

2009 SENATE HUMAN SERVICES

SB 2358

# 2009 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2358

Senate Human Services Committee

Check here for Conference Committee

Hearing Date: 1-28-09

Recorder Job Number: 8001 (Meter 01:40 – 02:25), 8002, 8047

Committee Clerk Signature

*Mary K Monson*

Minutes:

**Senator J. Lee** opened the hearing on SB 2358 relating to dental loan repayment program; and to provide an appropriation.

**Senator Dever** (Dist. 32) introduced SB 2358 is to provide loan forgiveness for dentists practicing in the nonprofit clinics. This is important to bring dentists into the program to stay in the state and reward them for offering services at reduced costs.

**Job #8042**

**Dave Zentner** (Community Health Care Centers in ND and the ND Oral Health Group) testified in favor of SB 2358 and read testimony **from Patricia Patron** (FHC). Attachment #1.

**Senator Dever** asked if the legislature has offered the loan repayment program in the past.

**Gary Garland** (Department of Health) explained that the case cited in the above testimony is an interesting case because they were able to match state funds with federal funds in that particular case. SB 2358 is the result of a very successful program. The current dental loan repayment program focuses on rural communities. Three new dentists are allowed into the program each year of the biennium. Ten to fifteen applicants have been received yearly over the last five years.

**Sharon Erickson** (VCHC) shared supportive testimony for SB 2358. Attachment #2.

**Marcia Olson** (Bridging the Dental Gap) testified in favor of SB 2358. Attachment #3.

**Joe Cichy** (ND Dental Association) testified that the ND Dental Association supports both SB 2356 and SB 2358. They both are one time funding bills. The cost of dental education has gone up considerably in the last several years and the dentists come out with big debts.

The Dental Association is working hard on the access issue. In the late nineties there was a problem with the manpower issues. They started a network to encourage residents to go to dental school and it has worked. Now there is a distribution problem. The loan repayment passed in early 2000 was significant in helping with getting them into the rural areas.

**Senator J. Lee** asked how many have been coming into the rural areas.

**Mr. Cichy** said there have been 20-25 new dentists come into the state the last couple of years. Some have gone to Fargo, Bismarck, Grand Forks and Minot. Some have also been placed, through the program, in Wishek, Mott, Rugby, and others. They would not have gone there if it wasn't for the loan repayment.

There was no opposing or neutral testimony.

The hearing on SB 2358 was closed.

**Job #8047 (Meter 03:00)**

**Senator Pomeroy** moved a **Do Pass and Rerefer to Appropriations**.

Seconded by **Senator Marcellais**.

**Roll call vote 6-0-0. Motion passed.**

Carrier is **Senator Dever**.

Date: 1-28-09

Roll Call Vote #: \_\_\_\_\_

**2009 SENATE STANDING COMMITTEE ROLL CALL VOTES**

**BILL/RESOLUTION NO. SB 2358**

Senate Human Services Committee

Check here for Conference Committee

Legislative Council Amendment Number \_\_\_\_\_

Action Taken  Do Pass  Do Not Pass  Amended  Rerefer to Appropriations  
 Adopt Amendment  Reconsider

Motion Made By Sen. Pomeroy Seconded By Sen. Marcellais

Senators	Yes	No	Senators	Yes	No
Senator Judy Lee, Chairman	✓		Senator Joan Heckaman	✓	
Senator Robert Erbele, V.Chair	✓		Senator Richard Marcellais	✓	
Senator Dick Dever	✓		Senator Jim Pomeroy	✓	

Total (Yes) 6 No 0

Absent 0

Floor Assignment Senator Dever

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

**REPORT OF STANDING COMMITTEE**

**SB 2358: Human Services Committee (Sen. J. Lee, Chairman) recommends DO PASS and BE REREFERRED to the Appropriations Committee (6 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2358 was rereferred to the Appropriations Committee.**

2009 SENATE APPROPRIATIONS

SB 2358

## 2009 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2358

Senate Appropriations Committee

Check here for Conference Committee

Hearing Date: 02-04-09

Recorder Job Number: 8595

Committee Clerk Signature

Minutes:

**V. Chair Bowman** Called the committee hearing to order on SB 2358 in regards to a dental loan repayment program.

**Senator Dever District #32.** Testified in favor of SB 2358.

**Dave Zentner, Representing five community health care organizations in North Dakota**

read written testimony on behalf of **Patricia Patron Executive Director of Family HealthCare Center (FHC) in Fargo.** See attachment #1.

