventative care in Wisconsin.

Wisconsin Community Health Centers provided dental care for 158,158 patients in 2022 and are dedicated to closing oral health care access gaps. Unfortunately, the wait time for a new patient to schedule preventative dental care at a Community Health Center is increasing. Primarily due to staffing challenges, some Community Health Centers are prioritizing appointments to established patients

and individuals with dental emergencies. Even for existing patients, dental appointments are often scheduled over six months out. Community Health Centers report it takes on average three months to hire a Hygienist, and over double that timeline, nearly six months, to hire a Dentist.⁷ Many patients do not have options for other sources of dental care, which means they are delaying care, and that dental concerns are exacerbated by the time they see a provider.

The majority of Wisconsin counties are dental Health Professions Shortage Areas (HPSAs); the Health Resources and Services Administration estimates that an additional 275 Dentists would be needed to remove shortage designations statewide and meet a recommended 5,000:1 population to dentist ratio.⁸

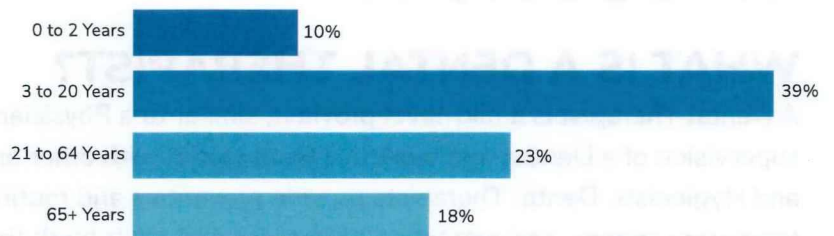
WHAT IS IN WISCONSIN'S DENTAL THERAPY LEGISLATION?

2021 Senate Bill 181 / Assembly Bill 169 was introduced by Sen. Felzkowski and Rep. Plumer, and co-sponsored by a bipartisan group of 33 legislators. In the 2021-2022 legislative session, over 25 organizations registered in support of the legislation; the Wisconsin Dental Association was neutral on the bill. Organizations such as the Badger Institute, Children's Hospital, Delta Dental, Rural Wisconsin Health Cooperative, technical colleges, Disability Rights Wisconsin, Tribal clinics, and Kids Forward were supportive. Senate Bill 181 passed unanimously in the Senate; no hearing was held in the Assembly.

% Medicaid Members with any Dental Service by Age Group in Wisconsin

(DHS 2022)

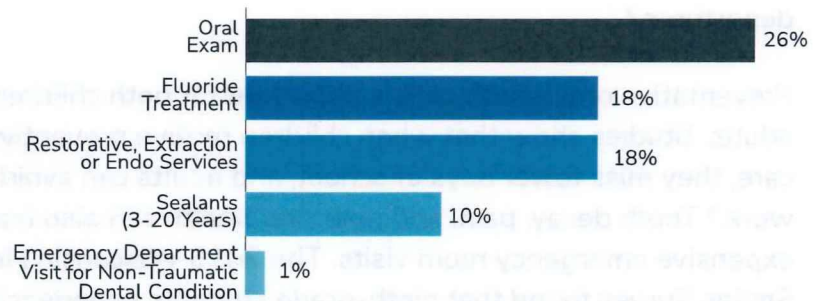
Less than 40% of Medicaid enrolled children (ages 3-20) received dental services in 2022. Working age adults and seniors were even less likely to have received dental services.



% Total Medicaid Members by Receipt of Oral Health Service by Type in Wisconsin

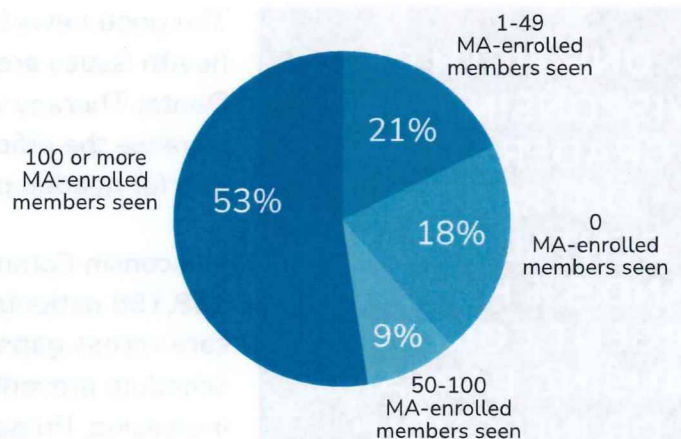
(DHS 2022)

26% of Medicaid members received an oral health exam and 28% of members received preventive services (Fluoride treatment and Sealants for children 3-20).



Wisconsin Medicaid Enrolled Dentists and Medicaid Patient Care Provided

(DHS 2022) N=878 Dentists

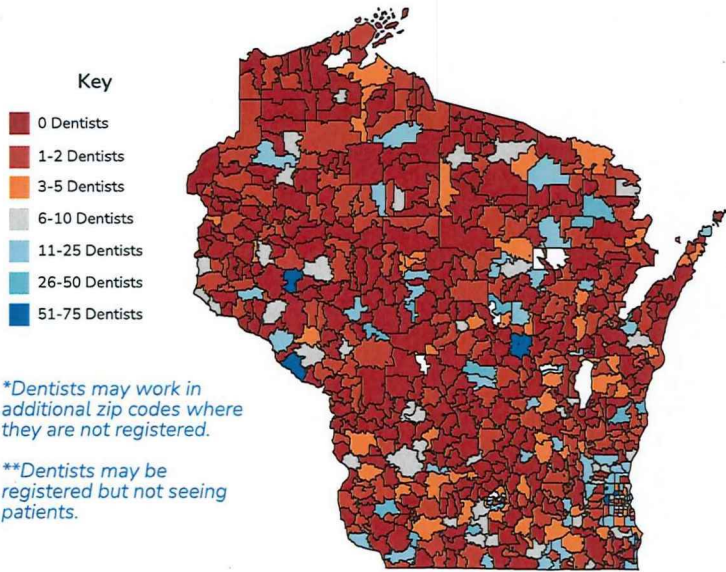


NEARLY ONE-FIFTH OF MEDICAID-ENROLLED DENTISTS DID NOT SEE MEDICAID PATIENTS⁸

Number of Dentists Licensed by Zip Code in Wisconsin

(DSPS 2023) N=3,444 licensed dentists

53% of zip codes in Wisconsin have 0 Dentists registered.
An additional 22% of zip codes have less than 2 Dentists.⁹



*Dentists may work in additional zip codes where they are not registered.

**Dentists may be registered but not seeing patients.

TRAINING AND SUPERVISION REQUIREMENTS

The legislation outlines a set of procedures that Dental Therapists may perform, subject to a collaborative management agreement with a Dentist. Once a licensed Dental Therapist has provided services for at least 2,000 hours, they may provide care under the general supervision of a Dentist. Dental Therapists must also, under the bill, either 1) limit their practice to federally defined dental shortage areas or 2) practice in settings where at least 50% of their patient base consists of certain specified populations such as individuals enrolled in Medicaid, uninsured patients, veterans, and individuals with disabilities. They must also graduate from an accredited training institution, or, if unaccredited, receive approval from the Wisconsin Dentistry Examining Board. Fortunately, several technical colleges in Wisconsin are interested in starting Dental Therapy programs.

