

SB 2231
2-11-25



Community HealthCare Association of the Dakotas

**Testimony
Senate Bill No. 2231
Senate Human Services Committee
Senator Judy Lee, Chair
January 28, 2025**

Chair Lee, Vice Chair Weston and honorable members of the Senate Human Services Committee:

I am Kim Kuhlmann, the Policy and Partnership Manager in North Dakota for Community HealthCare Association of the Dakotas (CHAD) and with me today is my colleague Shannon Bacon, External Affairs Manager at CHAD, and Nadine Boe, CEO of Northland Community Health Centers. In my position at CHAD, I also facilitate the North Dakota Oral Health Coalition. On behalf of CHAD and our member health centers, I am here today in support of SB 2231, if amended to include dental treatment for adults covered by Medicaid Expansion.

CHAD is a non-profit membership organization that serves as the Primary Care Association for North Dakota and South Dakota, supporting community health centers across both states in their efforts to provide health care to underserved and low-income populations. The health centers we represent have locations in both urban and rural communities.

Community health centers (CHCs) are non-profit, community-driven primary care clinics that serve all individuals, regardless of their insurance status or ability to pay. The community health center integrated care model includes primary care, mental health and substance use treatment, dental care, pharmacy services, and a range of case management services that can include help with transportation, finding community resources, or assistance with insurance and financial enrollments.

North Dakota is home to five community health center organizations that provide comprehensive, integrated care to more than 36,000 individuals at 22 locations in 20 communities across the state. Sixteen percent of those patients are uninsured and over half earn incomes below the federal poverty level. Three health centers in North Dakota provide dental care at seven locations, with a new urgent dental clinic opening in Ray in February. Health centers served 11,912 dental patients with over 25,000 visits in 2023.

Currently, over 34,000 North Dakotans covered by Medicaid Expansion do not have dental coverage. This remains a significant gap in an otherwise strong North Dakotan approach to health coverage.

A Medicaid Benefit Strengthens the Dental Care System for Everyone

Adding a dental benefit for the Medicaid Expansion population brings more resources into



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the health care system, and in the case of Medicaid expansion, 90 percent of those resources are federal. Let me share how the coverage numbers shape up for North Dakota health centers. Currently, around 40 percent of our patients are Medicaid beneficiaries, 13 percent are served by Medicare (which lacks dental coverage), 16 percent are uninsured, and 31 percent have private insurance coverage. When put together, that adds up nearly half of those we see lacking dental coverage. This makes it difficult to pay competitive wages and build our dental programs enough to meet community needs.

The North Dakota Department of Health and Human Services reports that only 44 percent of the need for dental providers across the state is being met. Given that we serve underserved populations and communities where there are likely to be even fewer providers than the state average, that gap looms large. Mara Jiran, CEO of Spectra Health, one of the state's community health centers, says, "Every week, hundreds of people attempt to schedule dental visits at our clinic. The demand far outweighs our current capacity. Incorporating oral health services into Medicaid Expansion would have an immediate impact at Spectra Health by creating sustainability in a challenging reimbursement model." She goes on to say, "It would reduce costly emergency visits by addressing oral health issues earlier while prioritizing cost-effective primary and preventative oral health care. This approach not only saves money but improves health outcomes. It offers the chance to expand our workforce, reduce administrative burden, and provide more sustainable care, benefiting both patients and the Medicaid program."

A Dental Benefit Would Improve Health Outcomes and Reduce Emergency Costs

For adults covered by Medicaid Expansion, adding coverage for dental care will improve their lives. Individuals who report dental care affordability concerns miss more hours of work for unplanned dental care. Better oral health results in better overall health outcomes, improves productivity, and leads to better quality of life.

We know that oral health impacts overall health and poor oral health is associated with many other serious health conditions including diabetes, heart disease, stroke, dementia, cancers, and respiratory infections to name a few. By making access to oral health care a priority for every North Dakotan, we can improve the overall health of our citizens.

