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2003 SENATE HUMAN SERVICES

SB 2378

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10/29/03

Date

# 2003 SENATE STANDING COMMITTEE MINUTES

#### **BILL/RESOLUTION NO. SB 2378**

Senate Human Services Committee

☐ Conference Committee

Hearing Date February 5, 2003

Tape Number	Side A	Side B	Meter #
1		X	3000 - 5310
	$\mathcal{O}$	1	
Committee Clerk Signati	iro Honna	Premer	,

Minutes:

SENATOR JUDY LEE opened the public hearing for SB 2378 relating to selection criteria and eligibility for loan repayment for dentists.

SENATOR DAVE NETHING, of District 12, introduced the SB 2378. He stated created a program for loan forgiveness for dentists provided they met certain criteria. Goal is to bring more dentists into North Dakota. (Meter # 3000 - 3200)

JOE CICHY, representing the North Dakota Dental Association, appeared in support of SB 2378. He stated the purpose of the bill is to amend the statute to give more flexibility to the North Dakota State Health Council in evaluating applicants and selecting recipients for the loan repayment award. Interaction with committee regarding time constraints, program at University of Minnesota, loan repayment program, cost of program, and expenses of dentists to set up practice. (Written testimony) (Meter # 3296 - 4026)

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Senate Human Services Committee
Bill/Resolution Number SB 2378
Hearing Date February 5, 2003

GARY GARLAND, with the North Dakota Department of Health, provided testimony in support of SB 2378. It removes the community size requirements from the Dental Loan Repayment Program while giving highest priority to the state's small communities. Three dentists are selected annually to receive loans ... one in each category of communities. (Written testimony)

(Meter #4106 - 4720)

KEN KARLS, testified in behalf of himself. He stated his son is attending the University of Minnesota and wants to become a dentist. He would benefit from this program. Urged "Do Pass." (Meter # 4745 - 4830)

Public Hearing closed for SB 2378. (Meter # 5012)

Committee Discussion:

Meter # 5100 - 5175)

SENATOR POLOVITZ made a motion to DO PASS.

SENATOR BROWN seconded the motion.

Roll call was read. 6 yeas 0 nays.

SENATOR POLOVITZ to be the carrier. (Meter # 5310)

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Date: 02-05-03
Roll Call Vote #: (1)

# 2003 SENATE STANDING COMMITTEE ROLL CALL VOTES BILL/RESOLUTION NO. 2378

Senate Human Services				Committe
Check here for Conference Com	mittee			
Legislative Council Amendment Nun	nber _			
Action Taken	, 1	Pass "	•	•
Motion Made By Polovit	Seconded By Sen, Brown			
Senators	Yes	No	Senators	Yes No
Senator Judy Lee - Chairman				
Senator Richard Brown - V. Chair.	<b>'</b>			
Senator Robert S. Erbele	~			
Senator Tom Fischer	_			
Senator April Fairfield				
Senator Michael Polovitz				
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the vote is on an amendment, briefly		( 1		
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REPORT OF STANDING COMMITTEE (410) February 5, 2003 1:08 p.m.

Module No: SR-22-1714 Carrier: Polovitz Insert LC: Title:

REPORT OF STANDING COMMITTEE

SB 2378: Human Services Committee (Sen. J. Lee, Chairman) recommends DO PASS
(6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2378 was placed on the Eleventh order on the calendar.

