

FISCAL NOTE
Requested by Legislative Council
04/22/2015

Amendment to: SB 2205

- 1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2013-2015 Biennium		2015-2017 Biennium		2017-2019 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures						
Appropriations						

- 1 B. **County, city, school district and township fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

	2013-2015 Biennium	2015-2017 Biennium	2017-2019 Biennium
Counties			
Cities			
School Districts			
Townships			

- 2 A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This Bill modifies the number of dentists selected in the Loan Repayment Program & the eligibility criteria, increases the loan repayment amount & the number of years, and eliminates both dental new practice grants & a program specifically for those serving in a public health or nonprofit clinic.

- B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

This bill has no fiscal impact.

- Modifying the number of applicants from three to the number supported by the availability of funding requires the number of applicants selected to remain within the funding provided.
- The last payment under the dental new practice grants program was made in SFY 2014 and no additional applications have been received.
- Eliminating language for a loan repayment program specific to those serving in a public health or nonprofit clinic and incorporating these participants as a priority in the selection process when considering all dental applicants will not have a fiscal impact as the number selected to participate in the loan repayment program is subject to availability of funding.
- Increasing the funding from \$80,000 to \$100,000 will not have an impact as the amount provided each year still remains at \$20,000 and will be subject to the availability of funding.
- Increasing the number of years for loan repayment from four to five years will impact future appropriation requests and will be subject to the availability of funding.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

- A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

- B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*
- C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

Name: Brenda M. Weisz

Agency: Department of Health

Telephone: 328-4542

Date Prepared: 04/22/2015

FISCAL NOTE
Requested by Legislative Council
04/09/2015

Amendment to: SB 2205

- 1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

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Expenditures						
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Name: Brenda M. Weisz

Agency: Department of Health

Telephone: 328-4542

Date Prepared: 04/09/2015

FISCAL NOTE
Requested by Legislative Council
01/15/2015

Revised
 Bill/Resolution No.: SB 2205

- 1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

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Name: Brenda M. Weisz

Agency: Department of Health

Telephone: 328-4542

Date Prepared: 01/17/2015

FISCAL NOTE
Requested by Legislative Council
01/15/2015

Revised
 Bill/Resolution No.: SB 2205

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Name: Brenda M. Weisz

Agency: Department of Health

Telephone: 328-4542

Date Prepared: 01/17/2015

2015 SENATE HUMAN SERVICES

SB 2205

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Red River Room, State Capitol

SB 2205
1/20/2015
22186

- ☐ Subcommittee
☐ Conference Committee

Donald Mueller



Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

Attach #1: Testimony by Marcia Olson
Attach #2: Testimony by Dr. Brent L Holman, DDS
Attach #3: Testimony by Dana Schaar Jahner
Attach #4: Dental Loan Repayment Programs 2015-2017 Executive Budget
Attach #5: Summary of ND Loan Repayment Programs for Health Professionals
Attach #6: Testimony written by Mara M. Jiran
Attach #7: Testimony written by Patrick Butler
Attach #8: Testimony written by Dr. James T. Podrebarac

Senator Bekkedahl introduced the bill to the committee. This bill will take several programs and consolidate them into one. Ultimately, we are trying to get a dental loan repayment program. It does have an impact and brings dental practitioners back to the state. This is another attempt by the dental association to remove another barrier of care. We are trying to get more dentists targeting to public dental health clinics or non-profit dental health clinics. We have removed the word "communities" and replaced with "sights."

Chairman Judy Lee indicated no more than 3 phrase was deleted, so it wasn't so limiting, so the same pot of funds could be distributed to 4, if there were fewer dollars.

Senator Bekkedahl stated that the attempt there is if other funds become available that could supplement and more dentists could be funded under the program, that is the attempt we are trying to achieve.

Chairman Judy Lee asked about pool of applicants, "may" include dentists who provide in public health settings and so forth. So you aren't requiring it. You wouldn't want to eliminate them, but it's an optional deal.

Senator Bekkedahl stated looking at Section 3 in the amendment, eligibility for loan payment, it goes through several parameters in scoring, and how to score the people that

are eligible for the loan repayment. Areas with the greatest need, including the Public health sights, get the highest level of consideration.

Senator Howard Anderson, Jr. has served on health council for many years, so they see these applications come through. With the changes in language, if the Health Council gets a half dozen applications for various sights, they would divide the money and give some to each versus a standard amount to each one. What is the intent? If that's not what you want, then it needs to be stated differently. I'd be surprised if there are more funds. Sometimes we don't have 3 applications, sometimes we have more.

Senator Bekkedahl indicated the intent is to get as many people in as many places that are underserved as possible, and provide the Council to do this. They don't have to accept the grant if they don't feel it enough reimbursement. It's our intent to get as many people out there. He would like to not limit to 3 a year if there is more interest than that.

Senator Dever looked at fiscal note, with a reduction of \$1.8 million, and increase in other funds of \$1.8 million. What is the source of funding.

Senator Bekkedahl referred to Marcia Olson who will testify further.

Chairman Judy Lee asked if **Senator Bekkedahl** wants to comment on Page 3, deleting the requirements for those who are qualifying for the loan repayment plan that they haven't practiced earlier.

Senator Bekkedahl referred to Department of Health.

Brenda Weisz, Department of Health, indicated that there is a mistake in the fiscal note. The amount belongs in 1271. The body in the note is correct, and it should reflect \$0.

Senator Dever asked about source of funds.

Ms. Weisz responded what is in the governor's is general fund and community health trust fund. Ms. Weisz later provided the Dental Loan Repayment Programs 2015-2017 Executive Budget for SB 2205 (Attach #4).

Chairman Judy Lee stated her heartburn about the elimination about the emphasis on those who were serving in a public health and non-profit clinic. She indicated she should have asked Senator Bekkedahl about this, as he repaid. It would be a reasonable thing when taxpayer dollars are invested into someone's tuition that if they aren't coming back to the state, that there would be some opportunity for repayment. This is a change.

Marcia Olson, Executive Director of Bridging the Dental Gap in Bismarck, testified IN FAVOR of SB 2205 (attach #1)(10:15-16:15).

Chairman Judy Lee asked Brenda Weisz for a budget sheet (previously identified in minutes as Attach #4). Chairman Judy Lee indicated that her recollection of the new practices deal was intended to set up a new practice in a rural setting. It's interesting to know that it wasn't used much. We started out with 3, the first category being communities

under 5,000 because we wanted to encourage practices to be established there. But it is very hard to have a broad enough base of service to maintain a practice there. So there has been gradual adjustment to that. Still with recognizing rural practice, with fewer criteria that might provide dollars into the rural areas. Is that reasonably accurate?

Ms. Olson confirmed.

Chairman Judy Lee asked on page 3, deleting requirements that they had not had practice full time in the state in the 3 years prior to the application, in that section, lines 1-12, and **Senator Howard Anderson, Jr.** stated that Marsha may not be able to answer that. **Senator Howard Anderson, Jr.** will explain this. The state health council has had instances where a dentist wanted to move from a larger city to either a non-profit clinic or back home to their rural, but they were not eligible because of this section, and the council felt they should not be disadvantaged to do this. In contrast, if someone who came from South Dakota to North Dakota, they were eligible, and yet they couldn't move from Fargo to a rural community.

Ms. Olson indicated that was one of the barriers. **Ms. Olson** indicated that Mary Amundson had explained that this didn't appear under any of the physicians or veterinarians or anybody else's, so that we were taking it out as why does it fit under the dental world.

Chairman Judy Lee asked about if the health council had any comments or concerns about removing the emphasis on rural or not-for-profit practices. Making the eligible at with may is one thing; having them as a priority is another.

Senator Howard Anderson, Jr. stated that this came about as part of the consultation with Mary Amundson and not always finding a dentist who wanted to go to the rural areas. But they are willing to go to an urban area and willing to serve Medicaid patients in their practice, and perhaps even do outreach work, they weren't eligible because they didn't fit the smaller community size. The priorities in the bill still prioritize the people for the smaller communities, but it doesn't restrict them. This gives us more flexibility.

Ms. Olson indicated that the changes occurring in North Dakota and the larger population that is now based in the western North Dakota, we can identify a need to have more dentists in that area.

Chairman Judy Lee asked, in her opinion, do you think that what you have now in front of us accomplishes what Amundson recommended.

Ms. Olson indicated there were still some areas that we have not removed, but we have gone far enough to go in the right direction. Mary Amundson, an employee of the state, felt it made a step in the right direction.

Chairman Judy Lee asked if there was a chart that says what the programs are right now, and what you have to do to get the money, and who's eligible. **Brenda Weisz** from the Health Department provided this information later (Attach #5).

Ms. Brenda Weisz indicated that HB 1036 did pass in the House, and it is a study of all loan repayment programs. They would not have the Higher Education information, but she did provide for Health Professionals.

Ms. Olson provided an additional comment that one of the things is that funding stays in place, and that is included in the budget.

Dr. Brent Holman, DDS, testified in FAVOR of SB 2205 (attach #2) (ending 27:30)

Chairman Judy Lee dentist talked about the differences, which we've already discussed, almost barriers from his perspective, in dental repayment programs, and need to be consistent and streamlining of the process.

Dana Schaar Jahner, representing the Community HealthCare Association of the Dakotas (CHAD), testified IN FAVOR of SB 2205 (attach #3). (27:46-30:13). Ms. Jahner provided additional letters of support:

- **Mara M. Jiran** written testimony (attach #6)
- **Patrick Butler** written testimony (attach #7)
- **Dr. James T. Podrebarac** written testimony (attach #8)

Opposition to SB 2205
No opposing testimony

Neutral to SB 2205
No neutral testimony

Public Hearing closed.

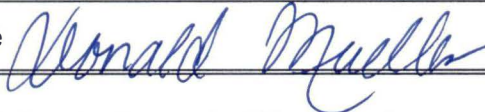
2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2205
1/20/2015
22236

- ☐ Subcommittee
☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

"Click to enter attachment information."

These minutes are from committee work on January 20, 2015.

Senator Howard Anderson, Jr. indicated that he had talked with Rod St. Aubyn regarding a concern that not profit clinics may not get as a high priority in this bill as when there was money allocated just for them. In number 1, page 3, section 4, where it starts listing the size of communities as far as the priority, and then drop down to number 2, it states "the state health council shall give priority for participation to a sight that demonstrates a need for a dentist or individual who is trained in a dental specialty or who is willing to serve in a public health clinic or non-profit." When looking at the hierarchy, you have a one and a two, which gives the same priority by category, but does give some discretion to the health council based on community size and another one wants to work in a neighboring community with a non-profit or public health unit. Senator Howard Anderson, Jr. is comfortable with that.

Chairman Judy Lee would like that component as part of the discussion. By doing it the way they did it here, it is not too restrictive.

Senator Howard Anderson, Jr. thought he thinks it can be worked out with this.

Senator Dever asked why the words "community" was changed to "sight."

Senator Warner answered to allow for a building within an urban community.

Senator Dever wanted to insure that it doesn't have anything to do with mobile unit.

Chairman Judy Lee indicated no.

Rod St. Aubyn indicated that he doesn't have a lot of heartburn on this. In reviewing the bill as it exists, you have a pool of funds that's available for them. One of the things you are repealing actually repeals that section that deals with strictly the public health clinics and the non-profit clinics that exist. You are guaranteed some public health clinics people working in there will see some funding as it exists now. They still get a priority, but they are lumped in with everyone else in there, so there is no guarantee in that. Mr. St. Aubyn indicated that he is not advocating one way or another. By lumping them into one funding mechanism, it does give the board more flexibility and authority to address when needs have changed and they need to look at the other issues. When going from two different funds to combining and where the two funds were basically dedicated to some of those.

Senator Howard Anderson, Jr. indicated that when he had talked with the Bridging the Dental Gap people, one of the reasons they suggested being in the general bill was that they were scared last time and almost didn't get any money, and then we put in a bill to give them some money. They said they disliked having to come every session and ask for money again, so being rolled into here would be better.

Rod St. Aubyn reiterated that he has no major heartburn. Just concern about dedicated pools and no will longer have that.

Chairman Judy Lee asked if the committee should consider a sunset clause or is that too detailed? Chairman Judy Lee supports the idea that we would have this money with a priority for not for profits, but also part of conversation is that maybe there is an individual going into an area that doesn't necessarily work for not for profit but be willing to see more Medicaid patients, and we don't want to eliminate that motive either.

V. Chairman Oley Larsen stated that someone could be working in Bismarck and take two days and go to reservation and would qualify, and that would fall under the sight umbrella.

Chairman Judy Lee asked doesn't this provide more latitude.

Senator Howard Anderson, Jr. stated he is comfortable as it is.

V. Chairman Oley Larsen made a motion to put a sunset clause on it as an amendment. There was no second to the motion.

Senator Warner needs some clarification, we don't want to signal that we are sun setting the funds or we are losing the commitment to the project.

Chairman Judy Lee agreed.

Rod St. Aubyn indicated that one of the things - don't necessarily need the sunset clause, it can always be addressed or reviewed in next session. You could possibly get a report to an interim committee or to legislative management to show what's happening, and then determine if you want to change the law again.

Senator Howard Anderson, Jr. indicated that the health council would always have that information and could provide that information. Putting the sunset clause in there doesn't help a lot because there is no money in there unless you put them in everytime.

Senator Dever indicated that the funds are distributed over a 4 year base in the bill.

V. Chairman Oley Larsen withdrew the amendment to put sunset clause on.

Senator Howard Anderson, Jr. stated that it has been the history of these programs that they are distributed over 4 year period. When money in a particular bill, we allocate that over a 4 year period because they either have to pay it back or they get it. It's not like we are allocating money that wasn't appropriated because we stick within this appropriation for the 4 year allocation.

Senator Howard Anderson, Jr. made a motion that the Senate Human Services Committee DO PASS SB 2205. The motion was seconded by **Senator Dever**.

Roll Call Vote

6 yes, 0 No, 0 Absent

Senator Dever will carry the bill.

Date: 01/20 2015
Roll Call Vote #: 1

2015 SENATE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. SB2205

Senate Human Services Committee

☐ Subcommittee

Amendment LC# or Description: _____

Recommendation: ☐ Adopt Amendment
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar
Other Actions: ☐ Reconsider ☐ _____

Motion Made By Anderson Seconded By Dever

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee (Chairman)	✓		Senator Tyler Axness	✓	
Senator Oley Larson (V-Chair)	✓		Senator John M. Warner	✓	
Senator Howard C. Anderson, Jr.	✓				
Senator Dick Dever	✓				

Total (Yes) 6 No 0

Absent 0

Floor Assignment Dever

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

SB 2205: Human Services Committee (Sen. J. Lee, Chairman) recommends **DO PASS** (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2205 was placed on the Eleventh order on the calendar.

2015 HOUSE HUMAN SERVICES

SB 2205

2015 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Fort Union Room, State Capitol

SB 2205
3/11/2015
Job 24656

☐ Subcommittee
☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

Relating to the loan repayment program for dentists in public health and nonprofit dental clinics and provide an application.

Minutes:

Testimonies 1-6

Chairman Weisz opened the hearing on SB 2205.

Sen. Brad Bekkadahl: From district 1 Williston introduced and testified in support of the bill. It is a program already in place and it is to try and target the loan repayment dollars to those dentists most willing to serve the underserved areas of the state. The Dental Association supports this.

5:27

Chairman Weisz: We already have a dental loan repayment program so are you eliminating or consolidating.

Sen. Bekkadahl: This is a consolidation.

Chairman Weisz: You are eliminating that specific one and lumping them all in one.

Sen. Bekkadahl: That is correct.

Rep. Fehr: I don't see a community match in here. If that was amended in what would be the impact on the program?

Sen. Bekkadahl: I think it would be more difficult to get to the underserved areas because you would be placing a burden on that area in specific need.

Rep. Porter: On the top of page 3, the first two subs that were previous criteria for the loan program are being stricken. The past focused on new practices and dentists moving into these higher underserved areas. Could you go into detail of taking the existing dentists practicing in the state and then allowing them to having access to the loan money?

Sen. Bekkadahl: I believe that if you can give the opportunity to someone who has been in a practice situation, but now wants to change to serve an underserved area, that may be a benefit to the program. I think it is designed to allow more applications to come into the program because I'm not sure they have all been used at this point.

Rep. Rich Becker: Do you have a number of dentists needed to get us to the point of all underserved areas are being served? What are the one or two top dental schools that have people come back to ND?

Sen. Bekkadahl: It is difficult to find the number in ND. We think there are 350 practices in the state. We need 7 more dentists in the state according to federal guidelines. I went to the U of Minnesota. Most of the graduates came from upper Minnesota. Others from Creighton University, University of Nebraska and some out of Iowa.

Rep. Rich Becker: Basically 4 dental schools.

Sen. Bekkadahl: Correct.

Rep. Fehr: Could you give us a sense of how big the loans are that dental students accumulate?

Sen. Bekkadahl: My debt load out of the University of Minnesota was \$22,000. The current debt load coming out of schools nationwide is over \$200,000.

Rep. Mooney: What would be the benefit and difference between community to site?

Sen. Bekkadahl: We wanted to target the site and not the community. You have to go to work in the site which is the public health facility or community health clinic and get away from the dentist going into private practice.

Chairman Weisz: The dentist who has been practicing for 20 years and now wants to serve the underserved; does he just have to show he had a loan at one time?

Sen. Bekkadahl: It is my understanding that the health council has an application process that delineates that they have current loans and what they are going to be doing to practice if they give priority for this (in audible).

Chairman Weisz: I can ask Brenda to clarify this one.

15:20

Marcia Olson: Executive Director of Bridging the Dental Gap in Bismarck testified in support of the bill. (See Testimony #1)

21:49

Dana Schaar Jahner: Representing the Community HealthCare Association of the Dakotas (CHAD) testified in support of the bill. (See Testimony #2)

NO OPPOSITION

Chairman Weisz: Brenda would you come up here please. The non-profit is there \$80,000 allocated currently?

Brenda Weisz: Director of Accounting from State Health Dept. There is a loan repayment of \$60,000 for each applicant and \$180,000 is included in the budget for those.

Chairman Weisz: They were separate in the budget, but I thought it was only \$80,000.

Brenda Weisz: It was \$180,000 for the non-profit.

Chairman Weisz: How much for the regular?

Brenda Weisz: \$540,000 is included in the House version of 1004.

Chairman Weisz: So there is \$540,000 plus \$180,000?

Brenda Weisz: That is correct Mr. Chairman.

Chairman Weisz: And that survived so far in the House?

Brenda Weisz: That is correct. They reduced the amount the Governor recommended by \$60,000.

Chairman Weisz: So currently in the Senate we are looking at \$720,000.

Brenda Weisz: That is correct. You had ask the question about where in statute it says about payment for a loan. If you look at the bill in front of you, page 1, line 13, you will see it says, "The dentists are eligible to receive funds for the repayment of their education loans". The payment would be required to go towards loan repayment.

Chairman Weisz: If I acquired the loans in 2005, can I pay them off in 2016 or can I apply it to that if I have already paid the loan off?

Brenda Weisz: When the loan applications come in the health council does look at them and we require them to submit documentation as to what their outstanding loans are.

Chairman Weisz: You are looking for outstanding loans?

Brenda Weisz: That is correct.

Rep. Hofstad: When we dealt with the medical loans in HB 1396 we had the discussion between communities and cities and now we are looking at sites. Is sites defined in statute?

Brenda Weisz: You have to ask Legislative Council.

Rep. Hofstad: Would you see road blocks if were to meld the dentists with our medical professional loans?

Brenda Weisz: Actually that question came up in committee on HB 1396 over on the Senate. They talked about the consistencies and the work that had been done on 1396. They felt because those being more of a health care profession and closely related and the study that had been approved by the House and the Senate could take it to the final steps to see what further work could be done. At this point keeping them separate. At this time I'm not sure.

Chairman Weisz: Part of the concern when we looked at 1396 was the fact that we had three separate programs on the dental.

Chairman Weisz closed the hearing on SB 2205.

Handed in testimony is support:

Dr. Brent Holman DDS (See Testimony #3)

Patrick Butler, CEO of Northland Community Health Center (See Testimony #4)

Mara M. Jiran, Interim CEO of Valley Community Health Centers (See Testimony #5)

Dr. James T. Podrebarac (See Testimony #6)

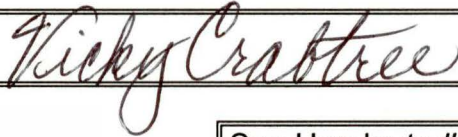
2015 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee
Fort Union Room, State Capitol

SB 2205
3/24/2015
Job #25367

☐ Subcommittee
☐ Conference Committee

Committee Clerk Signature



Minutes:

See Handouts #1 and #2

Chairman Weisz: Let's take up 2205, the dental loan repayment. (See Handouts #1 and #2.) This basically mimics what we did in 1396. It does a consolidation of the three different programs. It applies the same rules we used in 1396. In one bill we are changing it to five year repayments. In one bill we are changing I to a five year repayment, \$75,000 and no match. The other is five year repayment and \$100,000 with a 25% match. They are good with using the same criteria we did in 1396. We don't have to kick it out this week because it does not have a fiscal note.