**Senator Fischer** Do you have dentists in private practice that volunteer?

**Dave Zentner** We use primarily full time paid dentists. We have to rely on paid dentists, I don't see that changing.

**Senator Seymour** Could you name some specific people this bill would benefit if passed?

**Dave Zentner** What we are looking for is dollars that will 1) keep the dentists we have and 2) attract new dentists to the work here. With a loan burden between of the dollar amount we have, to come into a practice that cannot pay them enough, there has to be other incentive to keep them. We are dealing with young dentists coming out of school and we have to figure out how to have them remain in practices for a period of time. A loan repayment is certainly an incentive to do that.

**V. Chair Grindberg** I am struggling with the overall concept of this. I know you are representing Patricia so I will have to take it up with her but in my recollection that the dentist community contributes their time to donate services to these clinics. Some of my concern goes beyond just the loan forgiveness program, if we put this in place to get services in rural areas: to my knowledge, that group of dentists that has been volunteering their services seems to have been working. So this proposal is working to incentivize the dentists when it is my understanding that dentists are already doing this as part of their call. The dental association is not certifying enough dentists. It just seems like this is going to keep expanding to include more exemptions, does it really make a difference?

**Dave Zentner** I was a Medicaid director for 12 years, and in that program when I started the process 30 years ago we did have adequate dental coverage. As time went on, the access wasn't there, it changed over time. People would call saying they couldn't get into a dentist. That is when we started looking into the concept, at least in Bismarck, because there is no access. The bottom line is if we can't attract dentists, when we are serving those individuals who would not otherwise get services, we are dead in the water. We are paying them less than they can receive in private practice. We need the money, it is necessary. He gave examples of clinics in Fargo that help but do not solve the problem of dental care.

**V. Chair Grindberg** Wouldn't it make better sense to determine a fair rate that would incentivize dentists to be involved and compensated fairly vs. a few that would get student loan support. It seems backwards.

**Dave Zentner** It may seem backwards but I am looking at reality. Even if you increase fees, which would help, it isn't going to solve the problem of the uninsured. And it isn't going to solve the problem for thousands of kids that are Medicaid eligible who won't get in to see the dentist.

These clinics are essential to providing that service.



**Senator Lindaas** I see there is a chart here, in visiting with dentist back home, his biggest frustration was the fact that some of the folks don't make appointments. Why is it that way?

**Dave Zentner** No shows are a problem. We have it in all clinics, we deal with it the best we can. We are dealing with a population base that often misses its appointments. It is an issue. Our no show rate runs 20-30 %, we know that will happen. It is a problem but we are committed to serving that population.

**Sharon Ericson Chief Executive Officer of the Valley Community Health Centers.**

Testified in favor of SB 2358. See attachment # 2. She elaborated on the differences between the pay for dentists and the pay for doctors in this type of program. Also discussed how clinics are structured physically and programmatically.

**V. Chair Bowman** When you started these dental offices, somebody must have looked at how we can pay for these and keep it going. My experience is that once people get some money from the state, it takes the motivation from going out and doing what you have been doing to get money elsewhere, it's easier to get it from the state. I kind of fear this is a beginning of not a one time, but a continuation. When you have your discussions, did you figure out what you will do once you get this money that you could make it for 10 or 15 years before you come back and ask again?

**Sharon Ericson** We did a very detailed business plan before starting this. In my packet you will see a letter from my board of directors. As a non-profit we have a board of directors. In our model of care they need to be involved in all financial decisions, this was not a snap decision. We do not have competitive salaries with private practices, but the federal government changed that in the past two years. When we started thinking about this, the state loan repayment fund was not being used particularly well so it did not seem like it would be a

problem. We see this as the State of ND investing in good health care. I think there is some argument that good health care is a lifelong investment for advancing our state.

**V. Chair Bowman** I agree with what you said except, I think health care should be for every citizen not within a geographical location even if you have an outreach within a hundred miles. My district is 10,000 square miles and has just a few more people than what you reach with 3500 people. It is a different scenario from where I come from, than what you are doing. I commend you what you are doing but this is something if we have to decide if we should fund or not.

**Marsha Olson** Bridging the Dental Gap. Testified in favor of SB 2358. See attachment #3.

**Chairman Holmberg** I was a high school counselor with similar demographics and we had the same problems—this is not just a problem for dentists.