(2) DESK, (3) COMM

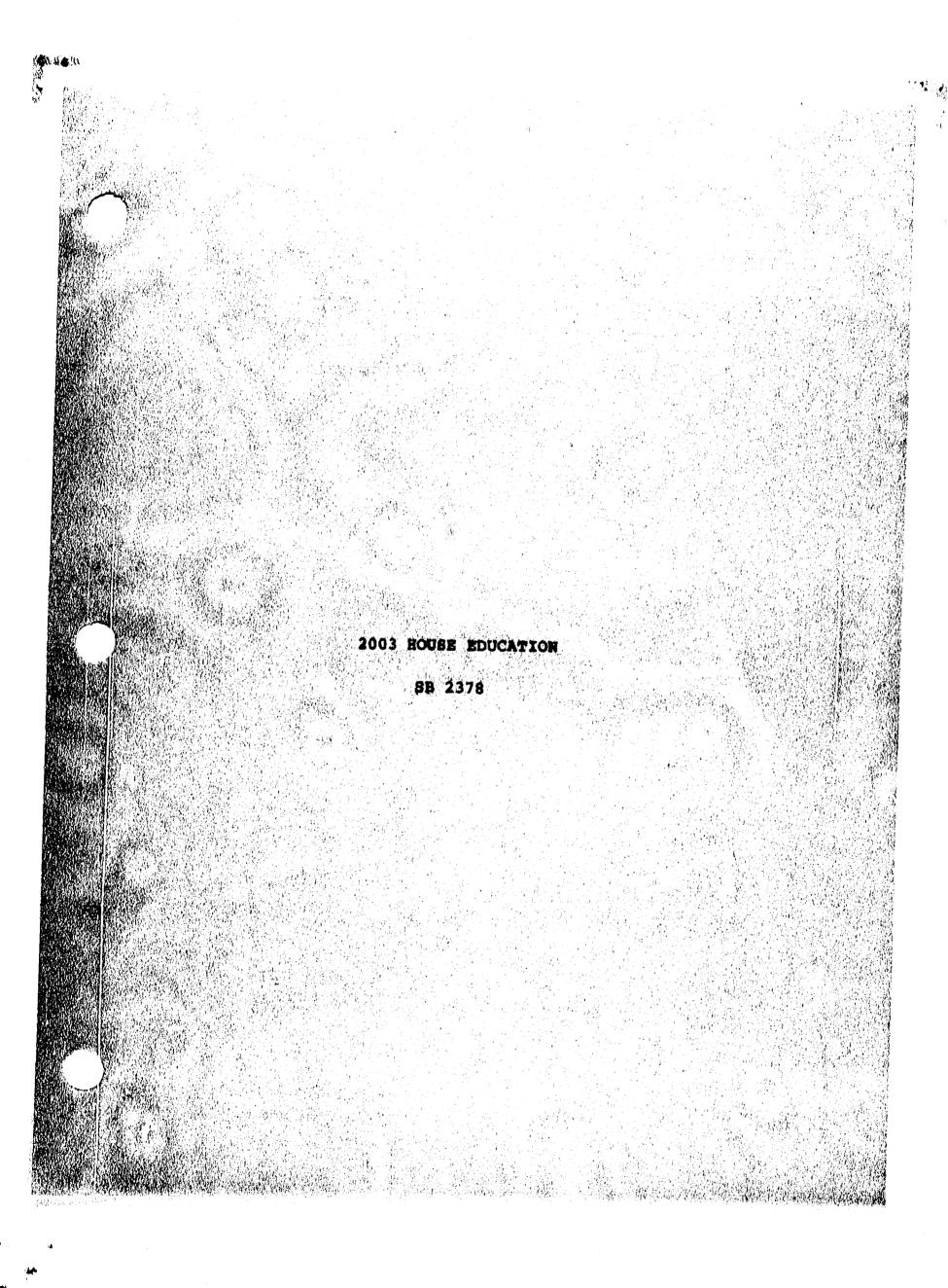
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TO MILES

# 2003 HOUSE STANDING COMMITTEE MINUTES BILL/RESOLUTION NO. SB 2378 House Education Committee

#### ☐ Conference Committee

Hearing Date March 19, 2003

Side A	Side B	Meter#
x		1960-4361
	x	3320-3450
	Side A x	Side A Side B x

# Sen. Dave Nething, District 12, Jamestown

This bill is a modification to the current law where we are encouraging a dentist to settle in rural ND. The idea is that through a loan fund to them we hope to help them in the pooches to deal with the shortage of dentists. It is a law that we passed two years ago, this is a modification of it.