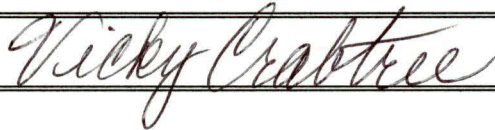
2015 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Fort Union Room, State Capitol

SB 2205
4/1/2015
Job #25716

- ☐ Subcommittee
☐ Conference Committee

Committee Clerk Signature



Minutes:

Handout #1

Chairman Weisz took up 2205. (Handed out amendment. See Handout #1)

Rep. Hofstad: We modeled this after 1396 the medical professional loan program. It does many of the same things. We are making this into a five year program and going from \$80,000 to \$100,000. That takes us from 4 slots up to 9 slots. Looking at the amendment itself we are taking 43-01.103 the cities and making that selection criteria. That mirrors what we did in 1396 and 43-28.104 the cities eligibility we again go through the eligibility much as we did in the medical 1396. We added in here the language, "in selecting cities for participation" and after "underserved population" we have "any public health clinic or non-profit clinic". The emphasis is to getting these dentists into those non-profit clinics throughout our state.

Chairman Weisz: So the language on page 3 stays overstruck?

Rep. Hofstad: That is correct.

Chairman Weisz: It combines the programs which were in the 2205 so that stays correct?

Rep. Hofstad: Yes.

Chairman Weisz: The other language mimics what we did in 1396?

Rep. Hofstad: It does.

Chairman Weisz: With the addition of the public health clinic?

Rep. Hofstad: This does not address the grant program for the facilities. I would move the amendments.

Rep. D. Anderson: Second.

Chairman Weisz: Is there a match (inaudible) in here?

Rep. Hofstad: No.

Chairman Weisz: It mimics the current program from that respect. From the standpoint of going from 80 to 100 the rationale is?

Rep. Hofstad: The rationale is we have the opportunity now to add more slots and you make it more attractive and you make it more attractive for dentists to come into these communities.

Chairman Weisz: How do their costs relate to say doctors?

Rep. Hofstad: Considerably more surprisingly. The cost of education for a dentist is considerably more than it costs to go to medical school.

Rep. Rich Becker: On your amendments, the selection criteria, can you explain a little bit about what the selecting criteria is?

Rep. Hofstad: To establish that criteria to be used in selected cities for this program. We will define that criteria rather broadly. Underneath eligibility we are again defining the cities by having fewer than 15,000 and then we go from 15,000 to 30,000 and those above 30,000.

Chairman Weisz: The subsection B we had a lot of discussion on 1396 with Legislative Council on the use of the word cities. You could be serving multiple cities. Cities doesn't limit it to be like Edgeley or Ellendale. Cities really does define to say an area.

Rep. Rich Becker: All along those line, are we heading in the direction of the multiple cities, but sometimes we have bills where the health department is dividing the state into regions. Would that be a better way to do this?

Chairman Weisz: Say a dentist wants to go to Ellendale, then the house council is going to take a look at the needs in Ellendale and that area. So where does that application go as a priority vs. someone who wants to go to Wishek? Region defines such a large area. We may have to bring L.C. down for clarification of cities if this goes to conference.

Rep. Oversen: Just to make sure we have this correct. There are three changes to page 3. The second one that says remove lines 1-21 I don't think should be in there because we are overstriking that language in the prior amendment.

Chairman Weisz: Ok.

Rep. Hofstad: Looking at section 6 that references to gifts and refers to three dentists contemplated by this chapter when we look at 43-28.101 we talked about. We overstruck that "more than three dentists"; is that something we need to address?

Chairman Weisz: You are wondering if we need section 6?

Rep. Hofstad: I think we need section 6 because it talks about grants, gifts or donations, but it is references the three dentists this chapter. It says we shall select from a pool (inaudible) three dentists and we have overstruck that three dentists and still talking about three dentists in section 6.

Chairman Weisz: That would still be correct. It is still referencing those who still have a grant so it is not relevant to whether it is three or none or a limit.

Brenda Weisz: From Health Dept. I think you might want to strike that. The reason that was put in there at three was when the program was limited to three by statute.

Chairman Weisz: But, that is gone.

B. Weisz: But, by restating it here it could cause confusion and you could simplify it by saying, "expansion of the program beyond the dentists contemplated by this chapter". Just get rid of the word three and you would be consistent in the amendment.

VOICE VOTE: MOTION CARRIED

Rep. Hofstad: I move a Do Pass as amended on SB 2205.

Rep. D. Anderson: Second.

ROLL CALL VOTE: 13 y 0 n 0 absent

Bill Carrier: Rep. Hofstad

Amendments went back to Legislative Management for correction. New standing report was made on April 8, 2015.

April 8, 2015

1/4
2/13/15
JL

PROPOSED AMENDMENTS TO SENATE BILL NO. 2205

Page 1, line 1, remove ", 43-28.1-02"

Page 1, line 1, remove the second "and"

Page 1, line 2, after "43-28.1-04" insert ", 43-28.1-05, and 43-28.1-09"

Page 1, line 3, after "43-28.1-01.1" insert ", 43-28.1-02,"

Page 1, line 9, after the second bold dash insert "**Cities with defined need -**"

Page 1, line 11, overstrike "to communities" and insert immediately thereafter "in cities"

Page 1, line 11, after "state" insert "which the state health council identifies as having a defined need for dental services"

Page 1, line 11, remove "Subject to the

Page 1, line 12, replace "availability of funding, the" with "The"

Page 1, line 13, after the first "clinic" insert ", a practice with a focus on an underserved population,"

Page 1, line 15, overstrike "four-year" and insert immediately thereafter "five-year"

Page 1, line 15, overstrike "eighty" and insert immediately thereafter "one hundred"

Page 1, remove lines 18 through 23

Page 2, remove lines 1 through 18

Page 2, line 21, overstrike "**Dentist selection**" and insert immediately thereafter "**Cities - Defined need for dental services - Selection**"

Page 2, line 21, overstrike " - **Eligibility for loan repayment**"

Page 2, line 22, overstrike "In establishing the criteria regarding a dentist's eligibility for loan repayment funds"

Page 2, overstrike lines 23 and 24

Page 2, line 25, overstrike "which such services are needed in a selected"

Page 2, line 25, remove "site."

Page 2, line 26, overstrike "b. The dentist's commitment to serve in a"

Page 2, line 26, remove "site"

Page 2, line 26, overstrike "that is in need of a dentist."

Page 2, line 27, overstrike "c. The compatibility of the dentist with a selected"

Page 2, line 27, remove "site"

Page 2, line 27, overstrike the period

2/4

Page 2, overstrike line 28

Page 2, line 29, remove "site"

Page 2, line 29, overstrike the period

Page 2, overstrike lines 30 and 31

Page 3, line 1, overstrike "2."

Page 3, line 10, overstrike "Dentists selected"

Page 3, line 10, remove "must be licensed to practice dentistry in this state and"

Page 3, line 10, overstrike "shall contract"

Page 3, overstrike line 11

Page 3, line 12, overstrike "communities"

Page 3, line 12, remove "sites"

Page 3, line 12, overstrike the period

Page 3, line 13, overstrike "4."

Page 3, line 13, remove "3."

Page 3, line 13, overstrike "For the purposes of a dentist selected for loan payment who practices within fifteen"

Page 3, overstrike lines 14 through 20

Page 3, overstrike line 21 and insert immediately thereafter "The health council shall establish criteria to be used in selecting cities that have a defined need for dental services, thereby allowing for participation in the loan repayment program. The criteria must include consideration of:

a. The number of dentists already providing dental services in the city;
and

b. Access to dental services in the city and the surrounding area.

2. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria."

Page 2, line 24, remove "Site"

Page 3, line 24, overstrike "**selection criteria**" and insert immediately thereafter "**Cities - Eligibility for participation - Priority**"

Page 3, line 25, overstrike "The state health council shall apply the following criteria in selecting a community"

Page 3, line 25, remove "site"

Page 3, overstrike lines 26 through 31

Page 4, line 1, overstrike "must be given to dentists who commit to satellite to underserved areas"

Page 4, line 1, remove ", then to"

3/4

Page 4, line 2, remove "dentists who practice at a public health clinic or nonprofit clinic."

Page 4, line 2, overstrike "and then"

Page 4, line 2, remove "priority"

Page 4, line 3, remove "is given"

Page 4, line 3, overstrike "to dental specialists in cities with an identified need for a specialist."

Page 4, overstrike lines 4 through 9

Page 4, line 10, overstrike "2. The state health council shall give priority for participation to a community"

Page 4, line 10, remove "site"

Page 4, line 10, overstrike "that"

Page 4, overstrike line 11

Page 4, line 12, overstrike "specialty"

Page 4, line 12, remove "or who is willing to serve in a public health clinic or nonprofit clinic"

page 4, line 12, overstrike the period

Page 4, overstrike lines 13 and 14 and insert immediately thereafter "In selecting cities for participation in the loan repayment program, the health council shall give priority, in descending order, to those cities that meet the selection criteria and:

a. Have fewer than fifteen thousand residents;

b. (1) Have at least fifteen thousand residents, but fewer than thirty thousand residents; and

(2) Do not belong to a metropolitan statistical area; or

c. Have at least thirty thousand residents.

2. In the case of a dentist who will provide dental services in city that has a defined need for dental services and in a public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic, the state health council shall consider that dentist at the same priority level as under subdivision a of subsection 1.

SECTION 4. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-05. Eligible loans.

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or eightyone hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

u/m

SECTION 5. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-09. Gifts, grants, and donations - Continuing appropriation.

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the ~~three~~ dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of ~~four~~five years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans."

Page 4, line 15, after "43-28.1-01.1" insert ", 43-28.1-02,"

Page 4, line 17, after "43-28.1-01.1" insert ", 43-28.1-02,"

Renumber accordingly

Date: 4-1-15
Roll Call Vote #: 1

2015 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 2205

House Human Services Committee

☐ Subcommittee

Amendment LC# or Description: See Amendment #1

Recommendation: ☒ Adopt Amendment
☐ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☐ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar

Other Actions: ☐ Reconsider ☐ _____

Motion Made By Rep. Hyatt Seconded By Rep. D. Anderson

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz			Rep. Mooney		
Vice-Chair Hofstad			Rep. Muscha		
Rep. Bert Anderson			Rep. Oversen		
Rep. Dick Anderson					
Rep. Rich S. Becker					
Rep. Damschen					
Rep. Fehr					
Rep. Kiefert					
Rep. Porter					
Rep. Seibel					

Total (Yes) _____ No _____

Absent _____

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

Date: 4-1-15
Roll Call Vote #: 2

2015 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 2205

House Human Services Committee

☐ Subcommittee

Amendment LC# or Description: _____

Recommendation: ☒ Adopt Amendment
☒ Do Pass ☐ Do Not Pass ☐ Without Committee Recommendation
☒ As Amended ☐ Rerefer to Appropriations
☐ Place on Consent Calendar
Other Actions: ☐ Reconsider ☐ _____

Motion Made By Rep. Hofstad Seconded By Rep. D. Anderson

Representatives	Yes	No	Representatives	Yes	No
Chairman Weisz	✓	✓	Rep. Mooney	✓	✓
Vice-Chair Hofstad	✓	✓	Rep. Muscha	✓	✓
Rep. Bert Anderson	✓	✓	Rep. Oversen	✓	✓
Rep. Dick Anderson	✓	✓			
Rep. Rich S. Becker	✓	✓			
Rep. Damschen	✓	✓			
Rep. Fehr	✓	✓			
Rep. Kiefert	✓	✓			
Rep. Porter	✓	✓			
Rep. Seibel	✓	✓			

Total (Yes) 13 No 0

Absent _____

Floor Assignment Rep. Hofstad

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

SB 2205: Human Services Committee (Rep. Weisz, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (13 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2205 was placed on the Sixth order on the calendar.

Page 1, line 1, remove ", 43-28.1-02"

Page 1, line 1, remove the second "and"

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Renumber accordingly

2015 CONFERENCE COMMITTEE

SB 2205

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2205
4/15/2015
26137

☐ Subcommittee
☒ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

Attachment #1 Proposed amendments by Sen. J. Lee

The following conference committee members were present for SB 2205 on April 15, 2015 at 2:00 pm.

Senator Dever, Senator J. Lee, Senator Axness

Representative Hofstad, Representative Rich Becker, Representative Oversen

Senator Dever asked for an explanation of the House amendments.

Rep. Hofstad explained that what they tried to do was to marry the dental loan repayment program to the physicians' loan repayment program. Many of the things done here mirror that bill. We changed the \$80,000 to \$100,000 and made that payable over a 5 year period of time. When we looked at that and the slots, it was pretty significant, so that gave us more slots than what we are dealing with now.

Then next area was cities and again that was mirrored to the physicians' loan program. There was a lot of discussion whether it should be cities, communities, entities. Communities were never well defined; cities were, so we chose to put cities in the bill. We tried to make sure the criteria we are using within the health council selection program now was mirrored somewhat. So the criteria must include consideration of the number of dentists that are in a city and that access to dental services in the city and surrounding area.

Looking at page 4 of marked up bill, he read sub 2.

Then he explained section 3 of the cities, the eligibility for that participation and prioritizing. That's where they prioritized the city size. That city size was the same as what they had in the physicians' loan program.

On page 5, sub 2, in the case of a dental service providing service in a city that has a defined need and then a in public health clinic with a focus on underserved population, or a nonprofit dental clinic the state council shall consider that dentist at the same priority level

as under subdivision a of subsection 1. They were balancing those 2 criteria to have the same priority.

Senator J. Lee wondered if there was any discussion by the House as to the need of a specialized dentist such as a pediatric dentist.

Rep. Hofstad answered that they did not have that discussion.

Senator J. Lee recalled that someplace in past legislation there had been some allowance for that, thinking it was Minot. She didn't want to invalidate something that is already there and said that was the reason for the question.

Rep. Oversen referred to page 2, the crossed out lines 29 through 30, and said that might get to Lee's comment - The general training or specialty in the services that are needed in that community. She said they could take those lines and put them under the criteria of page 3 so it is included for consideration for prioritization.

Senator J Lee asked to look at the whole thing. Medicare doesn't pay for dental. Maybe that's something we want to give attention to. She thought Rep. Oversen's suggestion is very good.

Rep. Oversen looking at that again pointed out that was in the cities criteria. She couldn't remember if they left in any criteria for the actual dental professional.

Rep. Hofstad did not remember either.

Senator Dever said it might still fit under a city that is looking for a dentist with training in general dentistry or in a dental specialty. (Line 30-31)

Rep. Hofstad agreed. Doesn't see why it wouldn't fit under those criteria.

Senator Dever: Can you explain why the House took that out then?

Rep. Hofstad could not.

Senator Dever asked about the source of the funds - "subject to the availability of funding". Apparently the funding is available?

Rep. Oversen didn't recall the exact conversation, but thought it was to regain that higher priority on dentists willing to work at a public health clinic as opposed to them being the second priority subject to the availability of funding.

Senator Dever looked at the fiscal note that was generated April 9th and asked if this is just policy to implement funding that is provided elsewhere?

Rep. Hofstad replied that he understands that is correct. The funding is elsewhere and this is the policy.

Sen. Axness indicated it is in the Dept. of Health's budget.

Senator Dever asked if the committee was interested in making any other changes.

Sen. J. Lee suggested amendments (Attachment #1).

Page 1. The "within the five years" would make it consistent with their other timetables.

Page 2. Dental assistants are regulated by the Board of Dental Examiners but they are not able to be on the board. The senate thought it was important that they have a representative on the board.

On page 4, credential review licensure, it's again the 5 year period - not a big deal. It also talks about the duty to report, and actions based on professional conduct or competency resulting in revocation etc. is included as a concern there.

On the bottom of page 5 carrying over to page 6, if there is a death of the dentist, everything stops. The spouse is not necessarily qualified for the continuation of the practice and there is a limbo time where everything is locked up. The appointing of a dentist would be during the length of time it takes to sell the practice.

Page 6 - The last item is on the ownership and operation of a dental office or clinic and there is a concern about shops being set up in which the dentist would be unlikely to ever be there but their dental hygienist would be working there. The Board of Dental Examiners does have some real concerns about that and would like us to consider reinstating that portion.

Senator Dever: On conference committee 2066 we added a dental assistant to the board.

Sen. Axness: We did add that language back in but the bill was killed.

Senator Dever: If the funding is in the Dept. of Health budget, is the policy critical to that?

Sen. J. Lee: Yes, it tells how the subsidies are awarded.

Senator Dever: Otherwise the policy is the existing language without the bill.

Sen. J. Lee: It would mean the community clinics, which the House suggested, would be at par, but, if we don't pass that part, they would no longer be at par and would be a number 2 priority.

Rep. Hofstad thinks the bill says the health council shall consider the dentists at the same priority level. Talking about non-profit dental, they are on the same priority level.

Sen. J. Lee: She likes that idea of putting them at par. If we don't pass that part, then they would be second in line. She thought they were second on the list right now but the House puts them at an equal first.

Rep. Hofstad said he was supportive of adding the amendments that Sen. Lee proposed. He would like to take some time to look at them and review. This is something we need to do.

Senator Dever can agree. We are looking at extensive changes.

Rep. Hofstad said they needed some time.

Senator Dever: What are the feelings of the House on the idea of a dental assistant on the board?

Rep. Hofstad said they didn't have a problem with that issue.

Senator Dever explained that 2066 had references to 4320, dental assistants and dental hygienists, and 4328, the Board of Dental Examiners. Dental hygienists have one seat on the board. Dental assistants don't have any representation so they exist as an association with certain requirements but they have no say in their regulation. The Senate thought that was kind of important.

Senator Dever adjourned meeting.

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Red River Room, State Capitol

SB 2205
4/16/2015
26169

☐ Subcommittee
☒ Conference Committee

Committee Clerk Signature

Donald Mueller

Mary Jo

Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

Attach #1: Cost Worksheet from Brenda Weisz

The following conference committee members were present for SB 2205 on April 16, 2015 at 11:30am.

Senator Dever, Senator J. Lee, Senator Axness
Representative Hofstad, Representative Rich Becker, Representative Oversen

Senator Dever offered some amendments yesterday. What we have as it passed the house, and the amendments would restore 2066 into 2205. Not replace, but add to it, except the reference to the president which appears to be the point of contention in the House.

Rep. Hofstad has had discussions with the House chairman. He has some concerns, not with the bill, the extraction, we are comfortable. But the issue taking this back to the floor, as part of this conference committee, we would be in jeopardy of losing the whole thing. We killed that before and now we will see it again. That is the problem that he has articulated to him. He understands how important section 10 is and has suggested that if we introduced section 10 into 2205 and then come back next time and deal with the rest of it. That is where he is.

Senator Dever Do all the other sections refer to the dental assistant being on the board?

Rep. Hofstad Indicated that number 9 is dealing with dentists with the personal representative if a dentist should die.

Senator Dever isn't that associated with section 10 isn't it?

Senator J. Lee I would not be satisfied with only section 10 because I think the Section 9 portion is also important in being able to appoint a dentist to continue with the work and the records with a deceased dentist. That is a pretty explainable one there.

Rep. Oversen asked a question about section 9, as I am reading it, that the personal rep shall appoint a dentist. What happens in the situation that there isn't anybody able to take over? Is it the mandate to appoint somebody?

Senator J. Lee It doesn't have to be a dentist who is in the same office, but there has to be a dentist where the buck stops. So they would be considered the manager of the office, even if it is not their office. But the feeling of the committee supported the idea that the dentist should operate. The goal is to sell the office and there needs to be a dentist who may or may not be interested in owning it at some point, bit a designated hitter so to speak who does know what he/she is doing.

Senator Dever I do understand the process of amending one bill into another as you did that the other day.

Senator Axness If I look at the history of the 2066, it passed 81 to 10 after the first time on the House floor. After the conference committee, because we had the conference on the dental assistant and then it was returned and then defeated on the floor, because of one provision that I hear has been taken out the amendment so I believe our conferees are capable of explaining that on the floor and getting it fully reinstated. That is kind of what I am looking at right now.

Senator Dever I have the greatest faith in the House conferees on this bill. Their ability to.

Rep. Hofstad Indicated it will be a high hill to climb. He indicated that the Chairman is not willing to stand behind him.

Senator Dever Would you see that conversation taking place on the 7th order of conference committee report or 14th order?

Rep. Hofstad I would see it taking place on the conference committee report. Yes.

Senator Dever So then the effect would be that he might lose it there and then bring it back to conference committee.

Rep. Hofstad Who knows how the game would be played. I certainly wouldn't want to jeopardize losing the bill because this is an important bill.

Senator Dever In both concepts.

Rep. Hofstad said they can have more conversations with the Chair. The Chairs could have a sidebar in the hallway. I am willing to talk and twist arms too, but that's the message that he sent me down with.

Senator Dever The chairs of both Human Services Committees have a positive working relationship. That is not necessarily true of all committees, but in that circumstance. They

could have that conversation. I am wondering if there are any points in 2205 or the amendment that anyone might like to take a separate look at.