**Marsha Olson** I did take a class on poverty and I can tell you that every day in our clinic we see people whose first needs are where am sleeping tonight, and what will I eat. It is not the dental clinic that is their first priority. It is amazing how transient this population is, there are a lot of reasons why this population misses appointments. I urge you to support this bill.

**Chairman Holmberg** this bill will go to the health subcommittee. He closed the hearing on SB 2358.

2358

Bridge the dental gap

Whatever the subcommittee would like. This is not a function of state government.

**Senator Fischer** can't support either bill SB 2356 and 2358.

**Senator Mathern** what if we amend this.

**Senator Fischer** said he understood the need.

**Senator Kilzer** I much prefer the dental loan payback then getting into the equipment business. I think we should put a do not pass. **Senator Kilzer** yes, **Senator Fischer** yes,

**Senator Mathern** no. The committee recommends a DO NOT PASS ON SB 2356.

2358

Was this in the governor's budget and not in optional package?

**Arvy** said it was not.

**Senator Mathern:** Gives money to students of dentistry for 3 years and if they practice for three years their loan payment is taken care of.

**Senator Fischer** recommends do pass and all three agree on a Do Pass for 2358.

2412 the bill on Fetal Alcohol Syndrome was heard today in committee.

**Senator Fischer** we asked for legislative council to get information for us.

**Senator Kilzer** I think we should see the results of the history of it.

Maybe we can have a quick meeting after we get those emails.

**Senator Kilzer** any other things we should know about.

**Senator Fischer** SB 2063 passed on the floor today. That never came here. It was rereferred to appropriations today.

## 2009 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2358

Senate Appropriations Committee

Check here for Conference Committee

Hearing Date: February 12, 2009

Recorder Job Number: **9367 (starting at 21:50)**

Committee Clerk Signature

*Rose Loring*

Minutes:

**Chairman Holmberg** re-opened the hearing on SB 2358.

**Senator Kilzer** stated that this is an appropriation for \$180,000 to lure dentists to assist in this type of work. The subcommittee approved this bill and recommended a Do Pass.

**Senator Kilzer** moved Do Pass on SB 2358.

**Senator Fischer** seconded.

Discussion followed.

A Roll Call vote was taken. Yea: 14 Nay: 0 Absent: 0

**Senator Mathern** will carry the bill on the floor.

Date: 2-12-09  
Roll Call Vote #: 1

2009 SENATE STANDING COMMITTEE ROLL CALL VOTES  
BILL/RESOLUTION NO. 2358

Senate \_\_\_\_\_ Committee

Check here for Conference Committee

Legislative Council Amendment Number \_\_\_\_\_

Action Taken  Do Pass  Do Not Pass  Amended

Motion Made By Kilzer Seconded By Sen. Fischer

Representatives	Yes	No	Representatives	Yes	No
Senator Krebsbach	✓		Senator Seymour	✓	
Senator Fischer	✓		Senator Lindaas	✓	
Senator Wardner	✓		Senator Robinson	✓	
Senator Kilzer	✓		Senator Warner	✓	
V. Chair Bowman	✓		Senator Krauter	✓	
Senator Christmann	✓		Senator Mathern	✓	
V. Chair Grindberg	✓				
Chairman Holmberg	✓				

Total Yes 14 No 0

Absent 0

Floor Assignment Sen Mathern

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

**REPORT OF STANDING COMMITTEE (410)**  
February 12, 2009 11:44 a.m.

**Module No: SR-28-2503**  
**Carrier: Mathern**  
**Insert LC: . Title: .**

**REPORT OF STANDING COMMITTEE**

**SB 2358: Appropriations Committee (Sen. Holmberg, Chairman) recommends DO PASS**  
(14 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). SB 2358 was placed on the  
Eleventh order on the calendar.

2009 HOUSE HUMAN SERVICES

SB 2358

## 2009 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. 2358

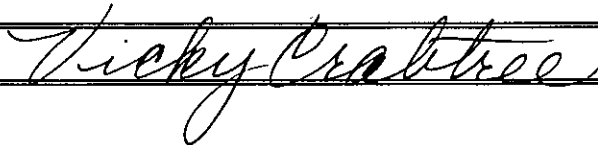
House Human Services Committee

Check here for Conference Committee

Hearing Date: March 10, 2009

Recorder Job Number: 10558

Committee Clerk Signature



Minutes:

**Chairman Weisz opened the hearing on SB 2358.**

**Sen. Dick Dever, district 32, sponsored and introduced the bill:** 2358 is about the dental loan repayment program which is for the benefit of dentists who run a non-profit dental clinic which charges its fees on a sliding scale. This bill asks for a \$180,000 that would pay back their education costs up to \$60,000 per person. There are three non-profit dental clinics in ND. One in Fargo, Grand Forks and Bismarck. I think this bill is important. There was a companion bill that was also introduced SB 2356 which provided for funding for equipment for those facilities. That was approved by the Senate Human Services Committee and then rejected by the Senate Appropriations Committee. They thought it was a good idea, but it was a matter of prioritizing financing. I would ask you take a look at that bill also and consider whether or not it is worthy to amend back into this bill. The equipment purchased by those clinics are usually used and then used some more. It was \$450,000, but any amount that you could amend to provide for equipment would be most appreciated.

**Chairman Weisz:** This is in addition to what we are already doing in the dental program. We are adding a additional \$180,000 correct?

**Sent. Dever:** That is correct. It is in rural clinics, but not for non-profit clinics.



**Rep. Frantsvog:** Do these clinics only accept patients in the area they serve?

**Sen. Dever:** Anyone can go.

**Rep. Porter:** On the first half of the session we passed a bill that would help purchase a mobile unit. If a dentist volunteers to work for the mobile unit full time, would that cover them in their loan repayment?

**Sen. Dever:** We have not heard that bill yet, so I'm not sure exactly what that does. I would suspect this would cover that.

**Rep. Conrad:** They don't work full time do they?

**Sen. Dever:** I think there is a reference to that, but (inaudible).

**Karen Larson from C.H.A.D.:** read two testimonies;

**Patricia Patron, Executive Director of Family Healthcare Center in Fargo. See**

**Testimony #1.**

**Sharon Ericson, Chief Executive Officer of Valley Community Health Centers of Northwood, Larimore and Grand Forks. See Testimony #2.**

**Rep. Uglem:** How many dentists do they employ and how many could possibly qualify for the loan repayment?

**Karen Larson:** Four full time dentists in Fargo and Grand Forks. One person qualifies for a loan repayment.

**Rep. Uglem:** There are no dentists in Bismarck?

**Karen Larson:** Marsha will speak of that. She is here to testify on behalf of that particular clinic.

**Rep. Frantsvog:** You read in your testimony about loan repayment program in the state the dentists use. What is that loan repayment program?

**Karen Larson:** I am not familiar with the amount of that. (Someone else answers from audience). Three a year and \$30,000 over four years and it is maxed out right now.

**Marcia Olson, Executive Director of Non-profit Corp. and Clinic Manager of Bridging the Dental Gap: See Testimony #3.**

**John Corhy from the ND Dental Association:** Voiced support of the bill. This is a one time funding bill and maybe next session it will come back and ask for it again.

**Chairman Weisz:** It seems unclear in the language (inaudible) appropriations that it wouldn't necessarily come under the original program. The bill says it received a grant for \$60,000 (inaudible) appropriated to \$180,000.

**John Corhy:** Thought at the end it did.

**Chairman Weisz:** Am I missing a page. I'm unclear to where that (drops sentence).

(Everyone talking at once.)

**Chairman Weisz closed the hearing on SB 2358.**

**Handed in Testimony.**

**William Savage, DDS, Dental Director – See Testimony #4**

**Jamie Steidl, DDS – See Testimony #5**

**Drs. Grant Korsmo and Robert Remmick, Valley Community Health Centers – Dental Clinic – See Testimony #6**

**Jane Lukens, President of Valley Community Health Centers of Northwood – See Testimony #7.**

## 2009 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. 2358

House Human Services Committee

Check here for Conference Committee

Hearing Date: March 16, 2009

Recorder Job Number: 11039

Committee Clerk Signature

*Vicky Cratree*

Minutes:

**Chairman Weisz:** 2358 committee, that's the loan repayment program for dentists. It is an expansion of what we are already doing. An appropriation of \$180,000.

**Rep. Uglem:** They have asked for two things amended into this bill, equipment (inaudible) in the Senate before. So, I think it is only reasonable to give them part of what they are asking for. They have tough positions to fill.