Joe Cichy, ND Dental Association, See Attached Testimony

Rep. Herbel What kind of \$ is available and the criteria?

Cichy: The awards are up to 80K for 4 years, the dentists have to commit to service four years in the specific community. The state health council is the group that makes the selection, evaluates the applicants Rep. Jon Nelson How many of these awards are given this year

Cichy: 6 awards can be made at this time, 3 have been made in this biennium.

Rep. Jon Nelson The highest priority is to make those commitments to a more rural areas of the state, are we not finding enough candidates in the highest priority category. My question, why do we need more categories?

Cichy: The more difficult ones to fill are the communities with fewer people. Two were given to larger communities, 2 to Minot and 1 to Larimore. I'm not sure where that fit in if it was under

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Page 2 House Education Committee Bill/Resolution Number SB 2378 Hearing Date March 19, 2003

25K. Right now as the legislation exists two are for communities 25K and 10K each and 1 for 2500 people in a community. Right now we have three left and two of those are for the mid range and 1 is for under 2500. This will give us more flexibility in evaluating the applicants to place these dentists where they are needed. Rep. Sitte How many people are in dental school from ND Cichy: 28 from University of Minn. and their are 4-6 in the WICHY program that are from ND that are going to dental school Rep. Sitte Are we seeing a trend that if they don't get money from the state do they not plan to return to ND

Cichy: My understanding of the WICHY program is that we get about 70% of those students come back to the state. We have a high percentage, and those numbers are over four years.

Rep. Meier How long are they committed to the community Cichy They are committed to four years to that community, and it has been found that generally after you have established a practice for four years you stay there. The start up costs are so expensive

Rep. Hunskor is the money intended to help them get through dental school or set up their practice, when do they apply for this, what is the whole process. Cichy: they apply in their last year of dental school, the purpose of he bill is to help defray some of the costs of their education that they have already expended. Dental students usually have approx. 120K of debt. the purpose is to help reduce some of that debt so that they can afford the startup costs of a practice.

Rep. Herbel Is there still a lot of communities that are providing funds for someone if they choose to come to their community. Cichy: There are a few that do that and we are trying to encourage more to do that. I know that Ashley did it.

Gary Garland, ND Depart. of Health, Office of Community Service See Attached Testimony Rep. Williams Where do the original dollars come from

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House Education Committee
Bill/Resolution Number SB 2378
Hearing Date March 19, 2003

Garland: Community Health Trust Fund made from the Tobacco Settlement funds.

Rep. Jon Nelson When there is an application for a grant, are they acted on immediately or what is the process, I would like to see the priority.

Garland: It is on a continuing basis and when we receive an application we take them to the state health council at its next regularly scheduled meeting. Those are held every three months. This has served us well, up to this point, because we have not been overwhelmed with applicants at this time, so it is working. If we would get into the situation where we would have a lot applicants at the same time, we would have to establish a fairer playing field so that they could be considered at the same time and on the criteria.

Rep. Jon Nelson That is my concern. In the event that you are given this greater flexibility that the grants could be exhausted before the end of the biennium, and if there was an applicant interested in a higher priority there may not be a slot open for them.

Garland; That is possible but I find favorable about this amendments is that it eliminates restrictions that would cause what you were thinking here. In cases under the language, you have three categories, and if one of the categories is filled and then it was gone, with this amendment does open it up, if we have three applicants for small communities, all three could be allowed to practice in that small community. Under the previous law it would only be a couple of slots there.

Rep. Herbel They can be offered \$ in there senior year.

Garland: They can apply during their senior year, and hat is the best thing to do

Rep. Herbel Would there be an advantage, rather then waiting for their senior year, because I

would think between their freshman and junior year, where funding could be a real problem,

would it be feasible to say Let's make it available to them at Freshman, and if they don't go

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House Education Committee
Bill/Resolution Number SB 2378
Hearing Date March 19, 2003

through with their fulfillment they have to repay the loan instead. Would that encourage more of them to come back or create a better environment.