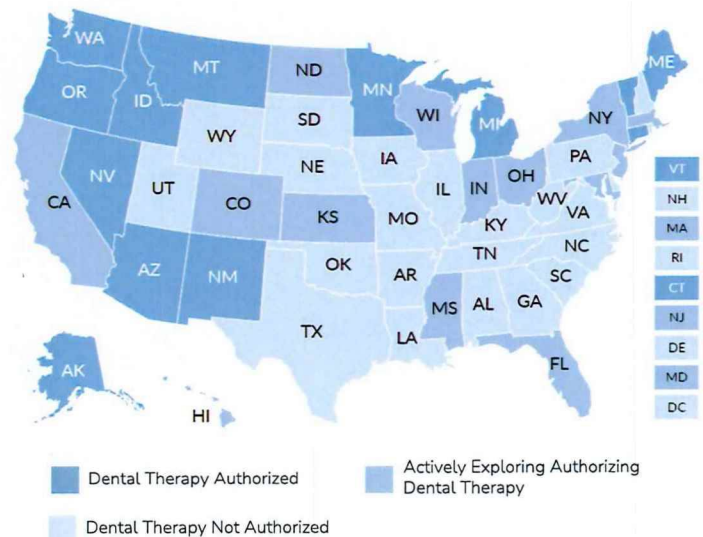
WHERE DO DENTAL THERAPISTS PRACTICE IN THE U.S.?

Dental Therapists are authorized to practice in at least some settings in 13 states.¹⁰ Over a dozen other states are actively exploring authorizing Dental Therapy.

IS THERE EVIDENCE SHOWING DENTAL THERAPISTS PROVIDE HIGH-QUALITY CARE?

Yes! Studies of models in Alaska, Minnesota, and other states suggest that Dental Therapists, while working within a set of allowable determined procedures, offer the same quality of care as Dentists.¹¹

Dental Therapy Policies by State¹²



¹ National Partnership for Dental Therapy. *About Dental Therapy*. 2022.

² National Association of Community Health Centers. *Current State of the Health Center Workforce*. 2022.

³ Wisconsin Oral Health Coalition. *Wisconsin's Roadmap to Improving Oral Health - 2020-2025*. 2020.

⁴ Wisconsin Department of Health Services. *Oral Health Program. Wisconsin Healthy Smiles Survey*. 2015.

⁵ Centers for Medicare & Medicaid. *Early and Periodic Screening, Diagnostic, and Treatment*. 2022.

⁶ Wisconsin Department of Health Services. *Oral Health Program. Healthy Smiles Healthy Growth*. 2018

⁷ Wisconsin Primary Health Care Association. *Wisconsin Community Health Center Workforce Report July 2022*.

⁸ Wisconsin Department of Health Services. *Number of Dentist FTEs Needed to Reduce Significant Shortages for Medicaid Members*. 2019.

⁹ Department of Safety and Professional Services. *List of Dentists Registered in Wisconsin*. 2023.

¹⁰ Oral Health Workforce Research Center. *Authorization Status of Dental Therapists by State*. 2020.

¹¹ Health Resources & Services Administration. *Supporting Dental Therapy through Title VII Training Programs: A Meaningful Strategy for Implementing Oral Health Care*. 2022.

¹² PEW. *National Momentum Building for Midlevel Dental Providers*. Updated January 2023.



Family Health Center
of Marshfield, Inc.

November 15, 2023

To: Chair Moses
Members of the Assembly Committee on Health, Aging, and Long-Term Care

RE: In support of Dental Therapy, Assembly Bill 668

Chair Moses and Members of the Committee, thank you for the opportunity to provide support for Assembly Bil 668, Licensure of Dental Therapists on behalf of Family Health Center of Marshfield and for holding a hearing on Authorizing Licensure of Dental Therapists.

My name is Tena Springer, the Director of Dental Operations at Family Health Center of Marshfield. I have been in this position since July of 2019. I previously served as the Director of Dental Operations at Primary Health Care, Inc in Des Moines, Ia from 2010-2019. Prior to that, from 2004-2010, I was a professor of Dental Hygiene at Des Moines Area Community College. I have served 20 years in educating and leading dental professionals in effectively providing access to communities in need. Currently, at FHC, we have 20 dental sites serving over 40,000 patients in north central Wisconsin.

I support the Dental Therapy bill as one tool to improve access to oral health and improve oral health outcomes for patients. Dental Therapists will help all members of the oral health team be most efficient, and allow Dentists to focus on the most complex care. Dental Therapists are highly trained professionals who will graduate from accredited programs. They will practice under the direct or general supervision of a Dentist. Authorizing licensure of Dental Therapists in Wisconsin will allow us to adequately provide dental care, increase access for more patients in need and improve our staffing in areas in which we struggle with dentist placement. Our current data shows that we have seen a decrease in the number of patients served in the most recent years. This can be directly attributed to our dental provider shortage. Out of our 10 dental centers, 3 are fully staffed while 4 of the ten are less than 50% staffed with dentists. 2 of these centers have had dentist openings dating back 2+ years. 3 centers have had dentist openings for over 3 years. The shortage of dental hygienists is even more severe.

Having strong dental provider teams, allows efficient and high-quality delivery of patient care. A Dental Therapist can stretch the reach of our dental centers to patients that would otherwise have to travel far to receive care or worse yet, go without the care they need. Their education and experience will enhance and supplement the care provided by their partner dentist in our centers. Our patients will appreciate the fact that we are embracing new solutions to a long standing struggle they have experienced in trying to find quality care. As we are safety net providers, we need to ensure that we are putting the needs of our communities and patients first when addressing gaps in care.



Family Health Center
of Marshfield, Inc.

At Family Health Center of Marshfield, we are especially excited to see multiple bills focusing on oral health, including the new interstate licensure compact, funding for oral health training programs, and a focus on the rural workforce.

Thank you for the opportunity to provide support for Dental Therapy on behalf of Family Health Center of Marshfield and our patients, and for your consideration of Dental Therapy legislation

Thank you.

CONTACT:

Tena Springer
Family Health Center of Marshfield
515-803-9921
Springer.tena@familyhealthcenter.org

NorthLakes COMMUNITY CLINIC

November 15, 2023

To: Chair Moses
Members of the Assembly COmmittee on Health, Aging, and Long-Term Care

Re: In support of Dental Therapy

Chair Moses and Members of the Committee, thank you for the opportunity to provide support for Dental Therapy on behalf of NorthLakes Community Clinic and for holding a hearing on Authorizing Licensure of Dental Therapy.

My name is Steffanie Bishop, Administrative Manager/Advocacy Team. NorthLakes has 10 sites that deliver dental services to our communities. At those 10 sites, in 2022 we saw 33,630 patients. Our Seal a Smile (dental outreach program) went into 296 schools across 86 school districts and 25 counties and saw 39,726 students. This program offers treatment for students that includes oral health education and dental supplies, oral health assessment by a licensed Dental Hygienist, fluoride varnish and dental sealants.

I support the Dental Therapy bill as one tool to improve access to oral health and improve oral health outcomes for patients. Dental Therapists will help all members of the oral health team be most efficient, and allow Dentists to focus on the most complex care. Dental Therapists are highly trained professionals who will graduate from accredited programs. They will practice under direct or general supervision of a Dentist. Authorizing licensure of Dental Therapists in Wisconsin will allow us to reach more patients. At this time some of our offices are not able to take new patients due to availability of the Dentists.