According to the North Dakota Department of Health and Human Services, our state has seen a significant rise in the number of emergency room and urgent care clinic visits related to tooth pain over the last 5 years. In our "Dental Coverage for Medicaid Expansion Beneficiaries" two-pager, you can see that from 2020 to 2024, the number of tooth pain related visits, including visits to emergency rooms, primary care clinics, and urgent care, increased from 2,625 to 4,715, nearly doubling in just 5 years. These oral health related emergencies are costing the healthcare system, the Medicaid program, and patients additional money in emergency visits. And they don't even include the additional costs of the complications for patients with heart disease and diabetes that is caused by poor oral



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health. Adding dental treatment to Medicaid Expansion is one way to help reduce the costs for emergency dental care and for other health complications related to lack of access to preventive dental care.

In conclusion, a dental benefit in Medicaid expansion would strengthen an oral health system in which we are facing a real crisis in access to care and it would improve the health and lives of those who receive the coverage. It is a way to devote resources to low-cost preventive care rather than high-cost responses to more serious health conditions. I ask for your support on behalf of our member health centers to amend and recommend a do pass on SB 2231 to include dental treatment for adults on Medicaid Expansion.

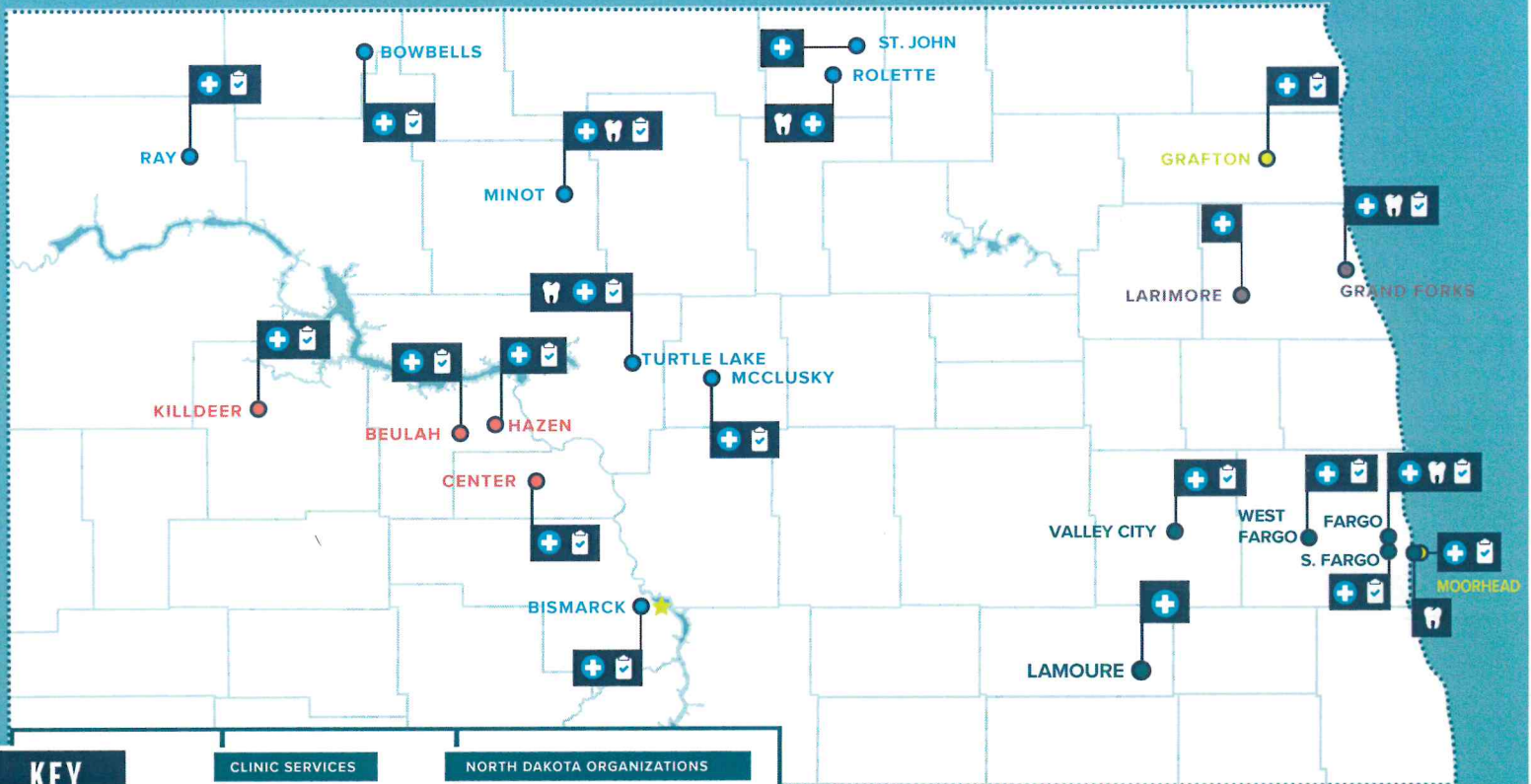
I am happy to answer any questions you have. Thank you!