**Rep. Uglem: Motion Do Pass and re-refer to appropriations.**

**Rep. Kilichowski: Second.**

**Roll Call Vote: 12 yes, 0 no, 1 absent, Rep. Porter.**

**MOTION CARRIED DO PASS.**

**BILL CARRIER: Rep. Hofstad.**

Date: 3-16-09

Roll Call Vote #:

2009 HOUSE STANDING COMMITTEE ROLL CALL VOTES  
BILL/RESOLUTION NO. 2358

House HUMAN SERVICES Committee

Check here for Conference Committee

Legislative Council Amendment Number \_\_\_\_\_

Action Taken  Do Pass  Do Not Pass  Amended

Motion Made By Rep Uglem Seconded By Kilichowski

Representatives	Yes	No	Representatives	Yes	No
CHAIRMAN ROBIN WEISZ	✓		REP. TOM CONKLIN	✓	
VICE-CHAIR VONNIE PIETSCH	✓		REP. KARI L CONRAD	✓	
REP. CHUCK DAMSCHEN	✓		REP. RICHARD HOLMAN	✓	
REP. ROBERT FRANTZVOG	✓		REP. ROBERT KILICHOWSKI	✓	
REP. CURT HOFSTAD	✓		REP. LOUISE POTTER	✓	
REP. MICHAEL R. NATHE	✓				
REP. TODD PORTER	✓				
REP. GERRY UGLEM	✓				

Total (Yes) 12 No 0

Absent 1 PORTER

Bill Carrier Rep. Hofstad

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

*Referred to Approp*

**REPORT OF STANDING COMMITTEE**

**SB 2358: Human Services Committee (Rep. Welsz, Chairman) recommends DO PASS and BE REREFERRED to the Appropriations Committee (12 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). SB 2358 was rereferred to the Appropriations Committee.**

2009 HOUSE APPROPRIATIONS

SB 2358

# 2009 HOUSE STANDING COMMITTEE MINUTES

Bill/Resolution No. SB 2358

House Appropriations Committee

Check here for Conference Committee

Hearing Date: March 19, 2009

Recorder Job Number: 11294

Committee Clerk Signature

*Ellen Letang*

Minutes:

**Chm. Svedjan:** This is the dental loan repayment program.

**Rep. Weisz:** This is offered for dentists in public health facilities, loan repayment for those who go to rural areas. We have a real problem with dental care for underserved and Medicaid dental patients. We have only three public health facilities in the state that take Medicaid, underserved and underinsured. This bill will allow a loan repayment program for those dentists who choose to work in these facilities for a minimum of three years. Its \$180,000 and you committee looked at this. In Grand Forks, 14,000 and Fargo, 7,000 are served each year. The original intent was that they would find dentists that would volunteer but because of the number of people they are dealing with, scheduling was an issue. They are asking us to help these dentists with a loan repayment.

**Chm. Svedjan:** This would be up to \$30,000?

**Rep. Weisz:** \$60,000, three per dentists.

**Rep. Nelson:** In the other dental program, wasn't there a provision that if they treat a percentage of Medicaid population they would qualify for that bill and program as well?

**Rep. Weisz:** Yes, that is correct except that the preference is to go to the rural. There isn't any available in the program.

**Rep Nelson:** Are all the slots taken?

**Rep Weisz:** That is correct.

**Rep Klein:** Moves a Do Pass.

**Rep Kerzman:** Second.

**Chm. Svedjan:** Further discussion?

**Rep. Nelson:** How many more dentists applied for the slots than we had space for?

**Rep. Weisz:** I'm not 100% sure but I thought the number 8 or 10 applications for the three slots.

**Rep. Nelson:** Would another option have been that we add more funding to the current program and give preference for a slot or two or three for that so if we get more applicants it would be more inclusive granting loan repayments to a bigger pool?

**Rep. Weisz:** I guess you could do that. One of the things that you will notice is the current program is funded out of the Community Health Trust Fund and this is strictly General Fund.

**Rep. Delzer:** It says "shall serve three years as a practicing dentist". It doesn't say what happens if they don't?

**Rep. Weisz:** They are paid over that course of time so if they leave they won't get their grant funds.

**Rep. Delzer:** It says they get the grant funds during the first two years.

**Rep. Weisz:** They would have to pay the funds back at a pro-rated share

**Rep. Delzer:** How did you come up with the \$60,000.

**Rep. Weisz:** That's the way the bill came from us, they felt that was roughly half the debt they incur.

**Rep. Berg:** Where are the programs now that qualify as the three?

**Rep Weisz:** Bridging the Gap (Fargo), Valley Community Health (Northeast part of the state) and I'm drawing a blank on the third one.