Delay in dental care means more than a missed cleaning; it leads to more serious oral and overall health issues, and intensive care later on. At this time at the NorthLakes clinic I work at we are no longer accepting new patients and the patients who come in for a cleaning are not able to get back in until 6/2024. This is a long wait for people with dental emergencies. Have you ever picked up a phone call from someone when their pain level is a 9 or 10 and have to turn them away? Due to not having Dental Providers to see them. I know this is not an immediate fix but at least we are making steps to help in the future.

At NorthLakes COmmunity Clinic, we are especially excited to see multiple bills focusing on oral health, including the new interstate licensure compact, funding for oral health training programs, and a focus on the rural workforce.

Thank you for the opportunity to provide support for Dental Therapy on behalf of NorthLakes and our patients, and for your consideration of Dental Therapy legislation.

Thank you.

Steffanie Bishop
NorthLakes Community Clinic
715-276-6321
sbishop@nlccwi.org



November 15, 2023

TO: Chair Moses
Members of the Assembly Committee on Health, Aging, and Long Term-Care

RE: In support of Dental Therapy, Assembly Bill 668

Chair Moses and Members of the Committee, thank you for the opportunity to provide support for Dental Therapy. On behalf of Partnership Community Health Center I am writing to provide additional information for the consideration of this Committee regarding Dental Therapy. We support licensure of dental therapy as one tool to improve access to oral health and improve oral health outcomes for patients.

Partnership Community Health Center provides dental services in 3 locations, Appleton, Oshkosh and Waupaca. In 2022 Partnership Community Health Center served 9,531 patients with 28,150 clinic visits. We participate in several Head Start programs in 3 counties providing dental screenings to children. Additionally, our Appleton Clinic provides dental care to students through a program with the Appleton Area School District.

Partnership Community Health Center appreciates the Wisconsin legislature's attention to addressing oral health access issues. As leaders in the oral health care safety net, Community Health Centers know that oral health is whole-body health. The health of our mouths is vital to our ability to consume food, drink water and communicate. Beyond healthy teeth, oral health includes being free of chronic oral and facial pain, treatment of certain oral cancers, as well as other disorders and diseases.

A 2015 Wisconsin Department of Health Services (DHS) survey found 15% of Wisconsin adults had untreated tooth decay, 17% had gum disease, and 16% needed treatment for oral decay, abscesses, or lesions.¹ The same study found one in five Wisconsin adults also reported having an unaddressed need for dental care. Partnership Community Health Center sees an urgent need to address barriers to oral health care and improve outcomes. For example:

- A current wait list of New Patients seeking care that far exceeds our capability to schedule due to treatment plans of current patients not completed. If the Dental Therapist bill were to pass, the Dental Therapist could treat many of the cases of the open treatment plans and permit the Dentist to focus on the complex cases, therefore completing treatment plans and ultimately leading the capability of seeing new patients.

The Dental Therapy bill would allow Community Health Centers to continue advancing access to oral health by incorporating dental therapists into the dental team model. We believe that

¹ Yang, A. and Olsen, M. (2015) The Oral Health of Wisconsin Adults. Wisconsin Department of Health Services. Retrieved from <https://www.dhs.wisconsin.gov/publications/p01074.pdf>



licensure of dental therapists in Wisconsin would allow Community Health Center dentists to focus on the most complex procedures, while dental therapists would assist in routine treatment, check-ups, and other services within their scope, *without sacrificing quality of care*. Adding dental therapists could shorten wait time for patients, provide cost-effective preventive and routine restorative care, and improve community health.

If the Dental Therapist bill becomes law, Partnership Community Health Center has Dental Hygienists in each of our 3 locations that are interested in becoming Dental Therapists. With your support of Dental Therapists, we anticipate that these changes could lead to the following outcomes:

- Reduction of New Patient wait lists therefore serving more people
- Completion of Treatment Plans in a reduced time resulting in a healthy mouth.
- Increased integration of our medical patients to dental services
- Reduction of wait times for a restorative procedure

Partnership Community Health Center greatly appreciates the bipartisan support for licensure of dental therapy. Thank you for the opportunity to share information regarding the potential benefits for Community Health Centers and our patients.

Sincerely,

Tracey M. Losse

Tracey M. Losse RDH, BS

Oral Health Director

Partnership Community Health Center



November 15, 2023

To: Chair Moses
Members of the Assembly Committee on Health, Aging, and Long-Term Care

RE: In support of Dental Therapy (AB 668)

Chair Moses and Members of the Committee, thank you for the opportunity to provide support for Dental Therapy on behalf of Partnership Community Health Center and for holding a hearing on Authorizing Licensure of Dental Therapists.

My name is Stephanie Rice, Registered Dental Hygienist from Waupaca, WI, and I've practiced over 16 years in various settings including public health, schools, and private practices. For the past two and a half years, I have been practicing at Partnership Community Health Center. PCHC—with offices located in Appleton, Oshkosh, and Waupaca—provides crucial medical, dental, and behavioral health services for members of the greater Fox Cities community, the majority of whom rely on Forward Health as their sole means of insurance coverage.

I support the Dental Therapy bill as one tool to improve access to oral health and improve oral health outcomes for patients. Dental Therapists will help all members of the oral health team be most efficient, and allow Dentists to focus on the most complex care. Dental Therapists are highly trained professionals who will graduate from accredited programs. They will practice under the direct or general supervision of a Dentist. Authorizing licensure of Dental Therapists in Wisconsin will allow us to treat more patients more efficiently. Currently, our backlog of patients waiting for appointment availability for treatment is very high; the average wait time being two to three months after diagnosis. For patients in pain or with complex medical histories, this is far less than ideal.

Dental Therapists would allow Dentists and Hygienists to practice at the top of their licenses, allowing efficient and high-quality delivery of patient care, alleviating some of the burden on Dentists at our clinics. Enabling practice by Dental Therapists would help to address the overwhelming needs of our community members by increasing access to care and decreasing wait times for crucial treatment.

Often times with regards to diagnosed restorative or palliative treatment, particularly in our more densely populated areas served by Appleton and Oshkosh clinics, it is not uncommon to be booked solid for 8-12 weeks of the schedule and to tell patients to call back the following week when the next week block of schedule opens to see if they can schedule.

At PCHC, we are especially excited to see multiple bills focusing on oral health, including the new interstate licensure compact, funding for oral health training programs, and a focus on the rural workforce.



Thank you for the opportunity to provide support for Dental Therapy on behalf of Partnership Community Health Center and our patients, and for your consideration of Dental Therapy legislation.

Thank you.

CONTACT:

Stephanie Rice, RDH

Partnership Community Health Center | Waupaca Dental

sricerdh@outlook.com

920.407.2234

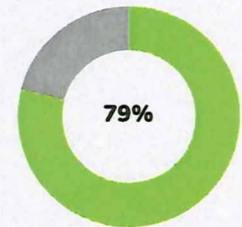
WHAT IS A COMMUNITY HEALTH CENTER?

January 2023

There are 19 federally-designated Community Health Centers in Wisconsin with more than 200 service delivery sites, serving nearly 300,000 patients.

DID YOU KNOW?