Rep. Hofstad Added that as we change the dollar amount in the funding in the payout period, that did affect the slots. Brenda Weisz has had time to work that out. (attach #1)

Brenda Weisz, Department of Health, the schedule you have before you is something put together as House Human Services was looking at SB2205 and making amendments, changing the dollar amounts to \$100k over 5 years and how it might impact slots for the coming years. The law would take into effective August 1, 2015. The Health Council meets in the spring. The meeting of this spring the Century Code now has funding for non-profit and public health separate from the other dental loan repayment would have to be considered. Then next spring when the Health Council meets then that funding should this bill pass would then be melded together so for fiscal year 2016, that would be the first payment that would be made to dentists that would be approved from the Health Council under the current statute. So, keeping in mind that there would only be allowed by Century Code 3 slots for the dental loan repayment and keeping a slot available for non-profit public health and then funding those under the current law is what fiscal 16 amounts represent. Then going forward should this law pass, and I am assuming that it would, fiscal year 27 would be there next payment that would be made based on Health Councils approval that would be made next spring. We looked at the money that was currently in House Bill 1004 which is the Department of Health's budget, and it would afford 9 slots for dental loan repayment by extending that out 5 years. Then the column to the right shows you future obligations. It doesn't reflect any new applicants, but for 2017, it shows for those 9 slots two years of payment. Then in 2019 the biennium 19 & 21, and going forward it will show the remaining two years for those 9 slots. Then as the Department of Health would prepare the future budget, we would take into account what the budget message would be, how many additional slots could be added at that time. But this would fold the non-profit public health funding along with the underserved dental loan repayment funding.

Senator J. Lee Asked if it would be accurate in the lower part where you've got 1-9 that the dentists include non-profit and public health. It kind of looks like we're not doing non-profit and public health anymore.

Brenda Weisz That is absolutely correct. It just takes all the dentists, and puts them at a par priority with the others. Yes.

Senator Dever We have plenty of applicants to use the slots.

Brenda Weisz At the most we went back and looked at some historical applications we received up to 8 at a time, for dental loan repayment. We are not considering non-profit and public health, those were always submitted separately and we always did not have funding for that. It depended on the legislative year whether we had received funding for non-profit and public health. So the state program itself we have received up to 8 applicants at a time during given years.

Senator J. Lee Asked on page 1, line 12, we say communities to cities. The conversation is that we didn't want to limit it to an incorporated city with more than 150 residents in the

definition of cities. But there are regional areas that are served by a dentist. We were trying to be inclusive. I thought we fixed that. She doesn't want it to conflict with the other. So do we have an issue if one of them said cities and the other says areas?

Senator Dever Was it this bill? I think we are talking in terms of areas?

Rep. Hofstad We have gone back and forth with cities or communities. Communities is really a term that is really not well defined. Cities is well defined in statute. It doesn't necessarily limit us to the boundaries of the city. When looking at the size, our options are better as he sees it. We have debated that for quite a long time. He asked Brenda Weisz for advice.

Brenda Weisz It is a difference of opinion with attorneys at legislative council is what it comes down too. So the two House Bill 1396 the loan repayment for health professionals and this bill at one time mirrored one another with that language, then when the conference committee disband a couple of days ago, now the language is different again. It is one attorney versus another interpretation, but we were told that communities is not defined anywhere in code.

Senator J. Lee Wants I don't really care what word is used. I just want to make sure that we're not going to have an application that comes to somebody who is going to serve in a close to the tribal borders area that does not have a community with 150 people or city with 150 people which is technically called a city, which is why we used areas. I don't care what word is it, I just want to make sure that we're not limiting it in some way and so what I would just ask that whatever we might use here, that we have clear definition of the fact that we don't wish to limit it in any way based on boundaries of political subdivisions, because that is what we are doing by saying cities. I agree communities have to have a definition. But area seems more to work for our community.

Senator Dever On page 1, line 13, dentists who shall provide dental services in cities. Is that referring to the location of the dentist office or the community that it serves? It might be a dentist located in Solen or Cannon Ball, serves people from Fort Yates.

Brenda Weisz A comment, whatever it would be more palatable for those applying and for the Health Council, I think the flexibility that the Health Council has to do their job is what is important. What is important is for those who are applying that it is clear for them and the Health Council to decide and then to rank those and give them priority. I think that is the intent of both the House and the Senate as well. It is just finding the right word that will accommodate that requirement.

Senator J. Lee U.S. Supreme court consideration that is coming up this summer about what the intent of the law is compared to what the words of the law actually say on a higher level than this one, maybe we like our words to say what we intend to have it mean also. So I don't know how we figure that out if there is somebody who has a great idea. I think we should make it clear and we all would probably agree that we want the Health Council have the flexibility to consider applications from any dentists who is willing to serve the underserved areas of the state. I know that we've used that phrase before somewhere, but I am not married to that phrase. But help me folks with how we say what we really want.

Rep. Hofstad Since this is not going to be resolved today, I would suggest that we revisit that term and make sure it is palatable for all. Let's revisit it. Come back with a solution.

Senator Dever I was looking for bible verse that law kills, but the spirit gives life. We don't want to kill this trying to figure out the letter of the law. We will have those further conversations and continue.

Senator Dever adjourned.

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2205
4/17/2015
26204

☐ Subcommittee
☒ Conference Committee

Committee Clerk Signature

Emmery Brothberg for Don Mueller

Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

Attachments: n/a

The following conference committee members were present for SB 2205 on April 17, 2015 at 10:30am.

Senator Dever, Senator J. Lee, Senator Axness

Representative Hofstad, Representative Rich Becker, Representative Oversen

Senator Dever called the meeting to order. All members were present.

Senator Dever indicated that there were discussions that were going to take place out of the committee.

Senator J. Lee had a thought this morning that section 11, which we thought was a good idea from SB 2066, may have an adverse impact on Appletree dental which provides services in care in skilled care facilities in ND and children's dental services provides services to children in Fargo, West Fargo. And I do not want to have anything that would be a barrier to that.

She sent a quick message to some of the lobbyists. She was not concerned about the ownership part but she wanted to make it clear that those entities that are providing those services with supervising dentists who may not always be onsite, they will still provide services for the hard to serve. If there is anything in that section that would stop entities such as Appletree and children's dental services from providing services, she would like to know about it. She made it quite clear she would not do that as legislative intent.

Senator Dever indicated that Mr. McDonald might have a comment.

Jack McDonald, represents board of dental examiners. It probably would not. There is a broad based provision at the very end of section 10 of the amendments, and it indicates

that we won't interfere with any kind of nonprofit operation and underserved populations. The board's intent would be to not interfere, we want these things to continue on. He views this similar to Bridging the Dental Gap in Bismarck, and doesn't think it would interfere with that.

Senator Dever 3 sessions ago, we addressed nonprofits under the dental ownership law in support of the Ronald McDonald bill and found out that inadvertently, the nonprofit clinics had been in violation but that provision we passed took care of that.

Jack McDonald is on the board, and they are the ones who supply the dentists for the Ronald McDonald care mobile.

Senator J. Lee is not confident that all of these entities are not-for-profit; but her point is if entities such as that have figured out how to make it work, we should not be intruding on their ability to their work in ND. If we are limiting it to non-profits, we don't want to limit the programs that are for-profit.

Senator Dever stated that the language in subsection 2 says "or a board approved nonprofits."

Senator J. Lee asked if they would have to go to the board to get approved.

Jack McDonald said they could amend section 2 to say board approved for-profit or non-profit organization. He also suggested a board approved or non-profit serving the dental needs of an underserved population. That way it would be clear that the operations described would be included and all they would have to do is write a letter to the board and ask for approval.

Senator Dever asked if the language under subsection 2, the first part of that not allow for a for-profit to be included in there.

Jack McDonald noted that it says "or". The second part of that would take care of Senator J. Lee's concerns.

Senator J. Lee said that Appletree dental has more than one site, one site is in Hawley, MN. There are dentists involved with Appletree who certainly supervise but they are not always on site when dental hygienist are there and it is the same situation with the schools and it works well. However we write this, she wanted to ensure that the dentals don't have to go through any hoops to do the work they are currently doing. She said if we can make it extremely clear in the language that is brought forward, that it does not want to impede profit or not-for-profit organizations. She doesn't want them to have to get additional approval from the board if they don't already have it, she doesn't want it limited to nonprofits, and she didn't want the dentists to have to be on site.

Jack McDonald said if the language read a board approved profit or nonprofit organization serving, that would mean that it was serving right now. He asked Senator J. Lee if she thought that wouldn't cover the organizations like Appletree.

Senator J. Lee asked if we are grandfathering someone in.

Jack McDonald said he didn't think it was grandfathering in, but just approving that type of operation. He said he thought that Appletree would fit within the last two sections.

Senator Dever said that everyone here is interested in the same purpose as long as it is worded right.

Representative Hofstad sees nothing in that language grandfathers anyone in and it looks to me like the language says if someone is a nonprofit, they need to come to get board approval.

Representative Oversen is not familiar with Appletree. Do they have a dental director?

Senator J. Lee they do have several dentists, but they are not always present when dental hygienist present. She gave a personal example of a dental directed facility that does not have a dentist on site every place, for example, schools. But they are working under the Dentist supervision.

Jack McDonald said the intent of that section was to provide for those that we are talking about and if we need to reword it to make sure we bring it in, we'd certainly be happy to do that. The intent was to cover the exact type of things we are talking about now and if it doesn't cover everything we are thinking about, then maybe we need to work on the wording more. The wording probably doesn't grandfather them in.

Representative Oversen said if the concern is that we don't have direct supervision, maybe we ought to be looking (b) and clarify that supervision need not be onsite because if the only part in here that requires supervision of hygienists and it's not clear whether that's onsite or offsite, because the rest of it seems like that would be ok if we have dentists maintaining records and overseeing general practice.

Senator Dever stated he suspected the standards of supervision define onsite and offsite.

Representative Oversen said if that is the case, then there shouldn't be a problem.

Representative Hofstad asked if they will speak to the urgency of this particular section. He asked what would happen if we wait until the next biennium to deal with this. He asked Mr. McDonalds to speak to the urgency of this getting passed now.

Jack McDonald said that wasn't an urgency, but is a matter that has caused concern in the past and it's mostly in the Fargo area and maybe in Grand Forks as well where Minnesota dentists open up offices in North Dakota but never show up in ND and they staff them with dental hygienists and they operate these offices and provide dental services. The board and consumers felt that if you have a dental office in Fargo, you should have a resident supervising dentist. As far as urgency, it is not a matter of life or death, it's just one of those things that's causing concern is that they are dental offices without dentists and it is misleading to consumers. We want to rectify that situation but we would like to see that

provision in, but it is not an urgent matter of life or death. He said he thought the language could be tweaked and make it work to fit the Appletree and other similar things.

Senator Axness asked a question of the committee: is it of the agreement that we do look to add the language on this amendment because he would hate for the committee to have spent a couple conference committees talking about language in an amendment that's not in the bill if we don't intend to fully adopt it rather than just talking about the bill that is before us. He wanted to make sure that the committee is not getting into the weeds in something that isn't going to be placed in the bill.

Senator Dever indicated that he expected the chairmans would meet.

Senator J. Lee discussed that she did talk with Rep. Weisz. He would support the ownership provision at the time. She said it was a big issue if the committee messed up the language because Children's dental services does not have a dentist on site in Fargo but it provides services to thousands of kids in the metro area. Appletree does not have a resident dentist in Fargo, theirs is in Holly and they are providing services in both North Dakota and Minnesota. She said she didn't really care if the Board of Dental Examiners doesn't like it, because these services are desperately needed. They are supervised by dentists, but they are definitely not supervised by dentists who are full time occupying offices in North Dakota. We have heard about the need for these facilities and there are not enough dental services going around. She doesn't want to require them to have additional certification; in visiting with Representative Weisz, that is the one he supported and is willing to talk about. But she can't go for that part unless that is extraordinary clear.

Senator Dever asked if that only affected section 10 and asked about the other sections.

Senator J. Lee indicated they chatted mostly about section 10. She deferred to Representative Hofstad.

Rep. Hofstad's only comment was that from his perspective, he has not vetted the bill to the point where he is comfortable with it. He said section 10 looked good, but with more discussion, he is not comfortable in jeopardizing the dental loan bill.

Senator J. Lee said that the House Human Services committee never saw SB 2066.

Rod St. Aubyn, Lobbyist, said that this is important to bring up at this point. He said he remembered vague statements of dental examiners and the statements directly address the issue brought up by Senator J. Lee. The statement was adopted on April 6, 2015. He read the statement at (24:35).

He agrees to Mr. McDonald's proposed language.

Levi Andrist, Lobbyist, provided a source of information. If the committee wants to adopt section 10, he could talk with Appletree and other dental services to make sure there is no concern.

Senator Dever said that it seems that without the amendments, we had conversations about communities or cities, and we had conversations about the 4 or 5 year. He asked if those have been resolved.

Representative Hofstad said he recalled that was the point of discussion pertaining to cities or communities. Representative Oversen was going to do some brainstorming to see if there was better words.

Senator Dever asked if at the next meeting, the committee could come back with proposed amendments.

Representative Oversen said looking at section 1, and how we define the dentists that we are looking at which includes services in public health clinic, underserved populations, not for profit organizations and in cities and state defined by the state health council. She read from page 5, subsection 2, which relists those exact same thing as priorities. She wanted to clarify with council that we are not creating conflicting sections. She said she would work on getting something ready.

Senator Dever asked regarding the 4 or 5 year thing, if the committee was okay with the language in the bill.

Representative Hofstad said the 5 year repayment went with the \$100,000 repayment. If you look at the chart from Ms. Weisz, the two go together. Certainly, it affords more opportunities.

Senator Dever asked regarding the proposed amendments if the committee wanted to look at them as a whole or in small sections.

Senator J. Lee said after visiting with Representative Weisz, I think there are things from SB 2066 that should be in here and are not. She doesn't think it is fair in this conference committee to address a bill that the House did not hear. If the committee can get clarification on the Appletree issue and unless she knows there is no problem with those people, she wants nothing from SB 2066 in SB 2205.

Senator Dever said the committee would have those conversations and the conference committee will be rescheduled. Representative Oversen will meet with legislative council and he asked if Senator J. Lee could coordinate.

Senator Dever adjourned the conference committee on SB 2205.

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee Red River Room, State Capitol

SB 2205
4/20/2015
26252

☐ Subcommittee
☒ Conference Committee

Committee Clerk Signature

Donald Mueller

Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

No attachments

The following conference committee members were present for SB 2205 on April 20, 2015 at 10:00am.

Senator Dever, Senator J. Lee, Senator Axness

Representative Hofstad, Representative Rich Becker, Representative Oversen

Senator Dever called the meeting to order and noted all conference committee members are present.

Senator Dever stated when we met last time, Senator J. Lee was going to have some conversation regarding her amendments and Representative Oversen was going to visit with others.

Senator J. Lee stated as she thought through things and did homework, she recommended that it would best not to amend in anything from SB 2066. She also received a message from the Dental Board that they didn't want anything amended in either. Senator J. Lee and Representative Oversen did discuss the city/community wording. She referenced HB 1396 language, in which the term was changed to "areas of the state." The reason we were talking about the wording is because if we were going to have someone who was going to provide services beyond city. You may have someone who will provide services who live in a bigger community, but for a day, a week or two days every other week working in a remote location. We wouldn't want to limit by saying cities, and communities isn't defined. As an example, a dentist could live in Dickinson and travel out to a location if there was an office facility there, or perhaps a dental hygienist to work in an area that has general supervision by the dentist in doing something.

Senator Dever referenced the places in the bill with the word "cities" that would need to be replaced.

Representative Oversen indicated she had met with Jennifer Clark in the Legislative Council office. The general question was why are we focusing so much on the word "city" and the population of the city. All of the criteria comes down to the population that the dentist is willing to serve, not so much where but who they are serving. In the end, the city or area needs to have a defined need, willing to serve public health, underserved population, or a non-profit clinic. She would like the committee to consider removing where we have the population base, because if the city has a defined need, the population doesn't matter. The reason we put in that population size language is we pulled that from HB 1396. But if you read this, in selecting the cities for participation in the loan repayment program, we are not selecting cities. It is not cities that are applying. It is the dentist that applies. They have to define what population they are willing to serve. So it doesn't make sense to have the city. The other program has a match, so it makes more sense to look at the city in HB 1396, because the city has some stake in that if they are providing a match.

Senator Dever asked for clarification to remove subsection 1 of section 3.

Representative Oversen confirmed yes. We would end up having, under subsection 2, the criteria would be the number of dentists in that area, access to services, and then look at whether they are looking to serve in public health, underserved populations, or non-profit clinic. There were previously two programs - the general dentist program and the non-profit program. But it seemed that the dentist program just ended up looking at underserved populations. If we remove the population guidelines here, they can be trumped or put on the same level as those that will serve in a non-profit setting anyways. The very first sentence of the bill that we changed in section 1, the state health council identifies the city that has a defined need. So if we are looking at what the defined need is, that's our baseline - there has to be a defined need, whether that's access or the number of dentists or a specialty practice.

Senator Dever thinks we are all in agreement with what we want the program to do. We are looking to wordsmith to make sure it is clear. The State Health Council has a lot of experience and they are qualified people to define that within what would be broad definitions by the legislature.

Representative Hofstad agreed, as did other committee members. He stated we need to establish parameters so the Health Council has the flexibility to work within those parameters. As we craft that language, we need to set those parameters relatively loose so they can work within them. We are all in agreement on what we are trying to do.

Representative Oversen also talked about city or region. Ms. Jennifer Clark's suggestion was "city or surrounding area, or both", because you can then look at whether it is a city and surrounding area, or one or the other that has the defined need. She was comfortable with that language. She volunteered to work with Ms. Clark to draft amendments for this if the committee is interested. If it is community or surrounding area, the Health Council has to be willing to define or interpret that, however they see fit.

Senator J. Lee expressed her appreciation to Representative Oversen's work on this. She is very comfortable with the words, "cities and surrounding areas" because we all recognize where we wanted to go. She still supports getting rid of the population divisions. She supports based on need, and it is a good suggestion.

It was decided to see the draft language before making final decisions. **Senator Dever** asked **Representative Oversen** to work with the intern, Femi, and with Jennifer Clark.

Senator Dever adjourned the meeting.

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2205
4/20/2015
26287

☐ Subcommittee
☒ Conference Committee

Committee Clerk Signature

Donald Mueller

Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

Attach #1: Proposed Amendments by Rep. Oversen
Attach #2: Marked up Bill with proposed amendments

The following conference committee members were present for SB 2205 on April 20, 2015 at 4:30 pm.

Senator Dever, Senator J. Lee, Senator Axness
Representative Hofstad, Representative Rich Becker, Representative Oversen

Senator Dever called the meeting to order. All members were present.

Representative Oversen provided proposed amendment (Attach #1). She is unsure what version Jennifer Clark at Legislative Council amended as the proposed amendment lines are not matching up with the 1001 version.

Senator Dever indicated that that .01004 indicates it is amendments to the .1000 version.

Representative Oversen indicated the changes were "cities" to "cities or surrounding areas, or both" as mentioned this morning. The heart of the changes are on the second page of the amendment. If you look in the paragraph, where you are changing on page 3, lines 14 through 21. We put the two sections together. There is a section that describes the defined need for dental services. We separately defined the cities eligible for participation. We put those two together under the heading of, the Health Council shall establish criteria to be used in selecting qualified dentists and in identifying cities or surrounding areas or both that have a defined need for services. This was then broke out in (a) through (d), which you see is the number of dentists already providing dental services in the city, access to dental services, how the dentist will provide services in public health clinic, with the practice focus on underserved population, or nonprofit clinic, and the dentist training in general dentistry or a specialty in to which essential services are needed. So we took all of the areas that we had identified as needs and put them into one section, so it

really streamlined the bill into that one paragraph, with the overall goal being that the Health Council has the flexibility to put these dentists wherever the defined need is at, be that in public health setting or specialty practice or where there is an underserved population.

Representative Oversen suggested that on page 2 of the amendments, letter (c) under that paragraph, there is an "and" - she thinks it may need to be an "or". The conference committee discussed and decided it should remain "or" so they look at all the criteria. Representative Oversen agreed.

Representative Oversen stated the last section 3 and 4 are language that they hadn't touched, or conversed in their committee.

Senator Dever indicated that section 3 it changes the funding from \$80,000 to \$100,000, and section 4 it changes from four years to five years. So it incorporates those House amendments into because we will be receding the House amendments and further amending.

A request was made for a marked-up version of the bill that included the amendments.

Chairman Judy Lee expressed her appreciation for Representative Oversen's work on this. We are headed in a direction that we talked about before. She trusts the Health Council to make good decisions about this. They have in the past and she thinks they'll consider the size of the community as it says and what the needs might be.

Senator Dever asked if there are any points in the amendments that we need to discuss.

There was discussion about the amendments fitting into the copy of the version that was before the members. The proposed amendments in attachment #1 does not match up with the printed bill before the committee.

The marked up bill with proposed amendments was distributed (attach #2).