**Rep. Berg:** I'm guessing by looking at the sponsors that it's in Bismarck somewhere.

**Rep. Weisz:** I don't believe it is.

**Rep Berg:** Do these have people employed now?

**Rep Weisz:** That correct. They struggle to get dentists.

**Rep. Berg:** Why can't they pay them the rate?

**Rep. Weisz:** They are depending on foundations and private donations and they struggle to make ends meet. They are serving more clients than they anticipated.

**Rep. Berg:** They can pay whatever they want to pay.

**Rep. Weisz:** They do depend on Medicaid reimbursements for those who qualify. They also serve the uninsured and underserved in their areas. They still get volunteers, but because of the huge volume, they need full time staff.

**Rep. Berg:** Why wouldn't we want a dentist with 10 to 15 years experience?

**Rep. Weisz:** We would love to have dentists like that, but typically they have their own practice at that point. This helps pay off their debt.

**Rep. Berg:** Do we have a program for anyone else who is providing medical services to the poor and uninsured?

**Rep. Weisz:** Yes, we have programs for all those areas but the difference is the doctor can't refuse a Medicaid patient. We can't get enough dentists who are willing to serve that population.

**Rep. Delzer:** Are these walk-in or appointment clinics?

**Rep. Weisz:** They are walk-in and appointment clinics. They are not limited, someone from Dickinson can go to Fargo as well to get services.

**Rep. Delzer:** What I've heard is that it's not so much the money, it the fact that they make the appointment and don't show up.

**Rep. Weisz:** That is correct. They have a huge degree of no-shows. That is often the reason that the dentists don't want to take these patients.

**Rep. Delzer:** That same problem exists in medical care also.

**Rep. Wald:** You said "no more than 3 and up to \$60,000", how many dentists would be available if we changed 3 to 6 and 60 to 30?

**Rep. Weisz:** I can't answer that but I think that looking at three units out here. For example they could each get one. they would be happy campers. It's not necessarily a volume thing. They didn't bring that up to us, so I don't have an answer for you.

**Rep. Pollert:** In our section at DHS, we have struggled with the rebasing every biennium. Every time they ask and get more for rebasing, they say they are going to serve more people. So we ask them, how many more do you serve? We can never give us a definite answer. That's my frustration with this whole thing, now we don't know; now we are going to grant. That is why I'm going to vote no on the bill.

**Rep. Skarphol:** You said you could walk into any clinic, what about Fergus Falls?

**Rep. Weisz:** I believe the northeast sector have served individuals from the Minnesota side. The vast bulk is from North Dakota. I agree with Rep. Pollert. We have an ongoing issue, they come to us constantly and the problem hasn't gone away. This is separate, it isn't the dental community per say. These are non-profit entities that were formed to address the problem we have. I don't think the dentists have stepped up to the plate to treat the underserved community. These non-profit dentists have stepped up and are working for less than they can make in the private sector. Now they have taken that hit to help serve that population. Maybe we should address this issue since we haven't been able to fix the problem in the legislature.

**Chm. Svedjan:** Further discussion?

**Roll call was taken on SB 2358 for a Do Pass with 11 ayes, 12 nays, 2 absent. Motion fails.**

**Rep Pollert: Motions a Do Not Pass.**

**Rep Kempenich: Second.**

**Roll call was taken on SB 2358 for a Do Not Pass with 12 ayes, 11 nays, 2 absent and**

**Rep Pollert is the carrier.**

Date: 3/19/09  
 Roll Call Vote #: 1

2009 HOUSE STANDING COMMITTEE ROLL CALL VOTES  
 BILL/RESOLUTION NO. 2358

Full House Appropriations Committee

Conference Committee

Legislative Council amendment Number \_\_\_\_\_

*Amended*

Action Taken:  Do Pass  Do Not Pass  As Amended

Motion Made By: Klein Seconded By: Kerzman

Representatives	Yes	No	Representatives	Yes	No
Chairman Svedjan		✓			
① Vice Chairman Kempenich		✓			
Rep. Skarphol		✓	Rep. Kroeber	✓	
Rep. Wald		✓	Rep. Onstad	✓	
Rep. Hawken	✓		Rep. Williams	✓	
Rep. Klein	✓				
Rep. Martinson		✓			
Rep. Delzer		✓	Rep. Glassheim	✓	
Rep. Thoreson		✓	Rep. Kaldor	✓	
Rep. Berg		✓	Rep. Meyer	✓	
Rep. Dosch	✓				
Rep. Pollert		✓	Rep. Ekstrom	✓	
Rep. Bellew		✓	Rep. Kerzman	✓	
Rep. Kreidt		✓	Rep. Metcalf	<del>✓</del>	
Rep. Nelson		✓			
Rep. Wieland		✓			