Kim Kuhlmann
Policy and Partnership Manager, ND
Community HealthCare Association of the Dakotas (CHAD)



WHAT IS A COMMUNITY HEALTH CENTER?

Community health centers (CHCs) are non-profit, community-driven primary care clinics that provide high-quality primary and preventive care to all individuals, regardless of their insurance status or ability to pay. Health centers are located in underserved and low-income urban and rural areas across North Dakota, providing access to affordable, quality health care for those who need it most. The centers serve as essential medical homes where patients can receive a wide array of services including medical, behavioral, and dental care along with help with transportation, interpretation, and other case management and care coordination services. In rural communities, health centers support a community's ability to retain local health care options, supporting access to health care where rural Dakotans live and work. North Dakota's network of five health center organizations provides care to over 36,000 patients each year at 22 locations in 20 communities across North Dakota.



PATIENTS BY POVERTY LEVEL

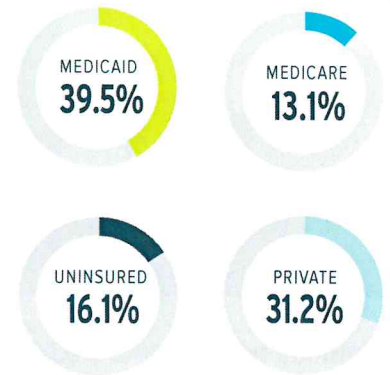


This represents a distribution of patients for whom income is known. Income is unknown for 47.0% of patients.

TOTAL PATIENTS 36,376

37.9% of total patients served are people of color

PATIENTS BY PAYOR SOURCE



ECONOMIC VIABILITY

Source: Calculations based on 2023 UDS Reports

In addition to the actual dollars that flow to local communities through health centers, their role in maintaining access to health care can have an enormous impact on the long-term economic viability of rural and urban communities throughout North Dakota. For our smaller communities, access to local health care is crucial to a town's ability to recruit new companies and maintain a healthy workforce without long out-of-town trips to the doctors or to pick up prescriptions. When a small town is able to retain access to health care, it can serve as a main street anchor, keeping other small businesses viable. Across rural and urban communities, CHCs keep health care affordable by providing health care services regardless of ability to pay and by helping patients find health coverage options that are right for them.

STATEWIDE IMPACT

North Dakota CHCs had a total annual economic impact on the state of

\$101,966,207 IN 2023



NORTH DAKOTA CHCs DIRECTLY GENERATED:

387

full-time jobs

AND SUPPORTED AN ADDITIONAL

229

jobs in other business

616

total jobs

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DENTAL COVERAGE

for Medicaid Expansion Beneficiaries

VOTE YES on SB 2231

DANGERS OF POOR ORAL HEALTH



Tooth Loss



Gum Disease



Diabetes



Mouth Cancer



Stroke
Dementia



Bad Breath



Respiratory
Infections



Heart Disease

Evidence connects healthy mouths with a healthy body, and insufficient dental coverage can negatively affect overall health.

Over
34,000

North Dakotans rely on Medicaid Expansion for their health care coverage. Today, they have NO dental coverage.



Individuals who report dental care affordability concerns miss more hours of work for unplanned dental care.



More than half of Indigenous adults reported no dental visit in the past five or more years.



Nearly 1 in 3 adults who are not Indigenous reported no dental visit in the past five or more years.

CHAD supports legislation to extend adult dental benefits to ALL North Dakota Medicaid recipients, including individuals covered by Medicaid Expansion.

“Increasing the number of insured patients adds resources to and strengthens the entire dental system. More covered patients would improve health centers’ ability to pay competitive wages and bring high-quality dentists to our rural communities.”

SHELLY TEN NAPEL
CEO, COMMUNITY HEALTHCARE ASSOCIATION OF THE DAKOTAS

MISSION OF MERCY: A PICTURE OF UNMET NEED

778

North Dakotans received care at the Mission of Mercy event in Bismarck in October 2024. Hundreds lined up (some the night before) to receive free care from volunteer dentists and hygienists.