(Recording time check 11:59)

Senator Dever noted that the Senate Human Services Committee did not amend SB 2205 at all, so all amendments came from the House.

Senator J. Lee suggested that the committee look again to consider the struck out language, for practicing at least two full days a week at a public health clinic or in a non-profit dental clinic, and so forth. She thinks there needs to be some criteria for that less-reimbursed practice for this particular thing. She is comfortable with section 2 (page 3, line 23). She thinks we need to keep the part with the exception of the part about the 15 miles from lines 17 through 20 as well.

Representative Becker asked to be enlightened. His recollection when we were talking about this was that the bill referred to all dentists, specialty and otherwise. When reading section 2, number 2 and number 3 refer only to specialty training (page 3, lines 8-10).

What was taken out was a dentist who is selected to receive loan repayment funds under this chapter (a) applies to any dentist, but 2 and 3 are specific that they have to be graduate specialty training. He is not sure if that was why it was crossed out, or there was no need. The whole section applies to any dentist. He is confused himself on that.

Senator Dever indicated that since the language is struck out in black, it is how the bill was introduced.

Chairman Judy Lee asked if that would have been as an incentive, when you look at the whole thing, and she agrees with the specialty part but the other thing is, may not have practiced in the state for 3 years preceding the application. Was that intended to be a recruitment tool for people who are out of state to come in? Another words, they are going to be new graduates, and since we don't have dental school. She thinks as long as we don't prohibit somebody who has been living out-of-state from coming in. We've eliminated all of the criteria, and that is a concern.

Representative Hofstad indicated that was existing code that was struck in the original bill. **Chairman Judy Lee** added there was additional language that was struck from the House.

Representative Oversen indicated that the section that Chairman Judy Lee referred to, subsection 3 on page 3, dealing with those who are close to a larger city but who are accepting a Medicaid or working for public health, it could easily be tacked on as a subsection to what we reduced, so that we still have the focus on areas identified by need. But if you are going to practice in Bismarck, Fargo, or Grand Forks, you have to be willing to serve these specific needs. We could leave it where it is or put it immediately after the language that was added. Representative Oversen thinks it is fine staying in, and it gets to the intent of what we've been discussing.

The committee considered putting the language back in. They decided to get more input from this, including talking to someone from the Health Council (Senator Howard Anderson, Jr. is on the council), and schedule another meeting.

Chairman Judy Lee asked that the committee also think about whether we want those requirements that are on page 3, lines 17 through 25, which require two work days or 20,000 for medical assistance, and discuss when we come back. There should be a way to integrate that with the new language. The committee discussed the pages and line numbers.

Senator Dever adjourned the meeting.

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2205
4/21/2015
26311

☐ Subcommittee
☒ Conference Committee

Committee Clerk Signature

Emmery Protherg for Don Mueller

Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

Attachments: n/a

The following conference committee members were present for SB 2205 on April 21, 2015 at 10:30 am.

Senator Dever, Senator J. Lee, Senator Axness

Representative Hofstad, Representative Rich Becker, Representative Oversen

Senator Dever called the meeting to order; all members are present.

Senator Dever reminded the committee that the committee had looked at amendments .01004 on April 20th, 2015 and discussed removing language on page 3.

Representative Hofstad said as we crafted the amendments, and as Representative Oversen has brought them to us; I think they are met to cast a wide net and give the Health Council a great deal latitude. I am willing to go through the items that were deleted. He said he is amenable to include the items if Senate has interest.

Chairman Judy Lee said if Representative Hofstad and other committee members could review even the page 2 changes, because they took everything out about the loan repayment plan and she supports the city size change. She said she thought it was important to not be too hasty and she didn't think it would take too long to do that. In looking at it again, she thinks we have to look at the qualifications of the dentist.

Chairman Judy Lee asked Representative Hofstad to start on page 2, line 1.

Representative Hofstad deferred to Chairman Judy Lee to identify the language she would like to keep in the bill.

Chairman Judy Lee said she didn't see anything that was a problem. She reviewed the struck out language. She didn't see anything bad about any of that struck out language so she would like it reinstated.

Representative Oversen indicated that she had the same heartburn when they removed language in HB 1396. She agreed that it seemed like they were removing language that may be necessary.

Senator Dever explained the question to Mr. Jerma. He asked what the health council needed authority on to make the program work as it should.

Jerry Jerma, Hospital Association, said when they take a look at an application, they want to know where the dentist is going to serve. Then we look at the physicians, we want to know if they come out of an accredited school, do they have a license in ND, where have they been practicing (out of state, etc.). He said when he went through the bill; a number of criteria that is crossed out are things that we look at anyway.

Senator Dever asked if Mr. Jerma had more applicants than resources.

Jerry Jerma indicated yes. He said there are a number of applicants that the Health Council did not look at. He deferred to Brenda Weisz.

Brenda Weisz, Department of Health, said the department has seen up to 8 applicants that will come in under the regular dental loan repayment program. In the past, the department has only had 3 slots. The language that had been struck and continues to be struck is the piece on page 2 that refers to if they have practiced in the last 3 years they are not eligible for loan repayment.

Senator Dever indicated that there is language to that effect on page 3.

Jerry Jerma said when the Health Council took a look at the eligibility of the individual; they do take a look at what the loan is, how much they are asking for, and their credentials.

Representative Hofstad reworded the question to say that the language has given the Health Council a great deal of latitude and authority. Do we need to craft language to make it more specific or are you comfortable with the language as is?

Jerry Jerma said he is comfortable with the flexibility if the state health council has the authority to do that. If the criteria are assumed that they will be from an accredited college of dentistry, that they have a license and are able to practice in ND. Mr. Jerma did think it had to be in language or statute. He wanted to know if they could give loans to someone who went to school in a foreign country that doesn't meet standards and qualifications.

Senator Dever said one of the reasons he asked the question of whether the Health Council has more applicants than resources, it seemed to him if that's the case, then that narrows the field that you are going to accept. The ones that you will fund will obviously more fit the criteria.

Jerry Jerma indicated that the Health Council had had more applications than they had money for.

Senator Dever asked Senator Howard Anderson, Jr. to the podium for his perspective.

Senator Dever asked him if we are providing the latitude but also enough direction.

Senator Howard Anderson, Jr., member of health council, summarized - if you give that responsibility to the health council, it should be adequate. More information that defines where you want them to practice is recommended.

He gave an example based on current criteria. If you give the health council flexibility but where they should serve, that is what they need.

Senator Dever asked if based on current law, you would still make the same determination if the language was struck out.

Senator Howard Anderson, Jr. confirmed that. He said he didn't think the contracts were particularly necessary because the health council is going to make a contract anyway. People aren't restricted from applying from the dental loan program.

Chairman Judy Lee directed the committee to the first section on page 2 which talks about the requirements for the health council. She said you have it in there anyways so it doesn't need to be there.

She then directed the committee to page 3, which dealt with the requirements for the dentists. She said she didn't think it was a bad thing to have those requirements in statute. We have taken out cities because we think the council can figure out the areas of need. She asked what kind of criteria the bill needed the page 3 that would be specific to the dentist.

Senator Howard Anderson, Jr. said one of the things he sees here is the dentist's willingness to accept medicare and Medicaid patients and that's been one of the criteria looked at in the past. He said there has been a problem with dentists not accepting Medicaid patients at all so the Health Council asks them to commit to a certain number of Medicaid patients in a year. He said that has been helpful and if the committee would like to keep that, it would be important for the health council to know. As far as graduating in one year, he thought the language should be taken out because of someone is working in another state and decides to come to ND, they should be encouraged to do that.

He said if the committee leaves the language broad, the health council will have to establish the criteria and they can do that.

He gave some examples of the health council interpreting the criteria differently.

Senator Axness said looking at page 3, line 22 and 23, in regard to the medical payments. He said if Senator Anderson thought the Medicaid population is underserved, if the criteria of these dentists providing the services would be covered or if the language should be in there specifically addressing received dental medical payments of at least \$20,000.

Senator Howard Anderson, Jr. said he thought that the language was adequate, but the \$20,000 may be problematic with the price of dental services going up.

Senator Dever said that language only applies to dentists practicing in Bismarck, Fargo, Grand Forks, and Minot and that the whole purpose of the program was to encourage rural dentistry.

Senator Howard Anderson, Jr. agreed regarding the underserved population and said those kinds of patients may also be underserved in Fargo and Bismarck but the health council can establish criteria. It is helpful to know what the intentions are.

Chairman Judy Lee said one of the other subsections says if they are working for a not-for-profit or a public clinic, they need to work 2 days per week. She asked for the response to the language and asked if that gives enough information for the health council.

Senator Howard Anderson, Jr. said that has been recently discussed at the council; we did say we wanted them to work full time and they are working full-time as a dentist but serving those patients in one of those areas at least 2 days a week--so that language is helpful. The health council holds them to that, if they don't do that, they don't get the money.

Senator Dever indicated that some of the specifics are included in the new language added by the House on the bottom of page 3 and the top of page 4 in a more general sense.

Senator Howard Anderson, Jr. said that the language summarizes what we have been talking about in the excluded language earlier but it does not offer specifics. He said the health council in the past has relied on looking specifically at legislative intent. If you don't have specific intent, then the health council will establish by rule or policy their own criteria.

Representative Becker said there used to be reasons why the wording was scratched out. We have reiterated and we reviewed it again today and we are up to page 5. He said the committee was hoping for a conclusion today and asked if the committee could agree that everything has been covered and they could move to page 5.

Senator Dever indicated that what is on page 5 is to change language, so there is no issue.

Chairman Judy Lee said she still thinks it is important to have some minimum criteria. She is comfortable with deletions on page 2, and she thinks the health council will be fine. But she would like the Medicare and Medicaid. She thinks it would be okay to leave practice dentistry in ND. She thinks it should stay that they work 2 days minimum in major metropolitan areas.

Representative Hofstad said he is comfortable if that language needs to be inserted in the bill.

The other representatives agreed.

Senator Dever said looking at the removed language on lines 17-page 3. He said it may now appropriately fit on page 4, following section 2. Now the heading for section 2 begins on line 25.

Chairman Judy Lee asked if Senator Dever was interested in looking at the possibility of reinserting the information about 2 full work days after the subsection on page 4.

Senator Dever confirmed that.

Representative Hofstad asked for clarification about section 4, sub b, adding the language of practice at least two full work days per week.

Senator Dever confirmed and made reference to subsection a and restoring subsection 3.

Chairman Judy Lee asked whether the committee should limit it to Bismarck, Fargo and Grand Forks.

Senator Dever said the committee could have it redrafted and meet again.

Representative Oversen in reference to Bismarck, Fargo and Grand Forks, said if the committee puts the requirements that they are taking Medicaid or working in the public health clinic, that might limit rural areas that don't have a public health clinic so she thought that's why it was focusing on larger cities so they are not just opening general practice in larger cities.

Representative Hofstad asked that it be redrafted.

Senator Dever clarified that it needed to be redrafted to include the language on lines 17-25.

Senator Dever assigned the redrafting to Jennifer Clark.

Representative Oversen asked if there should be clarification that they needed to be licensed in ND.

Senator Dever Said it was not necessary.

Senator Dever adjourned the meeting on SB 2205.

2015 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Red River Room, State Capitol

SB 2205
4/22/2015
26340

☐ Subcommittee
☒ Conference Committee

Committee Clerk Signature

Donald Mueller

Explanation or reason for introduction of bill/resolution:

A bill relating to the dentists' loan repayment program; relating to the loan repayment program for dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to provide for application.

Minutes:

Attach #1: Proposed amendment

The following conference committee members were present for SB 2205 on April 22, 2015 at 9:30am.

Senator Dever, Senator J. Lee, Senator Axness

Representative Hofstad, Representative Rich Becker, Representative Oversen

Senator Dever called the meeting to order. All members are present.

Representative Oversen distributed marked up bill with proposed amendment (attach #1).

Representative Oversen reviewed the amendments. On page 3 going to page 4, we added the language that was specifically discussed. Jennifer Clark, from Legislative Council, did change the Bismarck, Grand Forks, and Fargo references to the three largest cities, to avoid putting specific cities in code. We discussed changing that to the four largest cities, which would include Minot. She brings that to the committee for consideration and discussion.

Representative Becker thinks it might be a good idea to add a 4th largest city, but we are getting close to the population base of 5 and 6, and there could be a shift in population. His suggestion was to leave it the way it is.

Senator Dever questioned if the reason they listed the cities, Fargo, Bismarck and Grand Forks, is because they had non-profit clinics.

Representative Oversen indicated that Ms. Clark noted that if we have the three largest cities, the expectation will be that the Health Council will denote that if you come into the program with those being the three largest cities, your contract won't change if the

population shifts, so that one city boots out the other. We don't put that in code, but that was her understanding of how they would contract out any loan or repayment option.

Chairman Judy Lee discussed the population of West Fargo. It is part of the metropolitan area of Fargo, so area may be better.

Representative Oversen indicated the bill states within 15 miles of the largest cities, so it is the surrounding areas of the largest cities. West Fargo and Mandan would be included in the definition.

The committee decided to not name the cities. Keeping it with the 15 mile radius allows for the metropolitan area.

Representative Oversen moved the HOUSE RECEDE from House amendments for SB 2205 and further amend as follows, using 15.0818.01005. The motion was seconded by **Senator Axness**.

Discussion

Becker validated that we were working from the 15.0818.01005 version and leaving the language as stated. Confirmed.

Roll Call Vote

Senators: 3 Yes, 0 No, 0 Absent

Representatives: 3 Yes, 0 No, 0 Absent.

Motion passes 6-0-0.

Senator Dever will carry SB 2205 to the Senate floor.

Representative Oversen will carry SB 2205 to the House floor.

1 of 3
TO
4/22/15

PROPOSED AMENDMENTS TO SENATE BILL NO. 2205

That the House recede from its amendments as printed on pages 1316-1319 of the Senate Journal and pages 1470-1473 of the House Journal and that Senate Bill No. 2205 be amended as follows:

Page 1, line 1, remove ", 43-28.1-02"

Page 1, line 1, remove the second "and"

Page 1, line 2, replace "43-28.1-04" with "43-28.1-05, 43-28.1-08, and 43-28.1-09"

Page 1, line 3, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 1, line 9, after the second bold dash insert "**Defined need -**"

Page 1, line 11, replace "to communities" with "in cities or surrounding areas, or both,"

Page 1, line 11, after "state" insert "which the state health council identifies as having a defined need for dental services"

Page 1, line 11, remove "Subject to the"

Page 1, line 12, replace "availability of funding, the" with "The"

Page 1, line 13, after the first "clinic" insert ", a practice with a focus on an underserved population,"

Page 1, line 15, overstrike "four-year" and insert immediately thereafter "five-year"

Page 1, line 15, overstrike "eighty" and insert immediately thereafter "one hundred"

Page 1, remove lines 18 through 23

Page 2, remove lines 1 through 18

Page 2, line 21, overstrike "**Dentist selection - Eligibility for loan repayment**" and insert immediately thereafter "**Criteria**"

Page 2, line 22, overstrike "In establishing the criteria regarding a dentist's eligibility for loan repayment funds"

Page 2, overstrike lines 23 and 24

Page 2, line 25, overstrike "which such services are needed in a selected"

Page 2, line 25, remove "site."

Page 2, line 26, overstrike "b. The dentist's commitment to serve in a"

Page 2, line 26, remove "site"

Page 2, line 26, overstrike "that is in need of a dentist."

Page 2, line 27, overstrike "c. The compatibility of the dentist with a selected"

Page 2, line 27, remove "site"

Page 2, line 27, overstrike the period

Page 2, overstrike line 28

Page 2, line 29, remove "site"

Page 2, line 29, overstrike the period

Page 2, overstrike lines 30 and 31

Page 3, line 1, overstrike "2."

Page 3, line 10, overstrike "Dentists selected"

Page 3, line 10, remove "must be licensed to practice dentistry in this state and"

Page 3, line 10, overstrike "shall contract"

Page 3, overstrike line 11

Page 3, line 12, remove "sites"

Page 3, line 12, overstrike the period

Page 3, line 13, remove "3."

Page 3, line 13, overstrike "For the purposes of a dentist selected for loan payment who practices within fifteen"

Page 3, overstrike lines 14 through 21 and insert immediately thereafter "The health council shall establish criteria to be used in selecting qualified dentists and in identifying cities or surrounding areas, or both, that have a defined need for dental services. The criteria must include consideration of:

- a. The number of dentists already providing dental services in the city or surrounding areas, or both;
 - b. Access to dental services in the city and the surrounding area;
 - c. How the dentist will provide dental services in a public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic; and
 - d. The dentist's training in general dentistry or in a dental specialty and the extent to which such services are needed in the identified city or surrounding areas, or both.
2. For purposes of a dentist selected for loan payment under this chapter who practices within fifteen miles [24.14 kilometers] of the city limits of one of the three largest cities in the state, to qualify to receive a yearly disbursement under this chapter during that year of obligated service, the dentist must have:
- a. Received dental medical payments of at least twenty thousand dollars in the form of medical assistance reimbursement; or
 - b. Practiced at least two full workdays per week at a public health clinic or at a nonprofit dental clinic that uses a sliding fee schedule to bill the nonprofit dental clinic's patients.

3. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria."

Page 3, remove lines 22-31

Page 4, replace lines 1 through 14 with:

"SECTION 3. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-05. Eligible loans.

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or eightyone hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

SECTION 4. AMENDMENT. Section 43-28.1-08 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-08. Payment.

The state health council may not provide any loan repayment funds to a dentist under this chapter until the dentist has practiced at least six months on a full-time basis in the selected community or surrounding areas, or both, the state health council has identified as having a defined need for dental services. Loan repayment funds for a year of obligated service are payable by the state health council no later than the end of the fiscal year in which the dentist completes the year of obligated service.

SECTION 5. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-09. Gifts, grants, and donations - Continuing appropriation.

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the ~~three~~ dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of ~~four~~five years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans."

Page 4, line 15, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 4, line 17, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Renumber accordingly

Date: [Click here to enter a date.](#)
Roll Call Vote #: "Enter Vote #"

**2015 SENATE CONFERENCE COMMITTEE
ROLL CALL VOTES**

BILL/RESOLUTION NO. SB 2205

Senate "Enter committee name" Committee

- Action Taken ☐ SENATE accede to House Amendments
☐ SENATE accede to House Amendments and further amend
☐ HOUSE recede from House amendments
☐ HOUSE recede from House amendments and amend as follows
- ☐ **Unable to agree**, recommends that the committee be discharged and a new committee be appointed

Motion Made by: _____ Seconded by: _____

Senators	15	16	17	Yes	No		Representatives	15	16	17	Yes	No
Sen. Dever	X	X	X				Rep. Hofstad	X	X	X		
Sen. J. Lee	X	X	X				Rep. Rich Becker	X	X	X		
Sen. Axness	X	X	X				Rep. Oversen	X	X	X		
Total Senate Vote							Total Rep. Vote					

Vote Count Yes: _____ No: _____ Absent: _____

Senate Carrier _____ House Carrier _____

LC Number _____ . _____ of amendment

LC Number _____ . _____ of engrossment

Emergency clause added or deleted

Statement of purpose of amendment

Date: [Click here to enter a date.](#)
Roll Call Vote #: "Enter Vote #"

**2015 SENATE CONFERENCE COMMITTEE
ROLL CALL VOTES**

BILL/RESOLUTION NO. SB 2205

Senate "Enter committee name" Committee

- Action Taken ☐ **SENATE accede to House Amendments**
☐ **SENATE accede to House Amendments and further amend**
☐ **HOUSE recede from House amendments**
☐ **HOUSE recede from House amendments and amend as follows**
- ☐ **Unable to agree**, recommends that the committee be discharged and a new committee be appointed

Motion Made by: _____ Seconded by: _____

Senators	20a	20p	21a	Yes	No		Representatives	20a	20p	21a	Yes	No
Sen. Dever	X	X	X				Rep. Hofstad	X	X	X		
Sen. J. Lee	X	X	X				Rep. Rich Becker	X	X	X		
Sen. Axness	X	X	X				Rep. Oversen	X	X	X		
Total Senate Vote							Total Rep. Vote					

Vote Count Yes: _____ No: _____ Absent: _____

Senate Carrier _____ House Carrier _____

LC Number _____ . _____ of amendment

LC Number _____ . _____ of engrossment

Emergency clause added or deleted

Statement of purpose of amendment

**2015 SENATE CONFERENCE COMMITTEE
ROLL CALL VOTES**

BILL/RESOLUTION NO. SB 2205

Senate "Enter committee name" Committee

- Action Taken ☐ SENATE accede to House Amendments
☐ SENATE accede to House Amendments and further amend
☐ HOUSE recede from House amendments
☒ HOUSE recede from House amendments and amend as follows

☐ Unable to agree, recommends that the committee be discharged and a new committee be appointed

Motion Made by: Rep. Oversen Seconded by: Sen. Axness

Senators	22			Yes	No		Representatives	22			Yes	No
Sen. Dever	X			X			Rep. Hofstad	X			X	
Sen. J. Lee	X			X			Rep. Rich Becker	X			X	
Sen. Axness	X			X			Rep. Oversen	X			X	
Total Senate Vote				3	0		Total Rep. Vote				3	0

Vote Count Yes: 6 No: 0 Absent: 0

Senate Carrier Sen. Dever House Carrier Rep. Oversen

LC Number 15.0818.01005 . _____ of amendment

LC Number Title 03000 . _____ of engrossment

Emergency clause added or deleted

Statement of purpose of amendment

REPORT OF CONFERENCE COMMITTEE

SB 2205: Your conference committee (Sens. Dever, J. Lee, Axness and Reps. Hofstad, Rich S. Becker, Oversen) recommends that the **HOUSE RECEDE** from the House amendments as printed on SJ pages 1316-1319, adopt amendments as follows, and place SB 2205 on the Seventh order:

That the House recede from its amendments as printed on pages 1316-1319 of the Senate Journal and pages 1470-1473 of the House Journal and that Senate Bill No. 2205 be amended as follows:

Page 1, line 1, remove ", 43-28.1-02"

Page 1, line 1, remove the second "and"

Page 1, line 2, replace "43-28.1-04" with "43-28.1-05, 43-28.1-08, and 43-28.1-09"

Page 1, line 3, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 1, line 9, after the second bold dash insert "**Defined need** -"

Page 1, line 11, replace "to communities" with "in cities or surrounding areas, or both,"

Page 1, line 11, after "state" insert "which the state health council identifies as having a defined need for dental services"

Page 1, line 11, remove "Subject to the"

Page 1, line 12, replace "availability of funding, the" with "The"

Page 1, line 13, after the first "clinic" insert ", a practice with a focus on an underserved population,"

Page 1, line 15, overstrike "four-year" and insert immediately thereafter "five-year"

Page 1, line 15, overstrike "eighty" and insert immediately thereafter "one hundred"

Page 1, remove lines 18 through 23

Page 2, remove lines 1 through 18

Page 2, line 21, overstrike "**Dentist selection - Eligibility for loan repayment**" and insert immediately thereafter "**Criteria**"

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Page 2, overstrike lines 23 and 24

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Page 2, line 29, remove "site"

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Page 3, line 10, remove "must be licensed to practice dentistry in this state and"

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 - b. Access to dental services in the city and the surrounding area;
 - c. How the dentist will provide dental services in a public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic; and
 - d. The dentist's training in general dentistry or in a dental specialty and the extent to which such services are needed in the identified city or surrounding areas, or both.
2. For purposes of a dentist selected for loan payment under this chapter who practices within fifteen miles [24.14 kilometers] of the city limits of one of the three largest cities in the state, to qualify to receive a yearly disbursement under this chapter during that year of obligated service, the dentist must have:
 - a. Received dental medical payments of at least twenty thousand dollars in the form of medical assistance reimbursement; or
 - b. Practiced at least two full workdays per week at a public health clinic or at a nonprofit dental clinic that uses a sliding fee schedule to bill the nonprofit dental clinic's patients.

3. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria."

Page 3, remove lines 22-31

Page 4, replace lines 1 through 14 with:

"SECTION 3. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-05. Eligible loans.

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or eightyone hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

SECTION 4. AMENDMENT. Section 43-28.1-08 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-08. Payment.

The state health council may not provide any loan repayment funds to a dentist under this chapter until the dentist has practiced at least six months on a full-time basis in the selected community or surrounding areas, or both, the state health council has identified as having a defined need for dental services. Loan repayment funds for a year of obligated service are payable by the state health council no later than the end of the fiscal year in which the dentist completes the year of obligated service.

SECTION 5. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-09. Gifts, grants, and donations - Continuing appropriation.

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the ~~three~~ dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of four years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans."

Page 4, line 15, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 4, line 17, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Renumber accordingly

SB 2205 was placed on the Seventh order of business on the calendar.

2015 TESTIMONY

SB 2205

Attach #1 01/20/15
SB 2205 J# 22186

Testimony –Senate Bill 2205
Senate Human Services Committee
January 20, 2015
Bridging the Dental Gap and ND Oral Health Coalition

My name is **Marcia Olson**. I am the Executive Director of Bridging the Dental Gap in Bismarck. We are a non-profit dental clinic providing services to low income and Medicaid patients. I am also the current President of the ND Oral Health Coalition. I am here today to speak in favor of Senate Bill 2205.

Senate Bill 2205 makes changes to Chapter 43-28.1 of the Century Code on Dentists' Student Loan Repayment. Over the years this section has been confusing for the dentists, the legislators and the people that have had to administer it. The original statute provided loans only to dentists willing to practice in a rural setting. Then a section on New Practices was added in 2007 with its own guidelines and payment amount including matching dollars from the community. In 2009 a section was added for loan repayment to dentists that practice in public health or non-profit clinics. It also had its own guidelines and payment amounts. In order to provide for these repayments, each of the parts had to be funded separately each biennium. Many times when I spoke with legislators about funding the non-profit clinic student loan program, they thought the funding was already there. But it was not. In the 2011 session no funding was allotted for dentists that serve those in the most need, North Dakota's low income population. Funding for Dental Student Loan Repayment is imperative for non-profit dental clinics. It is a useful tool to attract dentists since the non-profits cannot compete with private practice in wages. In the 2013 legislative session, funding was restored to the program thanks to efforts by Senator Lee.

The interim Health Services Committee heard testimony from Mary Amundson from UND about the need to consolidate Student Loan Repayment programs and she made a number of suggestions about doing so. Her testimony reflected on all loan repayment programs – dental, physician, nurse practitioner, veterinarian etc. However since we are part of the dental field, it seemed prudent to only make changes to that area that most effects our professions.

Additionally the UND Center for Rural Health also provided testimony recommending changes be made to the loan repayment program. Their 4th

recommendation reads: "Create a system to promote dentistry professions among state residents, and encourage practice in North Dakota through a consolidated loan repayment program and partnership/student spots at schools of dentistry."

The ND Department of Health recognizing Mary Amundson's efforts did put forth a small wording change as part of the Department's budgeting which is being heard in House Appropriations in HB1004. That wording was incorporated into the language that we have suggested. In the current Department of Health budget there is funding for both sections of the Dental Student Loan Repayment programs.

In SB2205 many parts of Ms. Amundson's recommendations have been included.

SB 2205 seeks to combine the Non-profit loan repayment and the rural loan repayment into one plan. The number of dentists funded is dependent on the amount allocated by the legislature rather than a set number of students. The selection of individuals to receive the repayment is still under the jurisdiction of the Health Council who determines the priority of need. Individuals can practice in rural setting or in non-profit clinic or be of a specialty area that is needed in the state. The New Practice loan repayment is being deleted. It has not been used for a number of years. One other change that this makes is to require all dentists to have a 4 year commitment. Under the current programs, the rural dentists were required to do a 4 year and the non-profit clinics only 3. There would be additional funds available to the non-profit practitioner for that extra year and funding would be spread out more. Currently the maximum pay out for the rural setting is \$80,000 and for the non-profit dentist it is \$60,000 over the period of the contract. This would make them equal in years and dollar amount.

The bill is still budget neutral since there is no specific number of loans being given, instead the number of loans is limited to the amount budgeted by the legislature. – This was part of the wording change that was also recommended by the Department of Health.

I would urge the passage of this consolidated statute and I would be happy to answer any questions.

Hand #2
SB2205 01/20/15
J#22186

Senate Human Services Committee

January 20, 2015

Testimony- Senate Bill No. 2205

North Dakota Dental Association

Brent L Holman DDS

Chairperson Lee, and members of the Committee, my name is Dr Brent L Holman and I am Executive Director of the North Dakota Dental Association. The North Dakota Dental Association supports Senate Bill 2205.

Since the inception of the first dental loan repayment program, different pieces have been added and modified with different sources of funding so that currently applicants as well as those that administer the programs have difficulty understanding them. Simplification is needed. It has also been a concern that if eligibility was simplified and standardized that it would better serve the goal of targeting funds to applicants that best satisfy the three goals: 1) working in non-profit safety-net clinics, 2) working in rural areas, and 3) serving low-income patients, particularly Medicaid patients.

Loan repayment also has marketing value in that newly licensed dentists are enticed to consider North Dakota when doing their research about locations when they hear about loan repayment. It contributed greatly to the increase in North Dakota kids in dental schools around the country back in the first decade of the new millennium.

Also, these programs are absolutely critical to maintain an adequate workforce in safety-net clinics.

Please vote DO PASS on SB 2205. Thanks for your consideration.



Attach #3
SB 2205 01/20/15
J# 22186

**Testimony of Dana Schaar Jahner, Community HealthCare Association of the Dakotas
To Senate Human Services Committee in Support of SB 2205
Tuesday, January 20, 2015**

I am Dana Schaar Jahner, representing the Community HealthCare Association of the Dakotas (CHAD), and I would like to speak on behalf of community health centers in support of Senate Bill 2205.

CHAD works with its community health center (CHC) members and other community leaders to find solutions for improving health care options in areas of the Dakotas that are underserved. Community health centers offer a unique model with proven results for high-quality, cost-effective care customized to benefit the patient and communities being served.

There are four community health centers with 13 clinic sites in North Dakota: Coal Country Community Health Centers based in Beulah, Family HealthCare Center based in Fargo, Northland Community Health Center based in Turtle Lake, and Valley Community Health Centers based in Northwood. In addition, Community Health Service Inc. provides primary health care services for migrant workers and their families at multiple sites, including Grafton and Moorhead, Minnesota.

Three community health centers provide dental services in the communities of Fargo, Grand Forks, Minot, and Turtle Lake. These clinics serve patients with or without insurance and regardless of their ability to pay. Dental services are affordable, and discounts are offered based on a sliding fee program to people who qualify.

Services offered include dental exams and cleanings, dental x-ray, fluoride treatments and sealants, cavity fillings, replacements and crowns, extractions, root canals, periodontal care, and emergent dental care. In 2013, the latest data available to CHAD, community health centers saw 9,878 dental patients for a total of 23,680 dental visits.

CHAD and the community health centers support SB 2205 because it standardizes the dental loan repayment program and maximum award amount (\$80,000), regardless of whether or not the dentist works in private practice or a public health or nonprofit dental health clinic.

This standardization simplifies the program, which should lead to efficiencies in management of the program through the state and less confusion in application to the program by potential dentists.

Site selection criteria are also an important component of this bill. We support continued prioritization of awards to dentists willing to serve in rural communities, followed by the addition of dentists working in public health or nonprofit dental health clinics as a second priority. This priority for clinics designed to support underserved populations is essential, particularly as salaries are lower at nonprofit clinics than dentists are able to earn through private practice.

CHAD asks the committee for its support of SB 2205 with a do pass recommendation. Thank you.

Department of Health
Dental Loan Repayment Programs
2015 - 2017 Executive Budget
SB 2205

	2011 - 2013 Appropriation			2013 - 2015 Leg Approved Budget			2015 - 2017 Executive Budget			Change from 2013-15 Leg Approved to 2015-17 Executive Budget		
	General Fund	CHTF	Total	General Fund	CHTF	Total	General Fund	CHTF	Total	General Fund	CHTF	Total
Dental	180,000	260,000	440,000	180,000	340,000	520,000	240,000	360,000	600,000	60,000	20,000	80,000
Dental New Practice	20,000	10,000	30,000		25,000	25,000			-	-	(25,000)	(25,000)
Nonprofit/Public Health Dental				180,000		180,000	180,000		180,000	-	-	-
Total	<u>200,000</u>	<u>270,000</u>	<u>470,000</u>	<u>360,000</u>	<u>365,000</u>	<u>725,000</u>	<u>420,000</u>	<u>360,000</u>	<u>780,000</u>	<u>60,000</u>	<u>(5,000)</u>	<u>55,000</u>

From Brenda Kleisz
Dept of Health
SB 2205 - 01/20/15
UH 22186
Attach 4

SB2205
State Loan Repayment Program

Summary of North Dakota Loan Repayment Programs for Health Professionals						
	Physician (MD)	Nurse Practitioner/Physician Assistant/Certified Nurse Midwife (NP/PA/CNM)	Dentist (DDS)	Dentist New Business Grant	Dentists in Public Health and Nonprofit Dental Clinics	Veterinarian (DVM)
Year program began	1991	1993	2001	2007	2009	2007
Max Amount of award per individual from State	\$45,000	\$15,000	\$80,000	\$25,000	\$60,000	\$80,000
Years of service Required	2	2	4	5	3	4
State Payment parameters	1st pymt- after at least 6 mo. service; pymt can be no later than the end of the fiscal yr. of service - 22,500 / pymt	1st pymt- after at least 3 mo. service; pymt can be no later than the end of the fiscal yr. of service- 7,500 / pymt	1st pymt- after at least 6 mo. service; pymt can be no later than the end of the fiscal yr. of service - 20,000 / pymt	Distributed in equal amts over 5 yr. period	Payments must be made during the 1st two years of service.	1st pymt (15,000)- after 6 mo. service the 1st yr.; 2nd pymt (15,000) - upon completion of 2nd yr. of service; 3rd pymt (25,000) upon completion of 3yrs; 4th pymt (25,000) upon completion of 4 yrs.
State / Community match	50%/50%	50%/50%	None	50%/50%	None	None
Number of awards/year	As many as funding will support	As many as funding will support	3	2	3 per biennium	As many as funding will support - <i>see footnote 1</i>
2013 - 2015 Biennial budget	464,288	112,500	520,000	25,000	180,000	485,000
General	464,288	112,500	180,000	0	180,000	485,000
CHTF	0	0	340,000	25,000	0	0
Century code	43-17.2	43-12.2	43-28.1	43-28.1	43-28.1-.01.1	43-29.1
Penalty if leave early	Twice uncredited amount on prorated monthly basis	Twice uncredited amount on prorated monthly basis	Total amount received	Law is Silent	Law is silent	Prorated for amount of time served for the specific yr. service was not fulfilled
Community Selection	Priority - demonstrated need for primary care physician or trained in psychiatry or population not more than 15,000	Priority - demonstrated need for primary care or population not more than 15,000	Population under 2,500 given highest priority; 2nd priority 2,500 - 10,000; < 10,000 given lowest priority	Population not more than 7,500	Sites must be in a public health setting or nonprofit dental clinic utilizing a sliding fee scale	Population under 5,000 given highest priority; 2nd priority 5,000 - 10,000; < 10,000 given lowest priority
Continuing Approp. Authority to grant additional awards if gifts, grants or donations are rec'd	No	No	Yes	No	No	Yes

1 - 2011 Session Laws change requirement of funding of "no more than 3 veterinarians" to being limited to the number supported by moneys available.

Attach 5-
 SB2205
 JH 22186
 01/20/15

Federal / State Loan Repayment Program

Federal State Loan Repayment Program (SLRP) *

	Physician (MD)	Nurse Practitioner/Physician Assistant/Certified Nurse Midwife (NP/PA/CNM)	Dentist (DDS)	Mental/Behavioral Health, Pharmacy, Registered Nurses	
Year program began	2012	2012	2012	2014	
Max Amount of award per individual from State	\$50,000	\$50,000	\$50,000	\$50,000	
Years of Service Required	2	2	2	2	
Payment Parameters	Payment is made after 90 days of service. Consistent with the National Health Service Corps Federal Program	Payment is made after 90 days of service. Consistent with the National Health Service Corps Federal Program	Payment is made after 90 days of service. Consistent with the National Health Service Corps Federal Program	Payment is made after 90 days of service. Consistent with the National Health Service Corps Federal Program	
Match Requirements	50% NonFederal Funds	50% NonFederal Funds	50% NonFederal Funds	50% NonFederal Funds	
Number of awards	6 total awards				
Federal Award	\$308,000 - 9/1/2014 - 8/31/2015				
Century code	43-17.2-02	43-12.2-02	43-28.1-02	N/A	
Penalty	Severe federal penalties, mandated by the Federal State Loan Repayment Program Office, are imposed on health care providers for default of the SLRP contractual agreement. Failure of the provider to meet any of the contractual service requirements will result in a provider penalty consisting of: 1) The payback of any SLRP funds received through the program, 2) A default penalty of \$7,500 per month multiplied by the number of months of the entire contract (if less than one year has been served) or \$7,500 multiplied by the number of months remaining in the contract (if the provider has served more than one year), and 3) An additional \$10,000 penalty if the defaulted contract is three or more years in length.				
Continuing Approp. Authority to grant additional awards if gifts, grants or donations are rec'd	No	No	No	N/A	

* - Must practice in a federally designated workforce shortage area



Attach # 6 01/20/15
SB 2205
J# 22186

**Written Testimony of Mara M. Jiran
Valley Community Health Centers
To Senate Human Services Committee in Support of SB 2205
01/ 19 / 2015**

I am **Mara M. Jiran**, Interim CEO, of Valley Community Health Centers (VCHC), and I would like to provide written testimony in support of Senate Bill 2205.

Valley Community Health Centers is a Federally Qualified Health Center (FQHC) that receives federal funding which allows us to provide discounted health care services to income eligible patients in Northwood, Larimore, Grand Forks and surrounding communities. VCHC provides community-based primary and preventive care offering broad-based access in a caring environment. We promote excellent, affordable healthcare, meeting the needs of all.

As a member of the Community HealthCare Association of the Dakotas (CHAD), we support the changes to the state dental loan repayment program outlined in SB 2205.

The dental loan repayment program has been a catalyst for recruitment and retention for Valley Community Health Centers. Since our dental clinic opened in 2007, VCHC has had four dental providers participate in the loan repayment program. We have two dentists who are currently participating in the loan repayment program and anticipate that in our search for two additional providers, the repayment program will be an invaluable tool for recruitment to community health.

The addition of nonprofit clinics as a second priority, after rural settings, is a certain positive for VCHC whose primary mission is to provide critical access to oral health to our community's most at risk populations.

I request the committee's recommendation for a do pass on SB 2205.

PO Box 160 • Northwood, ND 58267 • 701-587-6000 • 701-587-6009

Northwood Clinic
301 Highway 15
Northwood, ND 58267
701-587-6000

Larimore Clinic
607 Towner Avenue
Larimore, ND 58251
701-343-6418

Grand Forks Clinic
212 South 4th Street, Suite 301
Grand Forks, ND 58201
701-757-2100 ext. 1

Dental Clinic
212 South 4th Street, Suite 101
Grand Forks, ND 58201
701-757-2100 ext. 2

6.2



Sincerely,

A handwritten signature in black ink, appearing to read "M. Jiran", with a long horizontal flourish extending to the right.

Mara M. Jiran
Interim Chief Executive Officer
Valley Community Health Centers

PO Box 160 • Northwood, ND 58267 • 701-587-6000 • 701-587-6009

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301 Highway 15
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Grand Forks, ND 58201
701-757-2100 ext. 2

Testimony of Patrick Butler, CEO Northland Community Health Center

In Support of SB 2205

Senate Human Services Committee

January 20, 2015

Members of the House Human Services Committee, my name is Patrick Butler; I am the CEO of Northland Community Health Center. We are a Community Health Center with six medical clinics in Bowbells, McClusky, Minot, Rolla, Rolette, and Turtle Lake, and two dental clinics in Minot and Turtle Lake. I am writing in support of SB 2205. I believe it is vital for the delivery of dental care to the residents of North Dakota, especially for those who are uninsured, under-insured, or low-income.

Community Health Centers are community based health centers who may provide any combination of primary care, dental care, and mental health services to residents who live in Medically Underserved Areas (MUA) or Medically Underserved Populations (MUP). These areas are defined as areas with a shortage of healthcare providers, or a high percentage of low income, elderly residents, or infant mortality.

Northland Community Health Center is a 501 c 3 organization whose board of directors are also patients of our clinics. We provide high quality services to all patients without regard to their income or ability to pay. We are not a free clinic; however, fees for services provided are reduced by the use of a Sliding Fee Schedule with relation to the most current National Poverty Guidelines published annually by the Health and Human Services. Our ability to reduce the fees for services provided is funded by the Health Resources Services Administration (HRSA).

In 2014, Northland Community Health Center provided approximately 18,067 visits to our patients, of which 4,483 or 24.8% were dental Services provided in our Minot and Turtle Lake Dental Clinics.

In Bowbells, McClusky, and Rolette where we provide medical services, there are no dental services available, and in Rolla, dental services are provided by a private dentist, however

that dentist has met their capacity and is strictly limiting access to new patients at this time. Thus, patients seeking dental services in these areas must travel further to get dental services.

In general, recruiting healthcare providers into Rural America is an endless struggle for all Community Health Centers who spend hard earned and precious dollars in finding doctors and dentists willing to practice in relatively remote and isolated locations while serving underserved populations. In addition, according to the US Census Bureau 2011-2013 ACS 3-Year Estimate , the estimated population in North Dakota has increased from 672,591 in 2010 to 703,203 in 2013. I believe North Dakota's healthcare needs are increasing at a faster rate than the available supply of healthcare providers and will result in further strain on our current healthcare provider base.