Total Yes 11 No 12

Absent 2

Floor Assignment: \_\_\_\_\_

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

Date: 3/19/09  
 Roll Call Vote #: 2

2009 HOUSE STANDING COMMITTEE ROLL CALL VOTES  
 BILL/RESOLUTION NO. 2358

**Full House Appropriations Committee**

Conference Committee

Legislative Council amendment Number \_\_\_\_\_

Action Taken:  Do Pass  Do Not Pass  As Amended

Motion Made By: Pollert Seconded By: Kempenich

Representatives	Yes	No	Representatives	Yes	No
Chairman Svedjan	✓				
Vice Chairman Kempenich	✓				
Rep. Skarphol	✓		Rep. Kroeber		✓
Rep. Wald	✓		Rep. Onstad		✓
Rep. Hawken		✓	Rep. Williams		✓
Rep. Klein		✓			
Rep. Martinson	✓				
Rep. Delzer	✓		Rep. Glassheim		✓
Rep. Thoreson	✓		Rep. Kaldor		✓
Rep. Berg	✓		Rep. Meyer		✓
Rep. Dosch		✓			
Rep. Pollert	✓		Rep. Ekstrom		✓
Rep. Bellew			Rep. Kerzman		✓
Rep. Kreidt	✓		Rep. Metcalf		
Rep. Nelson	✓				
Rep. Wieland	✓				

Total Yes 17 No 11

Absent 2

Floor Assignment: Rep. Pollert

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

**REPORT OF STANDING COMMITTEE (410)**  
March 19, 2009 4:07 p.m.

**Module No: HR-50-5425**  
**Carrier: Pollert**  
**Insert LC: . Title: .**

**REPORT OF STANDING COMMITTEE**

**SB 2358: Appropriations Committee (Rep. Svedjan, Chairman) recommends DO NOT PASS (12 YEAS, 11 NAYS, 2 ABSENT AND NOT VOTING). SB 2358 was placed on the Fourteenth order on the calendar.**

2009 TESTIMONY

SB 2358

# 1

**SB 2358**

**Senate Human Services Committee**

**Senator Judy Lee, Chair**

**January 28, 2009**

*Same to Senate Copy 9/5*

**Testimony**

**Madame Chair and Members of the Human Services Committee, my name is Patricia Patron, Executive Director of Family HealthCare Center (FHC) in Fargo.**

**Family HealthCare Center supports SB 2358, which provides for loan repayment for the dentists who practice in non-profit and public health dental clinics serving the most vulnerable populations in the state, including the uninsured and those living under poverty in North Dakota. The current loan repayment program in the state gives preference to dentists who choose to practice in rural North Dakota. FHC supports the current program because it greatly improves the ability to secure dental access for populations living in rural North Dakota. Even though FHC is located in an urban area, on daily basis, FHC serves patients that travel long distances to access dental services at our facility. It is not unusual for patients to travel more than 100 miles for dental appointments. However, FHC supports the additional funding for public health and non-profit dental clinic loan repayment for these reasons.**

**FHC provided services to 12,428 patients in 2008. Nearly 90% of those patients live under 200% of poverty. Forty-four percent or 5,400 patients do not have access to health and/or dental insurance and 4,900 are on Medicaid. FHC is one of the very few dental providers in our service area that accepts patients on medical assistance and uninsured patients. Access to dental check-ups can detect early signs of oral health problems and can lead to treatments that will prevent further damage and in some cases reverse the problem.**

**In 2008, FHC provided over 15,000 dental visits to 5,000 unduplicated patients. Most of the patients we serve have delayed accessing services for three to five**



years. Many report that the lack of dental insurance access impedes their access to prompt dental services. Our services are open to all regardless of ability to pay and of place of residency. On daily basis, over 20% of our scheduled appointments are filled with patients and their families traveling from places as far as Minot and from many other communities in the state.

Our dental program has been in operation for over 13 years. Throughout the years, we have partnered up with other service providers to provide access to vulnerable populations in the state such as young children, refugees, and the elderly in our community. The need of services in our community is growing everyday. It is critical for people to be able to access oral health to improve their general wellbeing and self-esteem.

FHC has struggled in the past tremendously to recruit dentists to serve our patient population. Three years ago, we were very fortunate to be able to attract a young North Dakota dentist fresh out of dental school. Dr. Steidl accepted the position at FHC because he was intrigued by the mission of the organization. He took a salary offer below the market salary at that time. Dr. Steidl has benefited from loan repayment which has relieved some the substantial debt from his school loans. Today, Dr. Steidl serves only uninsured, homeless, low income, and Medicaid insured patients at FHC.