Garland: I trust that there was a lot of debate on the legislators behalf when the original law was being crafted. It was decided that this would not be a scholarship program, but would be a loan repayment program. The first payment to a dentist shall be received funds under this act shall have practiced full time for a period of 6 months in an established practice before receiving any payment. That means that the dentist would have to be licensed, and as a new graduate the dentist would not be licensed a that point and could not have a practice to provide direct service to patients.

Rep. Haas Provision in there for a satellite concept. Do you see us possibly getting more dental services to the remote areas under that concept then we are under the existing statute.

Garland: This provision does allow that and does encourages that, I really don't know, we have not experienced any satellites at this point.

Rep. Mueller I understand what we are doing here, but I have some concerns on 'what is highest priority' Garland: Usually when the state health council considers these kinds of things, they look at a couple of fairly important things. One is the dentist population ratio. In small rural areas there may be one dentist available in a certain geographical area. And the dentist coming in is in line to purchase that practice and provide continuing dental services in that area. If the dentist that is leaving does not have a replacement then a significant pocket of population is without. That is considered, next is the mix of dental specialties in the area, in fact that there is a means to provide preventative and treatment side of the program. The law also specifies that in order to receive money under this program the dentist is expected to See Medicaid clients in

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House Education Committee
Bill/Resolution Number SB 2378
Hearing Date March 19, 2003

proportion to the regular clients. In ND this usually means about 10%, the dentist is expected to see during the four years of the contract about 10% of the clients served must be Medicaid. Some of the applicants have said no I can't do that, or joining a practice that does not see Medicaid is not looked favorable upon. The law is structured in a way that the proportion is very important, we envisioned that the dentist is able to see Medicaid recipients that they may be overrun with these clients and it is counter productive.

Rep. Mueller You have this pool of applicants, no one wants to go to 2500 or less, how does that priority or convince them that they should go there

Garland: We make pitches to the students at the schools and talk with the students. I am contacted by many potential students. As the program started, we were not getting applicants for the rural communities except for one person who went to Larimore. I am currently visiting with 5 dental students in two universities, of these five students who will be graduating in May, all of them want to practice in ND, 3 of them want small rural, one in Horace, one in Northwood and one in New Rockford. So we went from nothing to a fair number applying. I want them in this biennium so that I can fill the slots that I had mentioned earlier. It is a challenge to get people into the rural communities.

Rep. Hanson of Cichy, Ashley, Was that dentist in this program, the reason I ask is that he bought the practice in Jamestown and he comes there two days a week and Ashley three days.

That is a reverse of what you were just talking about. Was he in this program.

Cichy, No he was not, Ashley recruited him out of California, he is satellite in Jamestown to supplement his practice.

Opposition-None Closed hearing

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House Education Committee
Bill/Resolution Number SB 2378
Hearing Date March 19, 2003

Rep. Jon Nelson moved a DO PASS, Rep. Herbel seconded the motion

Discussion: none

Roll Vote: 13-0-1, Rep. Meier will carry the bill to the floor.

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Date: 3/19/03
Roll Call Vote #:

# 2003 HOUSE STANDING COMMITTEE ROLL CALL VOTES BILL/RESOLUTION NO. 2378

Representatives rman Kelsch Johnson Nelson Haas Hawken Herbel Meier Norland Sitte Hanson Hunskor	Yes  V  V  V  V  V  V  V  V		Representatives	Yes	No
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REPORT OF STANDING COMMITTEE (410) March 19, 2003 1:04 p.m.

Module No: HR-48-5178 Carrier: Meler Insert LC: . Title: .

REPORT OF STANDING COMMITTEE
SB 2378: Education Committee (Rep. R. Kelech, Chairman) recommends DO PASS
(13 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). SB 2378 was placed on the Fourteenth order on the calendar.