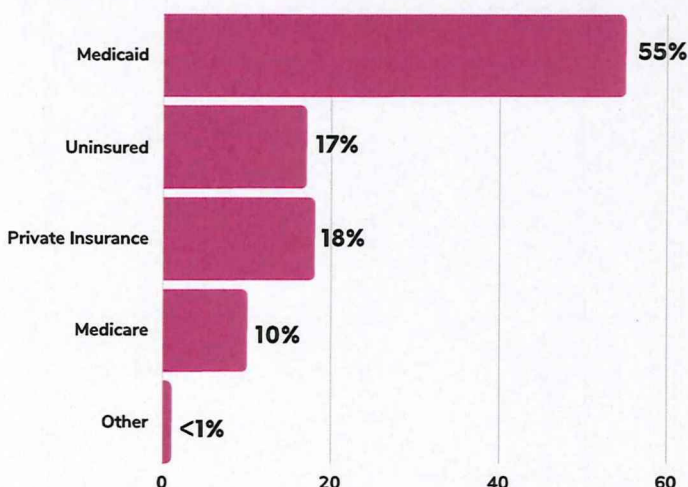
- Community Health Centers are clinics that provide **primary care services, including check-ups, behavioral health, dental care, substance use disorder treatment**, and enabling services like care coordination and community referrals.
- Wisconsin's 19 Community Health Centers are part of a national network of clinics that serve as the medical home for over **29 million people** of all ages in over 12,000 communities.
- Community Health Centers provide services to everyone **regardless of insurance status**, with fees adjusted based on a patient's ability to pay.
- Because of their special federal designation, Community Health Centers participate in unique programs like the **National Health Service Corps**, a program to place providers in areas without enough providers to serve the population.
- Community Health Centers receive **limited funding from public investments** to provide care for uninsured individuals and high-need populations (approximately one-third of revenue is state or federal grant funding).
- Every \$1 in federal investments generates \$7 in economic activity across Wisconsin, delivering over **\$652 million in economic activity annually**.



79% of Community Health Center patients live below 200% of the Federal Poverty Line.

The Federal Poverty Line in 2021 is \$26,500 for a family of four.

Insurance Status of Wisconsin Community Health Center Patients



WHAT MAKES COMMUNITY HEALTH CENTERS UNIQUE?

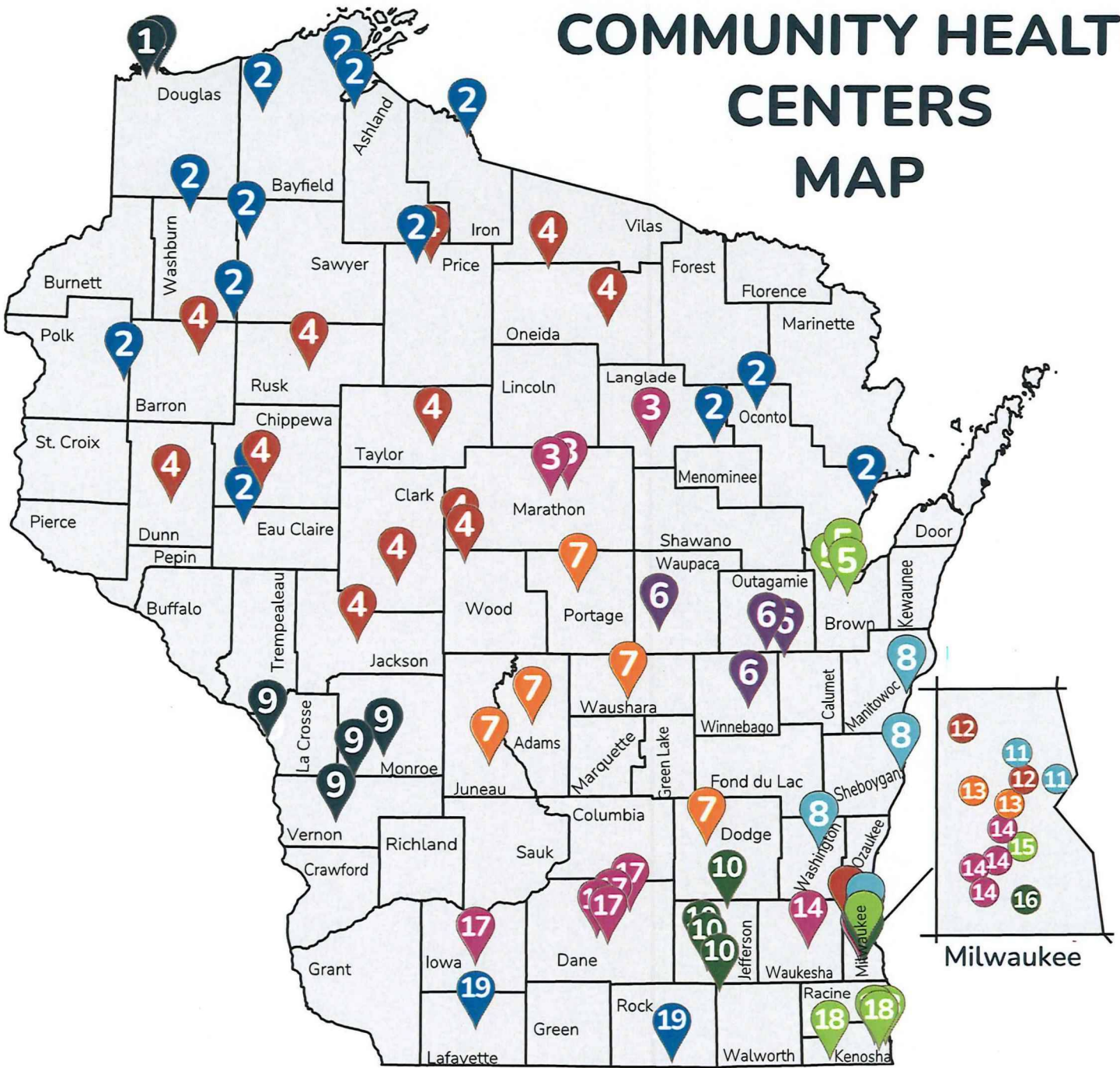
Community Health Centers are:

- Dedicated to filling gaps in traditional health care systems by serving under-resourced communities
- Private or public not-for-profit organizations
- Located in or serving high need communities, based on federal requirements, which may be urban or rural areas
- Governed by a patient-majority Board of Directors
- Responsible for meeting performance and accountability requirements and publicly reporting clinical and financial data to the federal government

Community Health Centers sit at the crossroads of health care and public health. They are not:

- Hospitals or health systems
- Free and charitable clinics
- Local public health departments

WISCONSIN COMMUNITY HEALTH CENTERS MAP



1. Lake Superior Community Health Center
2. NorthLakes Community Clinic
3. Bridge Community Clinic
4. Family Health Center of Marshfield
5. N.E.W. Community Clinic
6. Partnership Community Health Center

7. Family Health La Clinica
8. Lakeshore Community Health Care
9. Scenic Bluffs Community Health Centers
10. Rock River Community Clinic
11. Outreach Community Health Centers
12. Milwaukee Health Services, Inc.

13. Progressive Community Health Centers
14. Sixteenth Street
15. Gerald L. Ignace Indian Health Center
16. Muslim Community & Health Center
17. Access Community Health Centers
18. Kenosha Community Health Center
19. Beloit Community Health Systems



TO: Assembly Committee on Health, Aging and Long-Term Care
FROM: Michael Boeder, Chief Operating Officer, Chorus Community Health Plans
DATE: November 15, 2023
RE: Support for Dental therapy licensure – AB 668

Chair Moses and members of the Committee,

Thank you for holding the hearing today on AB 668 which would authorize the practice of dental therapy in Wisconsin. My name is Mike Boeder and I'm the Chief Operating Officer at Chorus Community Health Plans (CCHP), an affiliate of Children's Wisconsin. We appreciate the work of the bill authors, including Senator Felzkowski and Representative Plumer, and their passion for improving oral health care access in Wisconsin. I look forward to sharing brief written remarks outlining our support for dental therapists in Wisconsin.