To recruit qualified dental providers, Community Health Centers must offer top dollars, along with excellent benefit packages and incentives just to capture the attention of potential dental providers. Although I do not believe Senate Bill 2205 will in itself solve the growing gap between the healthcare needs and North Dakota's ability to meet this need, I feel it is absolutely vital in giving dental clinics serving rural communities, working in public health, and non-profit dental clinics greater ability to provide equitable incentives to recruit and retain qualified dentists.

Members of the House Human Services Committee, this concludes my testimony in support of Senate Bill 2205. I thank you for your time, consideration and support of our efforts to meet the healthcare needs of North Dakota.

Attach #8 01/20/15
SB 2205
J#22186

**Testimony of James T. Podrebarac, DDS, FACHE, Family HealthCare Center, Fargo
To Senate Human Services Committee in Support of SB 2205
Tuesday, January 20, 2015**

I am Dr. James T. Podrebarac, Dental Director of Family HealthCare Center in Fargo, and I would like to speak on behalf of Federally Qualified Health Centers in support of Senate Bill 2205.

Family HealthCare Center, a Federally Qualified Health Center, collaborates with numerous North Dakota partners in formulating and operationalizing solutions providing health care for underserved persons. We provide patient-centric access leading to cost-effective care benefiting patients and communities.

In accord with our mission as a safety net provider, "To provide affordable, quality healthcare for every person", Family HealthCare Center realized over 13,000 dental visits in 2014 through a basic services practice including most routine care regardless of patient ability to pay with Medicaid and our sliding fee scale as the major reimbursement mechanisms. We also have a staff of 36 interpreters spanning 14 languages for New Americans and other persons requiring such services. Local hospital emergency departments directly refer suspected odontogenic issues to us, thus improving patient care and lessening the hospital financial burden. We treated 2,351 emergency patients in 2014.

Site selection criteria are important components of this bill. We support prioritization of awards to dentists practicing in Federally Qualified Health Centers in that access for underserved persons is the central goal. And loan repayment aids in recruitment and retention of dentists given that Federally Qualified Health Centers salaries are less than dentists can earn through other practice venues.

Family HealthCare Center respectfully requests that the committee support SB 2205 with a "Do Pass" recommendation. Thank you.

#1

Testimony –Senate Bill 2205
House Human Services Committee
March 11, 2015
Bridging the Dental Gap and ND Oral Health Coalition

My name is Marcia Olson. I am the Executive Director of Bridging the Dental Gap in Bismarck. We are a non-profit dental clinic providing services to low income and Medicaid patients. I am also the current President of the ND Oral Health Coalition. I am here today to speak in favor of Senate Bill 2205.

Senate Bill 2205 makes changes to Chapter 43-28.1 of the Century Code on Dentists' Student Loan Repayment. Over the years this section has been confusing for the dentists, the legislators and the people that have had to administer it. The original statute provided loans only to dentists willing to practice in a rural setting. Then a section on New Practices was added in 2007 with its own guidelines and payment amount including matching dollars from the community. In 2009 a section was added for loan repayment to dentists that practice in public health or non-profit clinics. It also had its own guidelines and payment amounts. In order to provide for these repayments, each of the parts had to be funded separately each biennium. Many times when I spoke with legislators about funding the non-profit clinic student loan program, they thought the funding was already there. But it was not. In the 2011 session no funding was allotted for dentists that serve those in the most need, North Dakota's low income population. Funding for Dental Student Loan Repayment is imperative for non-profit dental clinics. It is a useful tool to attract dentists since the non-profits cannot compete with private practice in wages. In the 2013 legislative session, funding was restored to the program.

The interim Health Services Committee heard testimony from Mary Amundson from UND about the need to consolidate Student Loan Repayment programs and she made a number of suggestions about doing so. Her testimony reflected on all loan repayment programs – dental, physician, nurse practitioner, veterinarian etc. However since we are part of the dental field, it seemed prudent to only make changes to that area that most effects our professions.

Additionally the UND Center for Rural Health also provided testimony recommending changes be made to the loan repayment program. Their 4th recommendation reads: "Create a system to promote dentistry professions among

state residents, and encourage practice in North Dakota through a consolidated loan repayment program and partnership/student spots at schools of dentistry.”

The ND Department of Health recognizing Mary Amundson’s efforts did put forth a small wording change as part of the Department’s budgeting which was heard in House Appropriations in HB1004. That wording was incorporated into the language that we have suggested. In the current Department of Health budget there is funding for both sections of the Dental Student Loan Repayment programs.

In SB2205 many parts of Ms. Amundson’s recommendations have been included.

SB 2205 seeks to combine the Non-profit loan repayment and the rural loan repayment into one plan. The number of dentists funded is dependent on the amount allocated by the legislature rather than a set number of students. The selection of individuals to receive the repayment is still under the jurisdiction of the Health Council who determines the priority of need. Individuals can practice in rural setting or in non-profit clinic or be of a specialty area that is needed in the state. The New Practice loan repayment is being deleted. It has not been used for a number of years. One other change that this makes is to require all dentists to have a 4 year commitment. Under the current programs, the rural dentists were required to do a 4 year and the non-profit clinics only 3. There would be additional funds available to the non-profit practitioner for that extra year and funding would be spread out more. Currently the maximum pay out for the rural setting is \$80,000 and for the non-profit dentist it is \$60,000 over the period of the contract. This would make them equal in years and dollar amount.

The bill is still budget neutral since there is no specific number of loans being given, instead the number of loans is limited to the amount budgeted by the legislature. – This was part of the wording change that was also recommended by the Department of Health.

I would urge the passage of this consolidated statute and I would be happy to answer any questions.

#2



**Testimony of Dana Schaar Jahner, Community HealthCare Association of the Dakotas
To House Human Services Committee in Support of SB 2205
Wednesday, March 11, 2015**

Chairman Weisz and members of the committee: I am Dana Schaar Jahner, representing the Community HealthCare Association of the Dakotas (CHAD), and I would like to speak on behalf of federally qualified health centers in support of Senate Bill 2205.

CHAD works with its federally qualified health center (FQHC) members and other community leaders to find solutions for improving health care options in areas of the Dakotas that are underserved. FQHCs offer a unique model with proven results for high-quality, cost-effective care customized to benefit the patient and communities being served.

There are four FQHCs with 13 clinic sites in North Dakota: Coal Country Community Health Centers based in Beulah, Family HealthCare Center based in Fargo, Northland Community Health Center based in Turtle Lake, and Valley Community Health Centers based in Northwood. In addition, Community Health Service Inc. provides primary health care services for migrant workers and their families at multiple sites, including Grafton and Moorhead, Minnesota.

Three FQHCs provide dental services in the communities of Fargo, Grand Forks, Minot, and Turtle Lake. These clinics serve patients with or without insurance and regardless of their ability to pay. Dental services are affordable, and discounts are offered based on a sliding fee program to people who qualify.

Services offered include dental exams and cleanings, dental x-ray, fluoride treatments and sealants, cavity fillings, replacements and crowns, extractions, root canals, periodontal care, and emergent dental care. In 2013, the latest data available to CHAD, FQHCs saw 9,878 dental patients for a total of 23,680 dental visits.

CHAD and the FQHCs support SB 2205 because it standardizes the dental loan repayment program and maximum award amount (\$80,000), regardless of whether or not the dentist works in private practice or a public health or nonprofit dental health clinic. This

standardization simplifies the program, which should lead to efficiencies in management of the program through the state and less confusion in application to the program by potential dentists.

Site selection criteria are also an important component of this bill. We support continued prioritization of awards to dentists willing to serve in rural communities, followed by the addition of dentists working in public health or nonprofit dental health clinics as a second priority. This priority for clinics designed to support underserved populations is essential, particularly as salaries are lower at nonprofit clinics than dentists are able to earn through private practice.

CHAD asks the committee for its support of SB 2205 with a do pass recommendation. Thank you.

#3

House Human Services Committee

Testimony- Senate Bill No. 2205

3-11-15

North Dakota Dental Association Brent L Holman DDS

Chairman Weisz, and members of the Committee, my name is Dr Brent L Holman and I am Executive Director of the North Dakota Dental Association. The North Dakota Dental Association supports Senate Bill 2205.

Since the inception of the first dental loan repayment program, different pieces have been added and modified with different sources of funding so that currently applicants as well as those that administer the programs have difficulty understanding them. Simplification is needed. It has also been a concern that if eligibility was simplified and standardized that it would better serve the goal of targeting funds to applicants that best satisfy the three goals: 1) working in non-profit safety-net clinics, 2) working in rural areas, and 3) serving low-income patients, particularly Medicaid patients.

Loan repayment also has marketing value in that newly licensed dentists are enticed to consider North Dakota when doing their research about locations when they hear about loan repayment. It contributed greatly to the increase in North Dakota students in dental schools around the country back in the first decade of the new millennium. Also, these programs are absolutely critical to maintain an adequate workforce in safety-net clinics.

Please vote DO PASS on SB 2205. Thanks for your consideration.

#4

Testimony of Patrick Butler, CEO Northland Community Health Center

In Support of SB 2205

House Human Services Committee

March 11, 2015

Members of the House Human Services Committee, my name is Patrick Butler; I am the CEO of Northland Community Health Center. We are a Community Health Center with six medical clinics in Bowbells, McClusky, Minot, Rolla, Rolette, and Turtle Lake, and two dental clinics in Minot and Turtle Lake. I am writing in support of SB 2205. I believe it is vital for the delivery of dental care to the residents of North Dakota, especially for those who are uninsured, under-insured, or low-income.

Community Health Centers are community based health centers who may provide any combination of primary care, dental care, and mental health services to residents who live in Medically Underserved Areas (MUA) or Medically Underserved Populations (MUP). These areas are defined as areas with a shortage of healthcare providers, or a high percentage of low income, elderly residents, or infant mortality.

Northland Community Health Center is a 501 c 3 organization whose board of directors are also patients of our clinics. We provide high quality services to all patients without regard to their income or ability to pay. We are not a free clinic; however, fees for services provided are reduced by the use of a Sliding Fee Schedule with relation to the most current National Poverty Guidelines published annually by the Health and Human Services. Our ability to reduce the fees for services provided is funded by the Health Resources Services Administration (HRSA).

In 2014, Northland Community Health Center provided approximately 18,067 visits to our patients, of which 4,483 or 24.8% were dental Services provided in our Minot and Turtle Lake Dental Clinics.

In Bowbells, McClusky, and Rolette where we provide medical services, there are no dental services available, and in Rolla, dental services are provided by a private dentist, however

that dentist has met their capacity and is strictly limiting access to new patients at this time. Thus, patients seeking dental services in these areas must travel further to get dental services.

In general, recruiting healthcare providers into Rural America is an endless struggle for all Community Health Centers who spend hard earned and precious dollars in finding doctors and dentists willing to practice in relatively remote and isolated locations while serving underserved populations. In addition, according to the US Census Bureau 2011-2013 ACS 3-Year Estimate , the estimated population in North Dakota has increased from 672,591 in 2010 to 703,203 in 2013. I believe North Dakota's healthcare needs are increasing at a faster rate than the available supply of healthcare providers and will result in further strain on our current healthcare provider base.

To recruit qualified dental providers, Community Health Centers must offer top dollars, along with excellent benefit packages and incentives just to capture the attention of potential dental providers. Although I do not believe Senate Bill 2205 will in itself solve the growing gap between the healthcare needs and North Dakota's ability to meet this need, I feel it is absolutely vital in giving dental clinics serving rural communities, working in public health, and non-profit dental clinics greater ability to provide equitable incentives to recruit and retain qualified dentists.

Members of the House Human Services Committee, this concludes my testimony in support of Senate Bill 2205. I thank you for your time, consideration and support of our efforts to meet the healthcare needs of North Dakota.

#5

**Written Testimony of Mara M. Jiran
Valley Community Health Centers
To House Human Services Committee in Support of SB 2205
03 / / / 2015**

I am Mara M. Jiran, Interim CEO, of Valley Community Health Centers (VCHC), and I would like to provide written testimony in support of Senate Bill 2205.

Valley Community Health Centers is a Federally Qualified Health Center (FQHC) that receives federal funding which allows us to provide discounted health care services to income eligible patients in Northwood, Larimore, Grand Forks and surrounding communities. VCHC provides community-based primary and preventive care offering broad-based access in a caring environment. We promote excellent, affordable healthcare, meeting the needs of all.

As a member of the Community HealthCare Association of the Dakotas (CHAD), we support the changes to the state dental loan repayment program outlined in SB 2205.

The dental loan repayment program has been a catalyst for recruitment and retention for Valley Community Health Centers. Since our dental clinic opened in 2007, VCHC has had four dental providers participate in the loan repayment program. We have two dentists who are currently participating in the loan repayment program and anticipate that in our search for two additional providers, the repayment program will be an invaluable tool for recruitment to community health.

The addition of nonprofit clinics as a second priority, after rural settings, is a certain positive for VCHC whose primary mission is to provide critical access to oral health to our community's most at risk populations.

I request the committee's recommendation for a do pass on SB 2205.

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Sincerely,

A handwritten signature in black ink, appearing to be 'M. Jiran', with a long horizontal flourish extending to the right.

Mara M. Jiran
Interim Chief Executive Officer
Valley Community Health Centers

2

#6

**Testimony of James T. Podrebarac, DDS, FACHE, Family HealthCare Center, Fargo
To House Human Services Committee in Support of SB 2205**

March 11, 2015

I am Dr. James T. Podrebarac, Dental Director of Family HealthCare Center in Fargo, and I would like to speak on behalf of Federally Qualified Health Centers in support of Senate Bill 2205.

Family HealthCare Center, a Federally Qualified Health Center, collaborates with numerous North Dakota partners in formulating and operationalizing solutions providing health care for underserved persons. We provide patient-centric access leading to cost-effective care benefiting patients and communities.

In accord with our mission as a safety net provider, "To provide affordable, quality healthcare for every person", Family HealthCare Center realized over 13,000 dental visits in 2014 through a basic services practice including most routine care regardless of patient ability to pay with Medicaid and our sliding fee scale as the major reimbursement mechanisms. We also have a staff of 36 interpreters spanning 14 languages for New Americans and other persons requiring such services. Local hospital emergency departments directly refer suspected odontogenic issues to us, thus improving patient care and lessening the hospital financial burden. We treated 2,351 emergency patients in 2014.

Site selection criteria are important components of this bill. We support prioritization of awards to dentists practicing in Federally Qualified Health Centers in that access for underserved persons is the central goal. And loan repayment aids in recruitment and retention of dentists given that Federally Qualified Health Centers salaries are less than dentists can earn through other practice venues.

Family HealthCare Center respectfully requests that the committee support SB 2205 with a "Do Pass" recommendation. Thank you.

1

3-24-15

#1

PROPOSED AMENDMENTS TO SENATE BILL No. 2205

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to provide student loan repayment programs for dentists; to repeal sections 43-28.1-01.1 and 43-28.1-10 of the North Dakota Century Code; and to provide for an application.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1.

Student loan repayment programs - Healthcare professionals.

The health council shall administer student loan repayment programs, as established by this chapter, for healthcare professionals willing to provide services in cities that have a defined need for such services.

SECTION 2.

Application process.

The health council shall develop an application process for cities seeking to fill health care needs and for healthcare professionals willing to provide necessary services in exchange for benefits under a student loan repayment program.

SECTION 3.

Cities - Selection criteria - Matching funds.

1. The health council shall establish criteria to be used in selecting cities for participation in a program. The criteria must include:
 - a. The number of healthcare professionals already providing services in the city;
 - b. Access to healthcare services in the city and the surrounding area; and
 - c. The level of support from the city and the surrounding area
2. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria;
3. A city may not be selected for participation unless it contractually commits to providing matching funds equal to the amount required by a loan repayment program in accordance with section 6 of this Act.

SECTION 4.

Cities - Eligibility for participation - Priority.

/

In selecting cities for participation in a program, the health council shall give priority, in descending order, to those cities that meet the selection criteria, or to a practice with a focus on an underserved population and;

1. Have fewer than fifteen thousand residents;
2. a. Have at least fifteen thousand residents, but fewer than thirty thousand residents; and
b. Do not belong to a metropolitan statistical area; or
3. Have at least thirty thousand residents.

SECTION 5.

Healthcare professionals - Selection criteria.

1. The health council shall establish criteria to be used in selecting healthcare professionals for participation in a student loan repayment program. The criteria must include:
 - a. The healthcare professional's specialty;
 - b. The need for the healthcare professional's services within a city;
 - c. The healthcare professional's education and experience;
 - d. The healthcare professional's date of availability and anticipated term of availability; and
 - e. The healthcare professional's willingness to accept medicare and Medicaid assignments, if applicable.
2. The health council shall give priority to healthcare professionals who graduated from an institution of higher education in this state.

SECTION 6.

Student loan repayment program - Contract.

1. The health council shall enter into a contract with a selected healthcare professional. The health council shall agree to provide student loan repayments on behalf of the selected healthcare professional subject to the requirements and limitations of this section.

 a. For a dentist:

- (1) The loan repayment must be equal to twenty thousand dollars per year; and
- (2) The matching funds must equal twenty-five percent of the amount required in paragraph 1.

2.
 - a. Payments under this section must be made on behalf of the health care professional directly to the Bank of North Dakota or to another participating lending institution.
 - b. Except as otherwise provided, payments under this section maybe made only at the conclusion of each twelve month period of service.
 - c. Prorated payments may be made only if:
 - (1) The repayment of the loan requires less than a full annual payment;
 - (2) The health care professional is terminated or resigns from his or her position; or
 - (3) The health care professional is unable to complete a twelve month period of service due to the individual's death, a certifiable medical condition or disability, or a call to military service.
3. Payments under this section terminate upon the earlier of:
 - a. The full repayment of the health care professional's student loan; or
 - b. The completion of five years as a participant in the student loan repayment program

SECTION 7. REPEAL. Sections 43-28.1-01.1 and 43-28.1-10 of the North Dakota Century Code are repealed.

SECTION 8. APPLICATION. This Act applies to loan repayment contracts entered into on or after August 1, 2015. Any dentist loan repayment contract entered into before August 1, 2015, is governed by section 43-28.1-01.1 as it existed on July 31, 2015. Any new practice grant contract for dentists entered into before August 1, 2015, is governed by section 43-28.1-10, as it existed on July 31, 2015."

Renumber Accordingly

3-24-15

#2

PROPOSED AMENDMENTS TO SENATE BILL No. 2205

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to provide student loan repayment programs for dentists; to repeal sections 43-28.1-01.1 and 43-28.1-10 of the North Dakota Century Code; and to provide for an application.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1.

Student loan repayment programs - Healthcare professionals.

The health council shall administer student loan repayment programs, as established by this chapter, for healthcare professionals willing to provide services in cities that have a defined need for such services.

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Application process.

The health council shall develop an application process for cities seeking to fill health care needs and for healthcare professionals willing to provide necessary services in exchange for benefits under a student loan repayment program.

SECTION 3.

Cities - Selection criteria - Matching funds.

1. The health council shall establish criteria to be used in selecting cities for participation in a program. The criteria must include:
 - a. The number of healthcare professionals already providing services in the city;
 - b. Access to healthcare services in the city and the surrounding area; and
 - c. The level of support from the city and the surrounding area
2. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria;
3. A city may not be selected for participation unless it contractually commits to providing matching funds equal to the amount required by a loan repayment program in accordance with section 6 of this Act.

SECTION 4.

Cities - Eligibility for participation - Priority.

/

In selecting cities for participation in a program, the health council shall give priority, in descending order, to those cities that meet the selection criteria, or to a practice with a focus on an underserved population and;

1. Have fewer than fifteen thousand residents;
2. a. Have at least fifteen thousand residents, but fewer than thirty thousand residents; and
b. Do not belong to a metropolitan statistical area; or
3. Have at least thirty thousand residents.

SECTION 5.

Healthcare professionals - Selection criteria.

1. The health council shall establish criteria to be used in selecting healthcare professionals for participation in a student loan repayment program. The criteria must include:
 - a. The healthcare professional's specialty;
 - b. The need for the healthcare professional's services within a city;
 - c. The healthcare professional's education and experience;
 - d. The healthcare professional's date of availability and anticipated term of availability; and
 - e. The healthcare professional's willingness to accept medicare and Medicaid assignments, if applicable.
2. The health council shall give priority to healthcare professionals who graduated from an institution of higher education in this state.

SECTION 6.

Student loan repayment program - Contract.

1. The health council shall enter into a contract with a selected healthcare professional. The health council shall agree to provide student loan repayments on behalf of the selected healthcare professional subject to the requirements and limitations of this section.
 - a. For a dentist:
 - (1) The loan repayment must be equal to fifteen thousand dollars per year; and
2. a. Payments under this section must be made on behalf of the health care

professional directly to the Bank of North Dakota or to another participating lending institution.

b. Except as otherwise provided, payments under this section maybe made only at the conclusion of each twelve month period of service.

c. Prorated payments may be made only if:

(1) The repayment of the loan requires less than a full annual payment;

(2) The health care professional is terminated or resigns from his or her position; or

(3) The health care professional is unable to complete a twelve month period of service due to the individual's death, a certifiable medical condition or disability, or a call to military service.