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February 5, 2003

Testimony before House Education Committee Pioneer Room Representative RacAnn Kelsch, Chairman

Senate Bill 2378

My name is Joe Cichy, and I represent the North Dakota Dental Association and appear here in support of Senate Bill 2378. North Dakota Century Code Chapter 43-28.1 is the enabling legislation for the dental loan repayment program that was adopted last session. The purpose of this bill is to amend the statute to give more flexibility to the North Dakota State Health Council in evaluating applicants and selecting recipients for the loan repayment award.

The essence of the bill still targets the rural areas of the state by giving them highest priority.

However, it also takes into consideration those dentists who may establish their principal practice in larger communities but are willing to satellite to rural and underserved areas.

Section 1 of the bill removes the mandate which limited the award to specific size communities. Section 2 of the bill gives highest priority to communities under 2500 residents. The next highest priority goes to communities between 2,500 and 10,000 residents. The lowest priority is given to those communities to over 10,000 population. However, among those cities priority is given to dentists who, although establishing their practices in larger communities, are willing to satellite in underserved areas, and then priority to larger communities where there is an identified need for a specialist.

The state health council has made three awards to date. One went to a general dentist in Minot, the other a general dentist is Larimore. The third went to a much needed pediatric specialist in Minot. It is without question that this program was a significant factor in these dentists' choice to locate in North Dakota.

It is a great program for North Dakota and the North Dakota Dental Association believes that this bill will give the state health council the flexibility in the selection process to make it a better program for the benefit of our citizens.

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# **Testimony**

#### Senate Bill 2378

### Senate Human Services Committee

February 5, 2003

10:30 a.m.

# North Dakota Department of Health

Madam Chair and members of the committee, my name is Gary Garland with the North Dakota Department of Health. I direct the Office of Community Assistance, which assists the State Health Council in the administration of the Dental Loan Repayment Program. I am here to provide testimony in support of Senate Bill *2378.* <sup>1</sup>

Senate Bill 2378 revises the selection and eligibility criteria used in reviewing and approving applications for the Dental Loan Repayment Program. The changes allow the State Health Council greater flexibility in implementing the program and will increase the number of dentists receiving financial assistance to repay their dental education loans.

Under the language of the current Dental Loan Repayment Law, the State Health Council may select three dentists annually to receive repayment of education loans. Of those, one must serve in a community with fewer than 2,500 residents, one in a community with fewer than 10,000 residents, and one in a community with more than 10,000 residents. Since the Program's July 2001 inception, three dentists have been selected to participate in the Dental Loan Repayment Program. Of those, two practice in communities with more than 10,000 residents, and one in a community with fewer than 2,500 residents. Currently, three slots are vacant: one for communities with fewer than 2,500 residents and two for communities with fewer than 10,000 residents.

Senate Bill 2378 removes the community size requirements from the Dental Loan Renayment Program while giving highest priority to the state's small? communities. The bill requires the selection of dentists who will practice in small, rural, underserved communities, without restricting the State Health Council from considering the applications of dentists who will practice in larger communities.

The Department of Health respectfully requests your favorable response to Senate Bill 2378. I am happy to answer any questions the Committee may have.

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February 5, 2003

Testimony before Senate Human Services Committee Red River Room Senator Judy Lee, Chairman

Senate Bill 2378

My name is Joe Cichy, and I represent the North Dakota Dental Association and appear here in support of Senate Bill 2378. North Dakota Century Code Chapter 43-28.1 is the enabling legislation for the dental loan repayment program that was adopted last session. The purpose of this bill is to amend the statute to give more flexibility to the North Dakota State Health Council in evaluating applicants and selecting recipients for the loan repayment award.

The essence of the bill still targets the rural areas of the state by giving them highest priority.

However, it also takes into consideration those dentists who may establish their principal practice in larger communities but are willing to satellite to rural and underserved areas.

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# **Testimony**

#### Senate Bill 2378

# **House Education Committee**

March 19, 2003

10:00 a.m.

# North Dakota Department of Health

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Date