CCHP is a mission centric licensed Health Maintenance Organization and since our inception in 2006 we have been dedicated to providing our members with access to high quality health care with community partners and providers of care to improve health outcomes and to design unique programs that are specifically designed to support our member's needs. We believe health starts in our communities, our homes, schools and workplaces. We work to strengthen and support our communities through strategic partnerships focused on increasing access to fresh food and healthy lifestyles by offering healthy shopping classes at local grocery stores, discounts on fresh produce and access to free registered dietician consultations. We offer free transportation options to members with complex needs to ensure they receive the care they need, including transportation to dental services, if needed. We offer access to safe and affordable housing via our collaboration with Milwaukee County's Housing First Program and we establish employment connections by sponsoring events with W2 and career development organizations. We offer innovative care coordination programs for members with complex conditions and wellness programs in order to support new parents and their infants as well as to strengthen an individual's ability to improve their management of asthma, diabetes, behavioral health and smoking cessation. We also offer member advocates to provide personalized support to members, including the offering of a dental advocate whose role is to specifically support the dental needs of our members. In short, we are much more than the "average" insurance company.

Currently we serve 160,000 individuals and families across eastern Wisconsin in a variety of products with approximately 52% of our membership being kids and 48% being adults. CCHP serves 140,000 members participating in the BadgerCarePlus program in 29 counties (making us the 3rd largest HMO serving the Medicaid population in the state and the largest in southeastern WI), nearly 3,000 youth in foster care in 6 southeastern Wisconsin counties through the Care4Kids program and more than 16,000 individual and family plan members in 15 counties in eastern Wisconsin through Marketplace coverage both on and off the federal Exchange. And in 2022, CCHP also began offering stand-alone dental plans for kids and adults.

While CCHP utilization rates for dental care routinely surpass that of other HMO's, we still face many challenges in supporting our members' access to dental care, notably in the BadgerCarePlus Medicaid program in particular. More than 1 million Wisconsinites receive dental coverage through Medicaid, however just over one-third of dentists in our state are able to care for these patients. Further, nationally, Wisconsin ranks at the bottom in access to dental care for kids covered by Medicaid.

Each year in Wisconsin, more than 80,000 kids under age 5 who are covered by Medicaid visit a physician, but don't visit a dentist. Within CCHP, 48.2% of our covered children and adolescents saw a dentist in 2022. This means that over half (51.8% or 38,412) of our members ages 2 - 20 did not have any contact with a dentist during the year. We believe that this statistic could be significantly improved if dental therapists were available and accessible. We know that strong oral health is critical to overall health, and especially important to patients with diabetes, heart disease, pregnant women and children.

Poor oral health, including tooth decay and gum disease, can cause significant pain resulting in days of missed work or school, and may result in potential infection or other disease. As we all know, it's important to start good oral health habits early among children as poor oral health can impact a child's ability to learn, their speech, overall nutrition and their social interactions. Lack of access to oral health care can result in individuals visiting the emergency department, which is costly and often does not address the underlying health issues. Importantly, many oral health conditions are preventable and dental therapists could be an important part of the solution to help individuals obtain timely and cost-effective care.

Adequate access to oral health care also helps reduce the likelihood of future poor oral health outcomes and keeps health care costs low. As a responsible steward of Medicaid program funding, we believe that efforts to increase access to lower cost preventive care as well as restorative services, like some of the care that could be provided by dental therapists, would be a smart investment in the overall health of our members. Licensed dental therapists working under a dentist's supervision could provide basic, yet important, restorative treatments, like filling cavities. They are trained to perform a limited number of restorative procedures, beyond the scope of a dental hygienist, which would allow dentists to focus on more complex care and treatment. Improving oral health care access requires a multi-faceted approach and several solutions. However, by working collaboratively with dentists, dental therapists could help provide much needed oral health care to some of our most vulnerable community members.

One example would be members who receive care as part of a school-based program. Currently when dental hygienists deployed in a school setting identify the need for follow up care, most often being restorations, we at times struggle to get these child members treated by a dentist in a timely manner. If dental therapists were allowed to practice in Wisconsin, a child would be able to obtain care from a dental therapist in a school setting, saving parents and caregivers time from having to leave work and allowing the child to receive care sooner. This lessens the likelihood that the child will develop more complex dental issues that when untreated or delayed cost the Medicaid program more for something that could have been easily addressed by a more efficient and safe model. Furthermore, allowing members to access appropriately trained providers like dental therapists might lead to a reduction of visits to the emergency department for dental pain which often can't be comprehensively treated in that setting leading to costlier, inefficient care. More than a dozen states have implemented a dental therapist model and the Health Resources Services Administration recommends dental therapy to better serve those lacking access to oral health care.¹

Making more providers available in more locations to meet basic restorative needs means that we save on the more costly procedures that become necessary when care is delayed too long. We also know that dental health affects overall physical health, so by utilizing dental therapists, we'd be keeping our population healthier and keeping our overall health care expenditures down, which is a proven way to

¹ <https://www.hrsa.gov/sites/default/files/hrsa/advisory-committees/primarycare-dentist/reports/actpcmd-19th-report-dental-therapy.pdf>



To: Assembly Committee on Health, Aging and Long Term Care
From: Matt Crespin, MPH, RDH, Executive Director, Children's Health Alliance of Wisconsin
Date: November 15, 2023
Re: Support for AB 668 – licensure of dental therapists

Good morning Chairman Moses and members of the committee. My name is Matt Crespin and I serve as the executive director at Children's Health Alliance of Wisconsin (Alliance). Thank you for the opportunity to share with you remarks in support of Assembly Bill 668. We know that dental therapists are one of the many tools in a toolbox that can impact both access to care and oral health in our state. Dental therapy is of course not a silver bullet, and other policy changes and financial investments must be made to address access to care in Wisconsin. Our organization has long advocated for the creation of dental therapists in Wisconsin and has been at the forefront on this issue for many years.

The Alliance is a statewide organization, affiliated with Children's Wisconsin, focused on raising awareness, mobilizing leaders, impacting public health and implementing programs proven to work. The Alliance has six key initiatives including environmental health, emergency care, medical home, injury prevention, grief and bereavement and oral health. For more than 25 years, our oral health program has focused on improving access to quality oral health services. In collaboration with the Wisconsin Department of Health Services and Delta Dental of Wisconsin, we administer the Wisconsin Seal-A-Smile (SAS) program. Wisconsin SAS provides school-based preventive oral health services to more than 75,000 children in approximately 1,000 schools across the state. We thank the legislature for their continued dedication to this program through general purpose revenue but we must do more.

Every year, 1 in 4 children we see have oral health disease beyond what our programs can provide. Imagine, if you would for a minute, how difficult it would be to sit here and concentrate if you had a toothache. Now imagine how difficult it is for a 6-year-old child to focus and learn if they are sitting in class with mouth pain. To help alleviate this, the creation of dental therapists would allow for necessary follow up care by our school-based programs to be provided right in schools by utilizing this new provider in an extremely cost effective manner.