66.9%

had “no insurance” and couldn’t afford dental care

40%

drove over an hour to attend

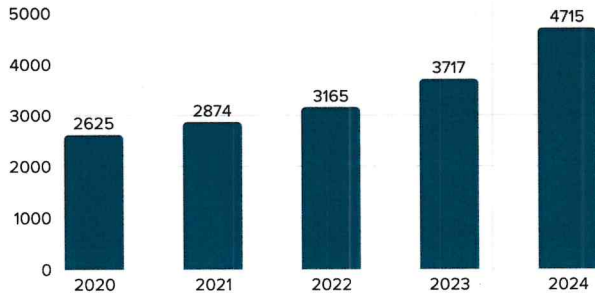
40%

reported having felt dental pain

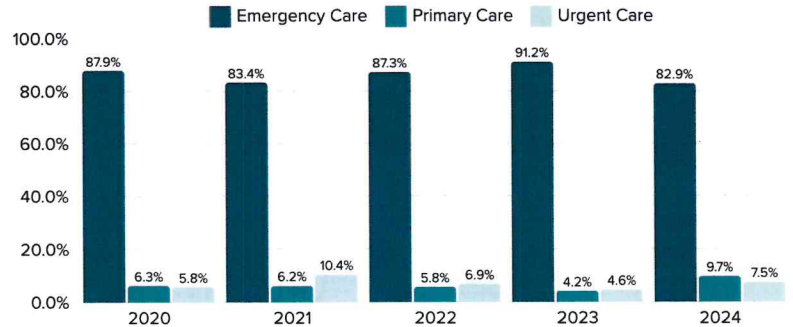
THE HIDDEN COSTS OF NOT COVERING PREVENTATIVE DENTAL CARE

Lack of coverage causes many to delay care until there is a problem – leading to much costlier health risks and treatments.

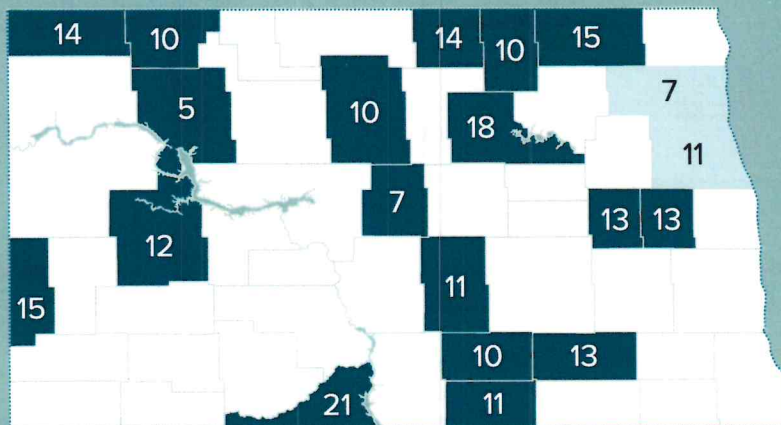
Number of Tooth Pain Events by Year
North Dakota (2020-2024)



Types of Visits Associated with Tooth Pain Events
North Dakota (2020-2024)



UNCOMPENSATED CARE HINDERS DENTAL WORKFORCE GROWTH



31% of dentists report accepting any and all Medicaid patients.

44% of the need for dental providers is being met.

69 dental care health practitioner shortage areas (HPSAs) designated in the state, with a service area of **153,291** people

■ Geographic dental health professional shortage area
■ Low-income population health professional shortage area

In 2023, Community Health Centers provided over

25,600 dental visits

in North Dakota, regardless of insurance status or ability to pay.



“Every week, hundreds of people attempt to schedule dental visits at our clinic. The demand far outweighs our current capacity. Incorporating oral health services into Medicaid Expansion would have an immediate impact at Spectra Health by creating sustainability in a challenging reimbursement environment.”

MARA JIRAN
CEO, SPECTRA HEALTH

The financial strain of uncompensated dental care for Medicaid Expansion patients at health centers makes it even more difficult to grow their dental programs and workforce. Having more patients with coverage means that more care can be reimbursed, allowing health centers to invest in workforce growth and enhance access.

VOTE YES
on SB 2231