3. Payments under this section terminate upon the earlier of:

a. The full repayment of the health care professional's student loan; or

b. The completion of five years as a participant in the student loan repayment program

SECTION 7. REPEAL. Sections 43-28.1-01.1 and 43-28.1-10 of the North Dakota Century Code are repealed.

SECTION 8. APPLICATION. This Act applies to loan repayment contracts entered into on or after August 1, 2015. Any dentist loan repayment contract entered into before August 1, 2015, is governed by section 43-28.1-01.1 as it existed on July 31, 2015. Any new practice grant contract for dentists entered into before August 1, 2015, is governed by section 43-28.1-10, as it existed on July 31, 2015."

Renumber Accordingly

4-1-15

#1

PROPOSED AMENDMENTS TO SENATE BILL NO. 2205

Page 1, line 1, remove "43-28.1-02, 43-28.1-03, and"

Page 1, line 2, remove "43-28.1-04"

Page 1, line 15, replace "four-year" with "five-year"

Page 1, line 15, replace "eighty thousand dollars" with "one hundred thousand dollars"

Page 1, remove lines 18-23

Page 2, remove lines 1-18

Page 2, overstrike lines 21-31

Page 3, overstrike lines 10 through 21 and insert immediately thereafter:

43-28.1-03 Cities - Selection criteria

1. The health council shall establish criteria to be used in selecting cities for participation in a program. The criteria must include:
 - a. The number of healthcare professionals already providing services in the city;
 - b. Access to healthcare services in the city and the surrounding area; and
2. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria;

Page 3, remove lines 1-21

Page 3, overstrike lines 24-31 and insert immediately thereafter:

43-28.1-04 Cities - Eligibility for participation - Priority.

In selecting cities for participation in a program, the health council shall give priority, in descending order, to those cities that meet the selection criteria, or to a practice with a focus on an underserved population or in a public health clinic or nonprofit clinic and;

1. Have fewer than fifteen thousand residents;
2. a. Have at least fifteen thousand residents, but fewer than thirty thousand residents; and
 - b. Do not belong to a metropolitan statistical area; or
3. Have at least thirty thousand residents.

Page 4, overstrike lines 1-14

Page 4, after line 14, insert

1

SECTION 5. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or ~~eighty thousand dollars~~ one hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

SECTION 6. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the three dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of ~~four~~ five years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans.

Page 4, line 15, after "43-28.1-01.1" insert "43-28.1-02"

Page 4, line 17, after "43-28.1-01.1" insert "43-28.1-02"

Renumber Accordingly

April 14, 2015

Attach #1
SB 2205
04/15/15
26137

PROPOSED AMENDMENTS TO SENATE BILL NO. 2205

That the Senate accede to the House amendments as printed on pages 1316-1319 of the Senate Journal and pages 1470-1473 of the House Journal and that Senate Bill No. 2205 be further amended as follows:

Page 1, line 1, after "to" insert "create and enact section 43-28-25.1 of the North Dakota Century Code, relating to tribal sovereignty and the ownership of a dental office or clinic; to"

Page 1, line 1, after "sections" insert "43-20-01.3, 43-20-03, 43-20-12.3, 43-20-13.2, 43-28-03, 43-28-04, 43-28-15, 43-28-18.1, 43-28-25,"

Page 1, line 2, after the second "the" insert "practice and licensing of dental assistants and hygienists and dentists and the"

Page 1, line 5, after the semicolon insert "to provide a penalty;"

Page 1, after line 6, insert:

"SECTION 1. AMENDMENT. Section 43-20-01.3 of the North Dakota Century Code is amended and reenacted as follows:

43-20-01.3. Licensure by credential review.

Applications for licensure to practice dental hygiene by credential review must be made on forms provided by the board and submitted thirty days before the examination administered by the board. The board may issue a license and certificate of registration to practice dental hygiene to an applicant who meets all of the following requirements:

1. The applicant, ~~for at least three~~ within the five years immediately preceding application, has been licensed in good standing and has been actively practicing dental hygiene in another jurisdiction where the requirements are at least substantially equivalent to those of this state.
2. Grounds for denial of the application under section 43-20-05 do not exist.
3. The applicant has paid to the board the fee established by the board by rule.
4. The applicant has delivered to the board a certificate from the examining or licensing board of every jurisdiction in which the individual is licensed to practice, certifying that the individual is a licensed and registered dental hygienist in good standing in that jurisdiction.
5. The applicant has passed a written examination on the laws and rules governing the practice of dentistry in this state administered by the board at a meeting.
6. The applicant has met any requirement for licensure established by the board by rule.

1.2
SECTION 2. AMENDMENT. Section 43-20-03 of the North Dakota Century Code is amended and reenacted as follows:

43-20-03. Dental hygienists - Practice by.

As used in this chapter, "dental hygiene" and the practice thereof means the removal of accumulated matter from the natural and restored surfaces of teeth and from restorations in the human mouth, the polishing of such surfaces, and the topical application of drugs to the surface tissues of the mouth and to the surface of teeth if such acts are performed under the direct, indirect, or general supervision of a licensed dentist. General supervision may be used if the procedures are authorized in advance by the supervising dentist, except procedures which may only be used under indirect or direct supervision as established by the board by rule.

Only a person licensed as a dental hygienist may be referred to as a dental hygienist. Additional tasks permitted to be performed by licensed dental hygienists may be outlined by the board of dental examiners by appropriate rules.

SECTION 3. AMENDMENT. Section 43-20-12.3 of the North Dakota Century Code is amended and reenacted as follows:

43-20-12.3. Supervised administration of anesthesia - Board rules.

A licensed dentist may delegate to a dental hygienist licensed by the board the administration of block and infiltration anesthesia ~~to a patient who is at least eighteen years old~~. The dental hygienist must be under the ~~direct~~indirect supervision of a dentist and the dental hygienist must complete the educational requirements as required by the commission on dental accreditation and approved by the board. The board shall adopt rules to implement this section.

SECTION 4. AMENDMENT. Section 43-20-13.2 of the North Dakota Century Code is amended and reenacted as follows:

43-20-13.2. Registered and qualified dental assistant registration.

To be registered as a registered or qualified dental assistant, an individual shall ~~apply and meet the requirements established by the board by rule to the executive director of the board on forms prescribed by the board. The application must be verified under oath to the effect that all of the statements contained in the application are true of the applicant's own knowledge. The applicant shall enclose with the application a recent autographed picture of the applicant and an application fee as determined by the board by rule. The board may grant a registration to an applicant who has met all of the following requirements:~~

1. The applicant passed, within one year of making application, a written examination on the laws and rules governing the practice of dentistry in this state.
2. Grounds for denial of the application under section 43-20-05 do not exist.
3. The applicant met any requirement for registration established by the board by rule.

SECTION 5. AMENDMENT. Section 43-28-03 of the North Dakota Century Code is amended and reenacted as follows:

43-28-03. State board of dental examiners - Members - Appointment - Terms of office - Oath - Vacancies.

The state board of dental examiners consists of ~~seven~~eight members appointed by the governor. The membership of the board must include five dentist members, one dental hygienist member, one registered dental assistant member, and one consumer member. Appointment to the board is for a term of five years, with terms of office arranged so that one term expires on March sixteenth of each year, except that each fifth year there must be two new board members appointed, one of whom is a dentist and the other a dental hygienist ~~and~~, two years later two new board members must be appointed, one of whom is a dentist; and one of whom is a consumer member, and two years later two new board members must be appointed, one of whom is a dentist and one of whom is a registered dental assistant. ~~The first five-year term of the consumer member commences on July 1, 1993, and continues through March 15, 1998.~~ Each member of the board shall hold office until a successor is appointed and qualified. Persons appointed to the board shall qualify by taking the oath required of civil officers. No member may serve more than ten years or two 5-year terms of office. If the terms of more than two board members expire in the same year, the governor may extend for no more than two years the terms of one or more of those board members in order to comply with this section. If a member of the board is absent from two consecutive regular meetings, the board may declare a vacancy to exist. All vacancies on the board must be filled by the governor by appointment.

SECTION 6. AMENDMENT. Section 43-28-04 of the North Dakota Century Code is amended and reenacted as follows:

43-28-04. Qualifications and appointment of members of the board - Limited vote.

1. An individual may not be appointed as a dentist member of the board unless that individual:
 - a. Is a dentist licensed and registered under this chapter; and
 - b. Is actively engaged in the practice of dentistry and has been so engaged in this state for at least five years immediately preceding the appointment.
2. An individual may not be appointed as the dental hygienist member of the board unless that individual:
 - a. Is a licensed and registered dental hygienist in accordance with chapter 43-20; and
 - b. Is actively engaged in the practice of dental hygiene and has been so engaged in this state for at least five years immediately preceding the dental hygienist's appointment.
3. An individual may not be appointed as the consumer member of the board unless that individual:
 - a. Has been a resident of North Dakota for five years immediately preceding appointment;
 - b. Has no personal or family financial relationship with the dental profession; and

- 1.4
- c. Is not a dentist, a dental hygienist, a dental assistant, a physician, a nurse, or the spouse of an individual engaged in any of those occupations.
 4. An individual may not be appointed as the registered dental assistant member of the board unless the individual:
 - a. Is a registered dental assistant under chapter 43-20; and
 - b. Is actively engaged in the practice of dental assistance in this state for at least five years immediately preceding the dental assistant's appointment.
 5. The dental hygienist, the registered dental assistant, and consumer member of the board shall exercise full voting privileges in all areas except that the dental hygienist may not participate in the clinical examination of dentists for licensure and the registered dental assistant and the consumer member may not participate in the clinical examination of dentists or hygienists for licensure.

SECTION 7. AMENDMENT. Section 43-28-15 of the North Dakota Century Code is amended and reenacted as follows:

43-28-15. Licensure by credential review.

The board may issue a license and certificate of registration to practice dentistry in this state to an applicant who meets all of the following requirements:

1. The applicant, ~~for at least~~within the five years immediately preceding application, has been licensed in good standing and has been actively ~~practicing~~engaged in the practice of dentistry in another jurisdiction where the requirements are at least substantially equivalent to those of this state.
2. Grounds for denial of the application under section 43-28-18 do not exist.
3. The applicant pays to the board the fee determined by the board by rule.
4. The applicant delivers to the board a certificate from the examining or licensing board of every jurisdiction in which the individual is practicing or is licensed to practice, certifying that the individual is a licensed and registered dentist in good standing in that jurisdiction.
5. The applicant passes a written examination on the laws and rules governing the practice of dentistry in this state administered by the board at a meeting.
6. The applicant meets any requirement for licensure established by the board by rule.

SECTION 8. AMENDMENT. Section 43-28-18.1 of the North Dakota Century Code is amended and reenacted as follows:

43-28-18.1. Duty to report.

1. A dentist shall report to the board in writing within sixty days of the event any illegal, unethical, or errant behavior or conduct of the dentist, including the following events, proceedings, or formal or informal actions:
 - a. A dental malpractice judgment or malpractice settlement or a final judgment by a court in favor of any party and against the licensee.
 - b. A final disposition regarding the surrender of a license, or adverse action taken against a license by a licensing agency in another state, territory, or country; a governmental agency; a law enforcement agency; or a court for an act or conduct that would constitute grounds for discipline under this chapter.
 - c. A mortality or other incident occurring in an outpatient facility of the dentist which results in temporary or permanent physical or mental injury requiring hospitalization of the patient during or as a direct result of a dental procedure or related use of general anesthesia, deep sedation, conscious sedation with a parenteral drug, or enteral sedation.
 - d. Actions based on professional conduct or competence resulting in the revocation, suspension, temporary suspension, restriction, reduction, or voluntary surrender or withdrawal of clinical or hospital privileges.
2. A dentist shall advise the board in a timely manner if the dentist reasonably believes another dentist has committed an illegal or immoral act or has otherwise failed to make a report as required under subsection 1.

SECTION 9. AMENDMENT. Section 43-28-25 of the North Dakota Century Code is amended and reenacted as follows:

43-28-25. Unlawful acts - Penalty.

It is a class A misdemeanor:

1. For any unlicensed person to construct, alter, repair, or duplicate any denture, partial denture, bridge, splint, or orthodontic or prosthetic appliance, except as provided by rule adopted by the board.
2. For any person:
 - a. To falsely claim or pretend to be a graduate from any dental college or the holder of any diploma or degree from such college;
 - b. To practice any fraud and deceit either in obtaining a license or a certificate of registration;
 - c. To falsely claim or pretend to have or hold a license or certificate of registration from the board to practice dentistry; or
 - d. To practice dentistry in this state without a license and certificate of registration.
3. For any person, except a dentist, to own more than forty-nine percent of an office practice or business at which the practice of dentistry is performed.

This provision does not apply to a board-approved medical clinic, hospital, or public health setting with which a dentist is associated; a board-approved nonprofit organization created to serve the dental needs of an underserved population; or the heir or personal representative of a deceased dentist. The board may inspect and approve a medical clinic, hospital, public health setting, or nonprofit organization at which the practice of dentistry is performed. The heir or personal representative ~~may~~shall ~~appoint a dentist to~~ operate an office under the name of the deceased dentist for a period of not longer than two years from the date of the dentist's death.

The board may institute a civil action for an injunction prohibiting violations of this section without proof that anyone suffered actual damages.

SECTION 10. Section 43-28-25.1 of the North Dakota Century Code is created and enacted as follows:

43-28-25.1. Ownership and operation of a dental office or clinic.

1. Any individual or organization that owns or operates a dental office or clinic at which the practice of dentistry takes place shall designate a dentist or dentists as the dental director or directors of the dental office or clinic. The dental director is responsible for the clinical practice of dentistry at the dental office or clinic, including:
 - a. The overall quality of patient care rendered or performed in the clinical practice of dentistry;
 - b. The supervision of dental hygienists, dental assistants, and other personnel involved in direct patient care and the authorization of procedures performed by the dental hygienists, dental assistants, and other personnel in accordance with the standards of supervision established by law or rule;
 - c. The retention of patient dental records as required by law and the rules adopted by the board;
 - d. To ensure each patient receiving services from the dental office or clinic has a dentist of record; and
 - e. The maintenance of current records of the names of the dentists who supervise the clinical activities of dental hygienists, dental assistants, or other personnel involved in direct patient care. The records must be available to the board upon written request.
2. The provisions of this section do not apply to a board-approved medical clinic, hospital, or public health setting with which a dentist is associated; or a board-approved nonprofit organization created to serve the dental needs of an underserved population."

Renumber accordingly

Proposed Changes to SB 2205 - \$100,000 over 5 years for Dentists

Attach #1
04/16/2015
SB 2205
26169

House Version of HB 1004 - 2015- 2017
Funds for New Loan Repayment when incl.
funds for the Nonprofit / Public Dentists

General Fund	\$ 360,000
Special Funds	0

Total \$ 360,000

2015-17 Executive Budget						Future obligations Does not reflect new applicants	
		FY 2016	Pmt Date	FY 2017	Pmt Date	2017-2019	2019-2021 & forward
FY 16	#1 Dentists - current NDCC	20,000		20,000		40,000	-
	#2	20,000		20,000		40,000	-
	#3	20,000		20,000		40,000	-
Nonprofit / public health - current NDCC							
currently have one applicant for							
	#1 April Health Council Meeting	30,000		30,000		-	-
FY 17	#1 Dentists - Proposed Revised NDCC			20,000		40,000	40,000
	#2			20,000		40,000	40,000
	#3			20,000		40,000	40,000
	#4			20,000		40,000	40,000
	#5			20,000		40,000	40,000
	#6			20,000		40,000	40,000
	#7			20,000		40,000	40,000
	#8			20,000		40,000	40,000
	#9			20,000		40,000	40,000
Subtotal		\$ 90,000		\$ 270,000		\$ 480,000	\$ 360,000
NEW LOANS TOTAL				\$360,000			

DRAFT

*Attach #1
SB 2205
04/20/2015 (pm)
26287*

PROPOSED AMENDMENTS TO SENATE BILL NO. 2205

That the House recede from its amendments as printed on pages 1316-1319 of the Senate Journal and pages 1470-1473 of the House Journal and that Senate Bill No. 2205 be amended as follows:

Page 1, line 1, remove ", 43-28.1-02"

Page 1, line 1, remove the second "and"

Page 1, line 2, replace "43-28.1-04" with "43-28.1-05, and 43-28.1-09"

Page 1, line 3, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 1, line 9, after the second bold dash insert "**Defined need** -"

Page 1, line 11, replace "to communities" with "in cities or surrounding areas, or both."

Page 1, line 11, after "state" insert "which the state health council identifies as having a defined need for dental services"

Page 1, line 11, remove "Subject to the

Page 1, line 12, replace "availability of funding, the" with "The"

Page 1, line 13, after the first "clinic" insert ", a practice with a focus on an underserved population."

Page 1, line 15, overstrike "four-year" and insert immediately thereafter "five-year"

Page 1, line 15, overstrike "eighty" and insert immediately thereafter "one hundred"

Page 1, remove lines 18 through 23

Page 2, remove lines 1 through 18

Page 2, line 21, overstrike "**Dentist selection - Eligibility for loan repayment**" and insert immediately thereafter "**Criteria**"

Page 2, line 22, overstrike "In establishing the criteria regarding a dentist's eligibility for loan repayment funds"

Page 2, overstrike lines 23 and 24

Page 2, line 25, overstrike "which such services are needed in a selected"

Page 2, line 25, remove "site."

Page 2, line 26, overstrike "b. The dentist's commitment to serve in a"

Page 2, line 26, remove "site"

Page 2, line 26, overstrike "that is in need of a dentist."

Page 2, line 27, overstrike "c. The compatibility of the dentist with a selected"

Page 2, line 27, remove "site"

1.2

Page 2, line 27, overstrike the period

Page 2, overstrike line 28

Page 2, line 29, remove "site"

Page 2, line 29, overstrike the period

Page 2, overstrike lines 30 and 31

Page 3, line 1, overstrike "2."

Page 3, line 10, overstrike "Dentists selected"

Page 3, line 10, remove "must be licensed to practice dentistry in this state and"

Page 3, line 10, overstrike "shall contract"

Page 3, overstrike line 11

Page 3, line 12, remove "sites"

Page 3, line 12, overstrike the period

Page 3, line 13, remove "3."

Page 3, line 13, overstrike "For the purposes of a dentist selected for loan payment who practices within fifteen"

Page 3, overstrike lines 14 through 21 and insert immediately thereafter "The health council shall establish criteria to be used in selecting qualified dentists and in identifying cities or surrounding areas, or both, that have a defined need for dental services. The criteria must include consideration of:

- a. The number of dentists already providing dental services in the city or surrounding areas, or both;
 - b. Access to dental services in the city and the surrounding area;
 - c. How the dentist will provide dental services in a public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic; and
 - d. The dentist's training in general dentistry or in a dental specialty and the extent to which such services are needed in the identified city or surrounding areas, or both.
2. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria."

Page 3, remove lines 22-31

Page 4, replace lines 1 through 14 with:

"SECTION 3. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-05. Eligible loans.

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment

of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or eightyone hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

SECTION 4. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-09. Gifts, grants, and donations - Continuing appropriation.

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the ~~three~~ dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of ~~four~~five years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans."

Page 4, line 15, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 4, line 17, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Renumber accordingly

Introduced by

Senator Bekkedahl

Representatives Hawken, Hofstad, Keiser, Meier

A BILL for an Act to amend and reenact sections 43-28.1-01, ~~43-28.1-02~~, 43-28.1-03, ~~and~~
~~43-28.1-04~~ 43-28.1-05, and 43-28.1-09 of the North Dakota Century Code, relating to the
dentists' loan repayment program; to repeal sections 43-28.1-01.1, 43-28.1-02, 43-28.1-04, and
43-28.1-10 of the North Dakota Century Code, relating to the loan repayment program for
dentists in public health and nonprofit dental clinics and new practice grants for dentists; and to
provide for application.

BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

SECTION 1. AMENDMENT. Section 43-28.1-01 of the North Dakota Century Code is
amended and reenacted as follows:

**43-28.1-01. Loan repayment program - Dentists - Defined need - Maximum amount of
funds.**

Each year the state health council shall select, from a pool of applicants ~~no more than~~
~~three,~~ dentists who shall provide dental services ~~to communities~~ in cities or surrounding areas,
or both, in this state which the state health council identifies as having a defined need for dental
services. ~~Subject to the availability of funding, the~~ The dentists selected from this pool of
applicants may include dentists who will provide dental services in a public health clinic, a
practice with a focus on an underserved population, or a nonprofit dental clinic. The dentists are
eligible to receive funds for the repayment of their education loans. The funds, which are
payable over a ~~four-year~~ five-year period, may not exceed ~~eighty~~ one hundred thousand dollars
per applicant. If the state health council accepts any gifts, grants, or donations under this
chapter, the council may select additional dentists for participation in the loan repayment
program under this chapter.