Dental therapists in Wisconsin would be required to graduate from a dental therapy program accredited by the American Dental Association's Commission on Dental Accreditation (CODA). These highly educated providers will be able to provide care to patients in dental health professional shortage areas or to a patient base that is made up of more than 50 percent Medicaid enrollees, uninsured or underinsured patients, residents of long term care facilities, veterans or patients with disabilities that are challenged accessing care. Dental therapists are well equipped to see all residents of Wisconsin; however, like other programs we support and manage, focusing efforts on those with the greatest challenge to accessing care will be critical. Dental therapists will work under direct supervision of a dentist and under a collaborative management agreement for their first 2,000 hours and will then be able to work under general supervision while maintaining this collaborative agreement. This will allow dental therapists to work alongside our school-based prevention teams to treat the nearly 20,000 children we identify with additional needs annually.

Our SAS programs spend an immense amount of time working on case management and only a fraction of the 20,000 children needing restorative care actually obtain it. A variety of factors play into this; however, the

addition of a dental therapist to these school-based teams would virtually eliminate most of these factors and ensure children get the appropriate follow up care needed. Right next door in Minnesota, programs like Children's Dental Services have realized this and integrated dental therapy into their school-based model. This makes it easier and more efficient for children to obtain necessary oral health restorative care. In a recent visit to Minnesota, one of the takeaways I had about dental therapy was how dental therapists work as part of the dental team. The therapists who I spoke with discussed working under general supervision through a collaborative management agreement and explained the amount of collaboration they did on a regular basis with the dentist they worked with. This is a commonly misunderstood aspect of dental therapy; many believe dental therapists are meant to work completely independent or even replace dentists. This could not be any further from reality. This collaborative model is critical and mirrors what is being proposed in Wisconsin.

The Commission on Dental Accreditation (CODA) adopted standards for dental therapy education in 2016. This was a critical and important step for the profession. It is important to understand that these standards were developed after the first dental therapy schools in the US were established. The standards were developed using the standards the Minnesota Board of Dentistry established to initially allow this type of training in their state. This process included weighing testimony from the dental community at large and also included the Federal Trade Commission weighing in on the original proposed standards as they were overly restrictive. Ultimately CODA approved the standards which are now in place. CODA is also responsible for accrediting all dental and dental hygiene educational institutions across the country and is affiliated with the American Dental Association. CODA is the only authorized entity by the US Department of Education to accredit dental education institutions. The commission is made up of predominately dentists who create, update and monitor the standards. CODA requires that graduates meet a level of competency in all areas outlined in the standards. This also gives the public assurances that graduates of CODA institutions are able to provide high-quality care. Additionally, dental therapists are required to complete clinical licensure exams. Currently in Minnesota, dental therapists are required to pass the same portions of the exam dental students pass for the procedures they are able to provide. Unfortunately due to a change in our bill in Wisconsin this session, we would initially eliminate the ability for about half of the current practicing dental therapists in Minnesota to practice here until their educational institutions complete the CODA accreditation process which is currently underway. Upon achieving CODA accreditation this issue will become moot and all graduates from Minnesota will be able to eventually practice in Wisconsin.

Dental therapists in Minnesota are without question making an impact. Since 2017, more than 175,000 patient visits have occurred and data shows 80 percent of patients being seen are publically insured. Dental offices in Minnesota that employ dental therapists are able to decrease wait times, see more patients and increase revenue. Dental therapy has been practiced across the globe for many years and in the past several years, multiple states have authorized the practice of dental therapy including Michigan, Nevada, Connecticut and Arizona. It is time for Wisconsin to continue to be an innovator in the dental delivery model in the U.S. and join this movement that other states have taken the lead on.

The data, high quality educational standards and ability to improve oral health in Wisconsin is why the Alliance supports AB XXX. Our goal is to find a way to get the most efficient care to the thousands of children we identify with disease every year. There are no published studies or peer reviewed literature that show any negative effects you might hear about regarding dental therapy. We applaud the legislature and this committee for addressing this important issue. Finally, we give immense praise to Senator Felzkowski for her persistence and dedication over the past seven years to finding common ground on this issue to ensure Wisconsin becomes the next state to authorize dental therapy in the nation.

Respectfully submitted: Matt Crespin, MPH, RDH, Executive Director, Children's Health Alliance of Wisconsin,
mcrespin@chw.org, (414) 337-4562.

To: Assembly Committee on Health, Aging and Long-Term Care

Date: November 15, 2023

RE: Support for AB-668 – Dental Therapy



Wisconsin
DENTAL HYGIENISTS'
ASSOCIATION

Thank you for this opportunity to testify in support of the dental therapy bill on behalf of the Wisconsin Dental Hygienists' Association. WDHA is the organization representing the professional interests of just over 5000 licensed dental hygienists in the state and advocates for them as well as the patients who seek out and benefit from their services.

My name is Linda Jorgenson, I am a dental hygienist and I serve as the Director of Governmental Affairs and Advocacy for WDHA. Today, I want to share with you the answer to the question of "Why would dental hygienists support this proposal?"

In the year 2000, U.S. Surgeon General David Satcher published the first ever report on Oral Health in America. In it, he identified a list of disparities in the provision of oral health care. Despite being widely viewed as having the most modern dental care system on earth, Satcher also claimed that the United States has large segments of the population for whom dental care is seen as a luxury they can't afford, and is inaccessible to them. Too many people who are enrolled in Medicaid are unable to find a dentist who will take care of them because too many dentists avoid enrolling as Medicaid providers – citing reimbursement rates that are too low.

This situation leaves too many patients out of the oral health care system altogether and means that if they do have a painful dental problem, they have no other option but to go to a hospital emergency room to seek care. It is estimated that Wisconsin spends millions of dollars every year putting the dental version of a bandaid on problems that need more than the E.R. can give them. The E.R. doctor tells the patient to make an appointment with their dentist and sends them home with a prescription for antibiotics or pain medications. This may help in the short term, but the actual problem will go undiagnosed and un-treated until they can find a dentist to treat them.

In 2003, the next U.S. Surgeon General, Richard Carmonas issued a Call to Action as a follow up to the 2000 report. In the Call to Action, he recommended that the current dental workforce undergo an evaluation and modernization so that it could devise way of reducing barriers to oral health services and improving health outcomes. As a result of this, state legislatures, leaders in public health, dental, dental hygiene and dental assisting organizations began to strategize to solve problems of access and affordability.

The concept of a dental mid-level provider was born. It underwent several name changes along the way, and now the term *dental therapist* is the one we settled on. Even though the name has changed, the recommended scope of practice has always included the most common, basic dental services such as examinations, dental fillings, and removal of infected, loose teeth. These are the services that if they are provided at the right time – will keep people from resorting to hospital emergency rooms.

In 2015 the American Dental Association Commission on Dental Accreditation (CODA) wrote the standard for dental therapy education which follows the same principles as standards for dental, dental hygiene and dental assisting education programs. This is important because until the standard was established, each state had to try to hammer out those details on their own if they wanted to change their dental workforce by adding dental therapists.

As of 2023, eleven (13) states have passed legislation to license dental therapists and another eight (8) states have introduced bills to consider it.

Legislation enacted

Minnesota
Maine
Vermont
Washington (tribal lands)
Arizona
Oregon
Alaska

Michigan
New Mexico
Idaho
Montana
Nevada
Connecticut

Legislation recently introduced

Florida
Kansas
Massachusetts
New York
North Dakota
Wisconsin

Dental hygienists support these proposals for a variety of reasons, not the least of which is that they recognize adding another provider to the dental workforce who can provide restorative services will be a huge benefit for the public. Particularly if dental therapists are deployed to parts of the state where few, if any, dentists are available to take care of patients.

Dental hygienists also support the concept of dental therapists as mid-level providers because many hygienists want to expand their own careers and offer additional services. With dual licensure in dental hygiene and dental therapy, they will be able to increase the types of care they can provide for their patients.

We recognize the dentist as the head of the dental team, and also acknowledge the importance of collaborative practice management agreements between dentists and dental therapists. We agree that the addition of properly trained dental therapists to the dental workforce in Wisconsin is a common-sense solution to a growing problem. Armed with their training, their scope of practice, a license to practice, and collaborative practice management agreements, dental therapists can be positioned to improve access to dental care in our state and helping our citizens toward over-all health and improved quality of life.

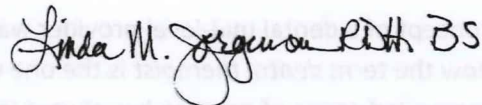
With our sincere thanks for your consideration, I'm happy to answer any questions you may have.

Linda Jorgenson, FADHA, RDH, BS, RF

WI-DHA Director of Governmental Affairs and Advocacy

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Dental Hygiene 101



Wisconsin
DENTAL HYGIENISTS'
ASSOCIATION

1. **DENTAL HYGIENISTS:** Dental Hygienists are college-educated, licensed oral health care providers whose practice focuses on primary and secondary prevention of oral diseases including tooth decay, periodontal (gum) disease and oral cancer as well as oral injuries and aesthetic concerns.
2. **ACCREDITED EDUCATION PROGRAMS:** Dental hygiene training programs are accredited by the American Dental Association's Commission on Dental Accreditation (ADA-CODA). ADA-CODA derives its authority to accredit dental, dental therapy, dental hygiene and dental assisting education programs via the U.S. Department of Education.

To become CODA accredited – education programs must meet or exceed minimum standards for ...

- Intuitional Effectiveness (Financial, community and administrative support)
- Educational Program (Curriculum, Ethics and Professionalism, and Clinical Sciences)
- Faculty and Staff qualifications
- Educational Support Services
- Health, Safety and Patient Care Services

3. **EDUCATION:** Dental hygiene education prepares the clinician to practice dental hygiene. Accredited dental hygiene programs must include all of the following coursework and competencies in these subject areas ...

General Education courses in ...

- English
- Psychology
- Sociology
- Speech
- Biology
- Chemistry
- Nutrition
- Microbiology
- Anatomy
- Physiology
- General Pathology / Human Disease

Dental education courses in ...

- Dental anatomy
- Dental histology / embryology
- Head and Neck Anatomy
- Periodontology
- Community Dental Health
- Legal aspects of dental hygiene practice (Ethics and Professionalism)
- Infection control / Safety
- Oral Pathology
- Pharmacology
- Principles of Dental Hygiene (Theory)
- Clinical practice of dental hygiene
- Health Promotion and Disease Prevention
- Principles of research and interpreting scientific literature

4. **DENTAL HYGIENE PROGRAMS IN WISCONSIN:** There are eight CODA accredited dental hygiene programs in Wisconsin that award an associates degree in dental Hygiene. It typically requires at least 3.5 years of study to complete all general education and professional course requirements. There is one BSDH degree completion program in Wisconsin.

- | | |
|---|---|
| <ul style="list-style-type: none">• Chippewa Valley Technical College, Eau Claire• Northeast Wisconsin Technical College, Green Bay• Milwaukee Area Technical College, Milwaukee• Fox Valley Technical College, Appleton• Blackhawk Technical College, Janesville | <ul style="list-style-type: none">• Northcentral Wisconsin Technical College, Wausau• Waukesha Area Technical College, Pewaukee• Madison College, Madison• Marion University, Fond du Lac (BSDH degree completion) |
|---|---|

5. **LICENSING:** In order to obtain and maintain a license in the state of Wisconsin, hygienists must graduate from an accredited dental hygiene program, pass independently administered written and clinical licensing exams, pass the WI Jurisprudence exam, apply to the WI-DSPS for a license, pay licensing fees every other year, maintain CPR / AED certification and complete clinically relevant continuing education courses annually. (WI Administrative Code – WDEB)

- Independently administered licensing exams include:
 - WI Jurisprudence exam for dentistry
 - National Dental Hygiene Board Examination (written test)
 - A standardized clinical competency exam such as the Central Regional Dental Testing Service (CRDTS)
6. **PRACTICE SETTINGS:** In Wisconsin, hygienists are permitted to work in dental offices, hospitals, medical clinics, nursing homes, assisted living facilities, group homes, schools, correctional institutions, and local health departments. (2018 Act 20) In all but the first setting (dental offices), hygienists are permitted to work unsupervised.
 7. **PROFESSIONAL ASSOCIATION:** The Wisconsin Dental Hygienists' Association is a constituent of the American Dental Hygienists' Association. The ADHA / WI-DHA serves as the voice of dental hygiene for the entire profession; advocates for and on behalf of the profession and supports high standards of patient care in service of total and oral health for all. There are just over 200,000 licensed hygienists in the U.S., and around 5000 in the state of Wisconsin. Membership is voluntary.
 8. **OCCUPATIONAL CLASSIFICATION:** Since 2018, the U.S. Bureau of Labor Statistics - Standard Occupational Classification Policy Committee has classified dental hygienists under the reference number **29-1292 – Healthcare Diagnosing or Treating Practitioners**. https://www.bls.gov/soc/2018/major_groups.htm#29-0000
 9. **SCOPE OF DENTAL HYGIENE PRACTICE in WISCONSIN:** Licensed dental hygienists are permitted by WI Statute and Administrative Codes to provide the following dental services ...

<ul style="list-style-type: none"> • Conducting a preliminary or screening examination of the oral/facial complex. (e.g., existing conditions, teeth present or missing, intra-oral cancer screening, periodontal condition, assessment of caries risk and experience, oral hygiene, and occlusion.) • Recording examination findings in a patient's dental record • Dental hygiene care planning (based on findings) • Taking a patient's health history • Exposing dental radiographs (X-rays) • Oral hygiene instructions • Taking and recording of vital signs • Administering local anesthesia by injection • Administering topical anesthesia • Administering nitrous oxide analgesia • Place temporary restorations 	<ul style="list-style-type: none"> • Administer antibiotic premedication (prescribed by MD, DDS or other prescriber) • Administration (application) of sub-gingival medicaments as an adjunct to periodontal therapy (E.g., Arestin, PerioChip, Atridox and others) • Prophylaxis (by definition D1110 and D0120 includes removal of local irritants – plaque, calculus and stains in a periodontally healthy patient) • Fluoride treatments (APF, NaF, SnF, SDF) • Sealants • Scaling in the presence of gingivitis (D4346) • Scaling and root planing (AKA Non-surgical periodontal therapy. E.g., D4341) • Periodontal maintenance (AKA supportive periodontal therapy D4910) • Referring patients and/or consulting with other medical or dental providers
<p>DENTAL HYGIENISTS are not permitted to prep and place dental restorations other than temporary ones.</p>	