~~SECTION 2. AMENDMENT. Section 43-28.1-02 of the North Dakota Century Code is
amended and reenacted as follows:~~

~~43-28.1-02. Loan repayment program – Dentists – Powers of state health council.~~~~The state health council may:~~~~1. Determine the eligibility and qualifications of an applicant for loan repayment funds under this chapter.~~~~2. Identify communitiessites that are in need of a dentist and establish a priority ranking for participation in the program by the selected communitiessites.~~~~3. Create and distribute a loan repayment application.~~~~4. Determine the amount of the loan repayment funds for which a dentist is eligible under this chapter and, in making this determination, examine any outstanding education loans incurred by the applicant.~~~~5. Establish conditions regarding the use of the loan repayment funds.~~~~6. Enter a four-year nonrenewable contract with the dentist and the selected communitysite to provide to the dentist funds for the repayment of education loans in exchange for the dentist agreeing to practice in the selected community or in a public health clinic or nonprofit clinic.~~~~7. Receive and use funds appropriated for the program.~~~~8. Enforce any contract under the program.~~~~9. Cancel a contract for reasonable cause.~~~~10. Participate in federal programs that support the repayment of education loans incurred by dentists and agree to the conditions of the federal programs.~~~~11. Accept property from an entity.~~~~12. Cooperate with the state department of health to effectuate this chapter.~~

SECTION 2. AMENDMENT. Section 43-28.1-03 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-03. Dentist selection criteria – Eligibility for loan repaymentCriteria.

1. In establishing the criteria regarding a dentist's eligibility for loan repayment funds under this chapter, the state health council shall include consideration of:

~~a. The dentist's training in general dentistry or in a dental specialty and the extent to which such services are needed in a selected communitysite.~~~~b. The dentist's commitment to serve in a communitysite that is in need of a dentist.~~~~c. The compatibility of the dentist with a selected communitysite.~~

~~d. The date by which the dentist would be available for service to the selected community site.~~

~~e. The dentist's competence and professional conduct.~~

~~f. The dentist's willingness to accept medicare and medicaid patients.~~

~~2. A dentist who is selected to receive loan repayment funds under this chapter:~~

~~a. (1) May not have practiced dentistry full time in this state during the three years immediately preceding the application;~~

~~(2) Must have graduated from an accredited graduate specialty training program in dentistry during the year immediately preceding the application or within one year after the date of the application; or~~

~~(3) Must be enrolled in an accredited graduate specialty training program in dentistry; and~~

~~b. Must be licensed to practice dentistry in this state.~~

~~3. Dentists selected must be licensed to practice dentistry in this state and shall contract to provide full time dental services for a minimum of four years in one or more selected communities sites.~~

~~4.3. For the purposes of a dentist selected for loan payment who practices within fifteen miles [24.14 kilometers] of the city limits of Bismarck, Fargo, or Grand Forks, to qualify to receive a yearly disbursement under this chapter during that year of obligated service, the dentist must have:~~

~~a. Received dental medical payments of at least twenty thousand dollars in the form of medical assistance reimbursement; or~~

~~b. Practiced at least two full workdays per week at a public health clinic or at a nonprofit dental clinic that uses a sliding fee schedule to bill the nonprofit dental clinic's patients.~~
The health council shall establish criteria to be used in selecting qualified dentists and in identifying cities or surrounding areas, or both, that have a defined need for dental services. The criteria must include consideration of:

a. The number of dentists already providing dental services in the city or surrounding areas, or both;

b. Access to dental services in the city and the surrounding areas;

- 1 c. How the dentist will provide dental services in a public health clinic, a practice
2 with a focus on an underserved population, or a nonprofit dental clinic; and
3 d. The dentist's training in general dentistry or in a dental specialty and the extent to
4 which such services are needed in the identified city or surrounding areas, or
5 both.
6 2. The health council may consult with public and private sector entities in establishing
7 criteria and evaluating needs based on the criteria.

8 ~~— **SECTION 3. AMENDMENT.** Section 43-28.1-04 of the North Dakota Century Code is~~
9 ~~amended and reenacted as follows:~~

10 ~~— **43-28.1-04. Community selection criteria**Site.~~

11 ~~— 1. The state health council shall apply the following criteria in selecting a community~~
12 ~~site~~
13 ~~with a defined need for the services of a dentist:~~

14 ~~— a. The size of the community, with rural communities with a population under two~~
15 ~~thousand five hundred given highest priority, communities with a population~~
16 ~~between two thousand five hundred and ten thousand given the next highest~~
17 ~~priority, and communities with a population greater than ten thousand given the~~
18 ~~lowest priority. In cities with a population greater than ten thousand, first priority~~
19 ~~must be given to dentists who commit to satellite to underserved areas, then to~~
20 ~~dentists who practice at a public health clinic or nonprofit clinic, and then priority~~
21 ~~is given to dental specialists in cities with an identified need for a specialist.~~

22 ~~— b. The number of dentists practicing in the community and the surrounding area.~~

23 ~~— c. The access by residents to dentists practicing in the community and the~~
24 ~~surrounding area.~~

25 ~~— d. The mix of dental specialties in the community and surrounding area.~~

26 ~~— e. The degree to which residents support the addition of a dentist within the~~
27 ~~community.~~

28 ~~— 2. The state health council shall give priority for participation to a community~~
29 ~~site that~~
30 ~~demonstrates a need for a dentist or for an individual who is trained in a dental~~
31 ~~specialty or who is willing to serve in a public health clinic or nonprofit clinic.~~

32 ~~— 3. In evaluating communities for participation in this program, the state health council~~
33 ~~may consult with public and private entities and visit the communities.~~

SECTION 3. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-05. Eligible loans.

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or ~~eighty~~one hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

SECTION 4. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-09. Gifts, grants, and donations - Continuing appropriation.

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the ~~three~~ dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of ~~four~~five years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans.

SECTION 5. REPEAL. Sections 43-28.1-01.1, 43-28.1-02, 43-28.1-04, and 43-28.1-10 of the North Dakota Century Code are repealed.

SECTION 6. APPLICATION. Sections 43-28.1-01.1, 43-28.1-02, 43-28.1-04, and 43-28.1-10 continue to apply to any dentists who received a grant under those sections before the effective date of this Act.

*Attach #1
SB 2205
04/22/2015
26340*

Introduced by

Senator Bekkedahl

Representatives Hawken, Hofstad, Keiser, Meier

1 A BILL for an Act to amend and reenact sections 43-28.1-01, ~~43-28.1-02~~, 43-28.1-03, and
2 ~~43-28.1-04~~ 43-28.1-05, 43-28.1-08, and 43-28.1-09 of the North Dakota Century Code, relating
3 to the dentists' loan repayment program; to repeal sections 43-28.1-01.1, 43-28.1-02,
4 43-28.1-04, and 43-28.1-10 of the North Dakota Century Code, relating to the loan repayment
5 program for dentists in public health and nonprofit dental clinics and new practice grants for
6 dentists; and to provide for application.

7 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

8 **SECTION 1. AMENDMENT.** Section 43-28.1-01 of the North Dakota Century Code is
9 amended and reenacted as follows:

10 **43-28.1-01. Loan repayment program - Dentists - Defined need - Maximum amount of**
11 **funds.**

12 Each year the state health council shall select, from a pool of applicants ~~no more than~~
13 ~~three,~~ dentists who shall provide dental services ~~to communities~~ in cities or surrounding areas,
14 or both, in this state which the state health council identifies as having a defined need for dental
15 services. ~~Subject to the availability of funding, the~~ The dentists selected from this pool of
16 applicants may include dentists who will provide dental services in a public health clinic, a
17 practice with a focus on an underserved population, or a nonprofit dental clinic. The dentists are
18 eligible to receive funds for the repayment of their education loans. The funds, which are
19 payable over a ~~four-year~~ five-year period, may not exceed ~~eightyone hundred~~ thousand dollars
20 per applicant. If the state health council accepts any gifts, grants, or donations under this
21 chapter, the council may select additional dentists for participation in the loan repayment
22 program under this chapter.

23 ~~**SECTION 2. AMENDMENT.** Section 43-28.1-02 of the North Dakota Century Code is~~
24 ~~amended and reenacted as follows:~~

~~43-28.1-02. Loan repayment program – Dentists – Powers of state health council.~~

~~The state health council may:~~

~~1. Determine the eligibility and qualifications of an applicant for loan repayment funds under this chapter.~~

~~2. Identify communitiesites that are in need of a dentist and establish a priority ranking for participation in the program by the selected communitiesites.~~

~~3. Create and distribute a loan repayment application.~~

~~4. Determine the amount of the loan repayment funds for which a dentist is eligible under this chapter and, in making this determination, examine any outstanding education loans incurred by the applicant.~~

~~5. Establish conditions regarding the use of the loan repayment funds.~~

~~6. Enter a four-year nonrenewable contract with the dentist and the selected communitysite to provide to the dentist funds for the repayment of education loans in exchange for the dentist agreeing to practice in the selected community or in a public health clinic or nonprofit clinic.~~

~~7. Receive and use funds appropriated for the program.~~

~~8. Enforce any contract under the program.~~

~~9. Cancel a contract for reasonable cause.~~

~~10. Participate in federal programs that support the repayment of education loans incurred by dentists and agree to the conditions of the federal programs.~~

~~11. Accept property from an entity.~~

~~12. Cooperate with the state department of health to effectuate this chapter.~~

SECTION 2. AMENDMENT. Section 43-28.1-03 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-03. Dentist selection criteria – Eligibility for loan repaymentCriteria.

1. In establishing the criteria regarding a dentist's eligibility for loan repayment funds under this chapter, the state health council shall include consideration of:

a. The dentist's training in general dentistry or in a dental specialty and the extent to which such services are needed in a selected communitysite.

b. The dentist's commitment to serve in a communitysite that is in need of a dentist.

c. The compatibility of the dentist with a selected communitysite.

1 ~~_____ d. The date by which the dentist would be available for service to the selected~~
2 ~~community site.~~

3 ~~_____ e. The dentist's competence and professional conduct.~~

4 ~~_____ f. The dentist's willingness to accept medicare and medicaid patients.~~

5 ~~_____ 2. A dentist who is selected to receive loan repayment funds under this chapter:~~

6 a. (1) May not have practiced dentistry full time in this state during the three years
7 immediately preceding the application;

8 (2) Must have graduated from an accredited graduate specialty training
9 program in dentistry during the year immediately preceding the application
10 or within one year after the date of the application; or

11 (3) Must be enrolled in an accredited graduate specialty training program in
12 dentistry; and

13 b. Must be licensed to practice dentistry in this state.

14 3. ~~Dentists selected must be licensed to practice dentistry in this state and shall contract~~
15 ~~to provide full-time dental services for a minimum of four years in one or more selected~~
16 ~~communities sites.~~

17 4.3. ~~For the purposes of a dentist selected for loan payment who practices within fifteen~~
18 ~~miles [24.14 kilometers] of the city limits of Bismarck, Fargo, or Grand Forks, to qualify~~
19 ~~to receive a yearly disbursement under this chapter during that year of obligated~~
20 ~~service, the dentist must have:~~

21 ~~_____ a. Received dental medical payments of at least twenty thousand dollars in the form~~
22 ~~of medical assistance reimbursement; or~~

23 ~~_____ b. Practiced at least two full workdays per week at a public health clinic or at a~~
24 ~~nonprofit dental clinic that uses a sliding fee schedule to bill the nonprofit dental~~
25 ~~clinic's patients. The health council shall establish criteria to be used in selecting~~
26 ~~qualified dentists and in identifying cities or surrounding areas, or both, that have~~
27 ~~a defined need for dental services. The criteria must include consideration of:~~

28 ~~_____ a. The number of dentists already providing dental services in the city or~~
29 ~~surrounding areas, or both;~~

30 ~~_____ b. Access to dental services in the city and the surrounding areas;~~

1 c. How the dentist will provide dental services in a public health clinic, a practice
2 with a focus on an underserved population, or a nonprofit dental clinic; and

3 d. The dentist's training in general dentistry or in a dental specialty and the extent to
4 which such services are needed in the identified city or surrounding areas, or
5 both.

6 2. For purposes of a dentist selected for loan payment under this chapter who practices
7 within fifteen miles [24.14 kilometers] of the city limits of one of the three largest cities
8 in the state, to qualify to receive a yearly disbursement under this chapter during that
9 year of obligated service, the dentist must have:

10 a. Received dental medical payments of at least twenty thousand dollars in the form
11 of medical assistance reimbursement; or

12 b. Practiced at least two full workdays per week at a public health clinic or at a
13 nonprofit dental clinic that uses a sliding fee schedule to bill the nonprofit dental
14 clinic's patients.

15 3. The health council may consult with public and private sector entities in establishing
16 criteria and evaluating needs based on the criteria.

17 ~~SECTION 3. AMENDMENT. Section 43-28.1-04 of the North Dakota Century Code is~~
18 ~~amended and reenacted as follows:~~

19 ~~43-28.1-04. Community selection criteriaSite.~~

20 ~~1. The state health council shall apply the following criteria in selecting a communitysite~~
21 ~~with a defined need for the services of a dentist:~~

22 ~~a. The size of the community, with rural communities with a population under two~~
23 ~~thousand five hundred given highest priority, communities with a population~~
24 ~~between two thousand five hundred and ten thousand given the next highest~~
25 ~~priority, and communities with a population greater than ten thousand given the~~
26 ~~lowest priority. In cities with a population greater than ten thousand, first priority~~
27 ~~must be given to dentists who commit to satellite to underserved areas, then to~~
28 ~~dentists who practice at a public health clinic or nonprofit clinic, and then priority~~
29 ~~is given to dental specialists in cities with an identified need for a specialist.~~

30 ~~b. The number of dentists practicing in the community and the surrounding area.~~

~~c. The access by residents to dentists practicing in the community and the surrounding area.~~

~~d. The mix of dental specialties in the community and surrounding area.~~

~~e. The degree to which residents support the addition of a dentist within the community.~~

~~2. The state health council shall give priority for participation to a communitysite that demonstrates a need for a dentist or for an individual who is trained in a dental specialty or who is willing to serve in a public health clinic or nonprofit clinic.~~

~~3. In evaluating communities for participation in this program, the state health council may consult with public and private entities and visit the communities.~~

SECTION 3. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-05. Eligible loans.

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or ~~eighty~~one hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

SECTION 4. AMENDMENT. Section 43-28.1-08 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-08. Payment.

The state health council may not provide any loan repayment funds to a dentist under this chapter until the dentist has practiced at least six months on a full-time basis in the ~~selected community~~city or surrounding areas, or both, the state health council has identified as having a defined need for dental services. Loan repayment funds for a year of obligated service are payable by the state health council no later than the end of the fiscal year in which the dentist completes the year of obligated service.

SECTION 5. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

1 **43-28.1-09. Gifts, grants, and donations - Continuing appropriation.**

2 The state health council may accept any conditional or unconditional gift, grant, or donation
3 for the purpose of providing funds for the repayment of dentists' educational loans. If any entity
4 desires to provide funds to the council to allow an expansion of the program beyond the ~~three~~
5 dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a
6 period of ~~four~~five years. The council may contract with any public or private entity and may
7 expend any moneys available to the council to obtain matching funds for the purposes of this
8 chapter. All money received as gifts, grants, or donations under this section is appropriated as a
9 continuing appropriation to the state health council for the purpose of providing funds for the
10 repayment of additional dentists' educational loans.

11 **SECTION 6. REPEAL.** Sections 43-28.1-01.1, 43-28.1-02, 43-28.1-04, and 43-28.1-10 of
12 the North Dakota Century Code are repealed.

13 **SECTION 7. APPLICATION.** Sections 43-28.1-01.1, 43-28.1-02, 43-28.1-04, and
14 43-28.1-10 continue to apply to any dentists who received a grant under those sections before
15 the effective date of this Act.

PROPOSED AMENDMENTS TO SENATE BILL NO. 2205

That the House recede from its amendments as printed on pages 1316-1319 of the Senate Journal and pages 1470-1473 of the House Journal and that Senate Bill No. 2205 be amended as follows:

Page 1, line 1, remove ", 43-28.1-02"

Page 1, line 1, remove the second "and"

Page 1, line 2, replace "43-28.1-04" with "43-28.1-05, 43-28.1-08, and 43-28.1-09"

Page 1, line 3, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 1, line 9, after the second bold dash insert "**Defined need -**"

Page 1, line 11, replace "to communities" with "in cities or surrounding areas, or both,"

Page 1, line 11, after "state" insert "which the state health council identifies as having a defined need for dental services"

Page 1, line 11, remove "Subject to the"

Page 1, line 12, replace "availability of funding, the" with "The"

Page 1, line 13, after the first "clinic" insert ", a practice with a focus on an underserved population,"

Page 1, line 15, overstrike "four-year" and insert immediately thereafter "five-year"

Page 1, line 15, overstrike "eighty" and insert immediately thereafter "one hundred"

Page 1, remove lines 18 through 23

Page 2, remove lines 1 through 18

Page 2, line 21, overstrike "**Dentist selection - Eligibility for loan repayment**" and insert immediately thereafter "**Criteria**"

Page 2, line 22, overstrike "In establishing the criteria regarding a dentist's eligibility for loan repayment funds"

Page 2, overstrike lines 23 and 24

Page 2, line 25, overstrike "which such services are needed in a selected"

Page 2, line 25, remove "site."

Page 2, line 26, overstrike "b. The dentist's commitment to serve in a"

Page 2, line 26, remove "site"

Page 2, line 26, overstrike "that is in need of a dentist."

Page 2, line 27, overstrike "c. The compatibility of the dentist with a selected"

Page 2, line 27, remove "site"

Page 2, line 27, overstrike the period

Page 2, overstrike line 28

Page 2, line 29, remove "site"

Page 2, line 29, overstrike the period

Page 2, overstrike lines 30 and 31

Page 3, line 1, overstrike "2."

Page 3, line 10, overstrike "Dentists selected"

Page 3, line 10, remove "must be licensed to practice dentistry in this state and"

Page 3, line 10, overstrike "shall contract"

Page 3, overstrike line 11

Page 3, line 12, remove "sites"

Page 3, line 12, overstrike the period

Page 3, line 13, remove "3."

Page 3, line 13, overstrike "For the purposes of a dentist selected for loan payment who practices within fifteen"

Page 3, overstrike lines 14 through 21 and insert immediately thereafter "The health council shall establish criteria to be used in selecting qualified dentists and in identifying cities or surrounding areas, or both, that have a defined need for dental services. The criteria must include consideration of:

- a. The number of dentists already providing dental services in the city or surrounding areas, or both;
 - b. Access to dental services in the city and the surrounding area;
 - c. How the dentist will provide dental services in a public health clinic, a practice with a focus on an underserved population, or a nonprofit dental clinic; and
 - d. The dentist's training in general dentistry or in a dental specialty and the extent to which such services are needed in the identified city or surrounding areas, or both.
2. For purposes of a dentist selected for loan payment under this chapter who practices within fifteen miles [24.14 kilometers] of the city limits of one of the three largest cities in the state, to qualify to receive a yearly disbursement under this chapter during that year of obligated service, the dentist must have:
- a. Received dental medical payments of at least twenty thousand dollars in the form of medical assistance reimbursement; or
 - b. Practiced at least two full workdays per week at a public health clinic or at a nonprofit dental clinic that uses a sliding fee schedule to bill the nonprofit dental clinic's patients.

3. The health council may consult with public and private sector entities in establishing criteria and evaluating needs based on the criteria."

Page 3, remove lines 22-31

Page 4, replace lines 1 through 14 with:

"SECTION 3. AMENDMENT. Section 43-28.1-05 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-05. Eligible loans.

The state health council may provide for loan repayment funds to a dentist who has received an education loan. The council may not provide funds for the repayment of any loan that is in default at the time of the application. The amount of repayment must be related to the dentist's outstanding education loans. A dentist is eligible to receive loan repayment funds in an amount equal to the outstanding balance of the dentist's education loans with applicable interest, or eightyone hundred thousand dollars, whichever is less. Loan repayment funds may not be used to satisfy other service obligations under similar programs.

SECTION 4. AMENDMENT. Section 43-28.1-08 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-08. Payment.

The state health council may not provide any loan repayment funds to a dentist under this chapter until the dentist has practiced at least six months on a full-time basis in the selected community or surrounding areas, or both, the state health council has identified as having a defined need for dental services. Loan repayment funds for a year of obligated service are payable by the state health council no later than the end of the fiscal year in which the dentist completes the year of obligated service.

SECTION 5. AMENDMENT. Section 43-28.1-09 of the North Dakota Century Code is amended and reenacted as follows:

43-28.1-09. Gifts, grants, and donations - Continuing appropriation.

The state health council may accept any conditional or unconditional gift, grant, or donation for the purpose of providing funds for the repayment of dentists' educational loans. If any entity desires to provide funds to the council to allow an expansion of the program beyond the ~~three~~ dentists contemplated by this chapter, the entity shall commit to fund fully the expansion for a period of ~~four~~ five years. The council may contract with any public or private entity and may expend any moneys available to the council to obtain matching funds for the purposes of this chapter. All money received as gifts, grants, or donations under this section is appropriated as a continuing appropriation to the state health council for the purpose of providing funds for the repayment of additional dentists' educational loans."

Page 4, line 15, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Page 4, line 17, after "43-28.1-01.1" insert ", 43-28.1-02, 43-28.1-04,"

Renumber accordingly