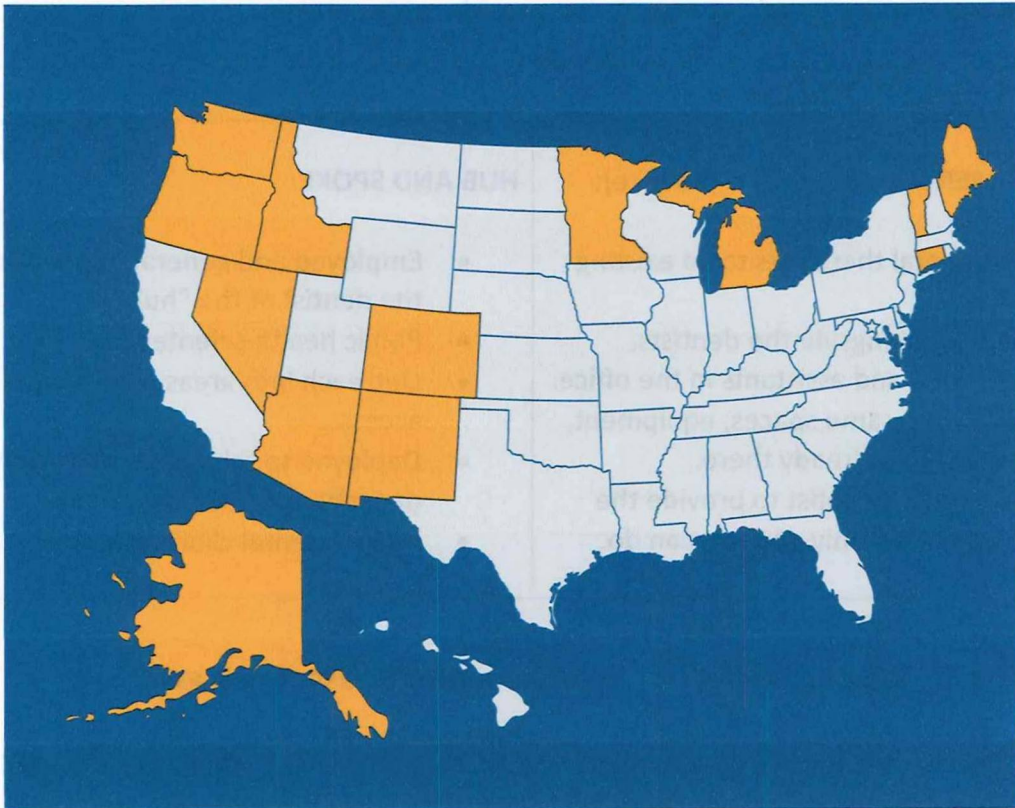


Wisconsin
DENTAL HYGIENISTS'
ASSOCIATION

The ADHA and WI-DHA encourages the passage of the Dental Therapy bill in Wisconsin.

As of 2023 thirteen states have adopted legislation allowing Dental Therapists to practice.
We want Wisconsin to be next on this list.

- Alaska
- Arizona
- Colorado
- Connecticut
- Idaho
- Michigan
- Minnesota
- Maine
- New Mexico
- Nevada
- Oregon
- Vermont
- Washington
- ***WISCONSIN could be next!***



Map from Pew National Partnership

Upon graduation from an accredited program and acquiring a license from the State, dental therapists would provide a small sub-set of basic - but critically important – restorative, therapeutic and preventive dental procedures to patients.

Procedures in the proposed scope of practice for Dental Therapists:

- Dental exams
- X-rays
- Diagnosis and care planning within the DT scope of practice
- Minor adjustments of removable dentures
- Preventive (e.g., sealants and fluoride treatments)
- Health education
- Dental cleanings
- Pulpotomy on primary teeth
- Dental fillings
- Non-surgical extraction of loose teeth
- Non-surgical periodontal therapy

There is **scope crossover** in two directions in this proposal. It calls for Dental therapists to be trained (to competency) and licensed to provide dental procedures that only dentists or hygienists can do now. WI-DHA endorses this proposal because of the tremendous unmet needs in our state. More people are needed to provide more services.

UTILIZATION MODELS:

STAFF AUGMENTATION (private practice):

- Adds dental therapists to an existing staff
- Practices alongside the dentists, hygienists, and assistants in the office.
- Utilizes the same spaces, equipment, and facilities already there.
- Frees up the dentist to provide the complex care only dentists can do.

HUB AND SPOKE:

- Employed and generally supervised by the dentist at the “hub.”
- Public health oriented
- Outreach into areas with limited or no access
- Deployed to schools, local health departments, nursing homes,
- Mobile dental clinics and vans

1.5 million Wisconsinites live in areas with dentist shortages.

Utilizing dental therapists can be an effective step towards improving access to care and achieving better oral health for more people in our state.

Linda Jorgenson, RDH – WI-DHA Director of Governmental Affairs and Advocacy



November 15, 2023
ASSEMBLY BILL 668

Chairman Moses and members of the Committee,

Thank you for conducting this hearing on AB 668, a bill that would allow the practice of dental therapy in Wisconsin. As you probably know, the Badger Institute has been championing this policy reform for years, providing research, reporting, and educational events to demonstrate the need for, and efficacy of, dental therapy.

We're delighted to see this critical reform finally advancing in a meaningful way.

If you've ever had a toothache — or any type of oral pain — you know how debilitating it can be. It can keep you awake at night, impair your ability to eat, affect your work, and limit your enjoyment of life's pleasures. Oral pain can consume your thoughts and severely impede your daily activities.

Unfortunately, too many Wisconsinites experience these symptoms and don't have access to relief. Wisconsin ranks near the very bottom of the 50 states in terms of the availability and the use rates of dental care among disadvantaged populations.

A staggering 58 of Wisconsin's 72 counties (about 80%) had too few dental providers per capita as of 2019, according to data from the Wisconsin Department of Health Services' Division of Public Health.

Children are particularly hurt by this shortage. Wisconsin has the lowest rate of dental care use among all states for the more than half a million children who receive dental benefits through Medicaid. Nearly two-thirds of that group — more than 345,000 kids — received no dental care over the course of a year, according to data from the U.S. Department of Health and Human Services.

You can imagine the adverse effect this has on children's physical development and learning.

Fortunately, there is a proven, free-market solution. More and more states are adopting dental therapy as a means of providing quality, affordable oral care in shortage areas and elsewhere.

Dental therapists are mid-level providers who perform preventive and restorative procedures — things like cavity repairs, extractions, and fluoride applications. They're licensed professionals similar to nurse practitioners or physician assistants. They work under the general supervision of dentists and usually practice in shortage areas.

And we know that dental therapy works. In 2009, Minnesota opened the door to these professionals, and the results exceeded expectations. In 2016 alone, Minnesota dental therapists provided care for nearly 100,000 patients, a figure that has almost certainly increased as the number of practicing dental therapists has grown. As of September 2022, there were 131 practicing dental therapists in Minnesota, according to the state's Board of Dentistry.

Minnesota clinics that employed dental therapists saw more patients, provided more services, and increased gross revenues, according to a 2020 study published by the Center for Health Workforce Studies at the University of Albany School of Public Health in New York.

And dentists are delighted with the results. The dentistry schools in Minnesota told us that many of the dental therapy students secure jobs even before they graduate.

As we've argued for years, it is imperative for disadvantaged children, veterans, people with disabilities, and other vulnerable populations that dental therapists be allowed to train and practice in Wisconsin. We hope you will quickly advance this measure on behalf of every Wisconsinite who's needlessly suffering oral pain.

Thank you for your time and consideration.