Our ability to provide dental access in our community and to keep our doors open to patients traveling long distances to access dental care depends on our ability to recruit and retain dentists. It is our hope that in the future we can keep attracting dentists to our practice by being able to participate in the North Dakota loan repayment program. The benefit comes back to our patients by being able to offer the access they deserve to live healthy lives.

Funds provided by SB 2358 will assist our efforts to provide oral health care access. I urge you to recommend a Do Pass for SB 2358 to support and assure access and continuity of care for our patients.

Thank you for allowing me to bring this testimony before you.

Dear Senator Lee and Members of the Human Services Committee:

I am writing on behalf of Family Health Care Dental Clinic in Fargo, North Dakota. My name is Jamie Steidl and I have worked here since June of 2005. I am hoping that I can help you to see the importance of a couple of bills that will be heard in the legislature soon.

The first of the two is Bill SB 2356 which allocates a one-time grant to the three Community Dental Clinics in North Dakota. The three eligible clinics are Family Health Care in Fargo, Bridging the Dental Gap in Bismarck, and Valley Community Health Centers in Grand Forks. This one time grant would be \$150,000 per clinic. This is very important especially in our clinic in Fargo. Most of our equipment is very old, and we also have a limited supply of it. For example we have four high speed hand pieces for operating on teeth. We cannot afford to purchase new ones so we continue to work with old ones. Every month we have to send one or more in to repair it. This ends up costing about five hundred dollars per time and also leaves us short of equipment. This is the way it is with everything we have, if anything breaks it puts us short on already overused equipment. Also many people may be put off from coming here for care due to the appearance of our clinic. It looks very old and outdated.

The second of the two bills in which I would like your support is Bill SB 2358. This is a bill that designates state loan repayment to dentists working in one of these three clinics. I was a recipient of this loan repayment, and although I really enjoy working on the underserved, I don't know if I would have taken this job without loan repayment. Most private offices can offer so much more money that it is hard to say no. We see so many Medicaid patients and people who are uninsured. I would guess that the three health clinics in North Dakota see a great majority of these patients.

It is also very hard for community clinics to recruit new dentists. Most of the people who want to work here are new graduates who are just getting some income while they set up a private office, or older dentists who are interested in working a few days a week. What we need is motivated dentists who want to work here for many years. In order to find dentists like this we must have added incentive. We cannot even come close to the salary that dentists can achieve in the private sector.

I urge you and your fellow senators and representatives to consider these bills and hopefully you can understand how important they are in bringing quality care to the underserved populations.

Jamie Steidl DDS

January 26, 2009

*same to Senate Appropriations House Veterans Williams*

Dear Senator Lee and Members of the Human Services Committee,

Please accept this letter as a highly positive recommendation for Senate Bills No. 2356 and No. 2358. I am currently the Dental Director for Family HealthCare Center in Fargo. In my 35 years of dental experience in the Dakotas, I have only seen the need for dental health care in the underserved populations continue to increase and not decrease as one would expect. My 27 years of experience as a USPHS Commissioned Officer and private contractor with the Indian Health Service and then two years with the US Department of Veterans Affairs and now with Family HealthCare Center have only seen the dental needs become far higher now than even when I worked at my first clinic experience on the Standing Rock Indian Reservation. One would expect that dental healthcare within the United States to be at the highest possible level. Unfortunately, this is not so for the underserved populations in the region. Access to care is quite limited.

The community clinics in North Dakota have continued to expand by first having the Family HealthCare Center Dental Clinic available since 1995 and now having the Bismarck Bridging the Dental Gap Clinic and the Grand Forks Valley Community Health Center Dental Clinic. The need for dental care is seen to still be so high that these three clinics can not meet the need without continuity of care through provider retention and expansion of the clinics in size and manpower. Each clinic is continually met with an ever growing need. Family HealthCare Center Dental Clinic in Fargo is a small 2 ½ operatory one dentist clinic looking within the year to expand to a 7 operatory two dentist facility. The clinic is so small that it often can only treat urgent needs and not have the space or staff to allow for follow-up preventive or rehabilitative care to new seekers of dental care. Family HealthCare Center is currently in search of funding for its anticipated expansion and hopeful offer of loan repayment for an additional dentist provider.

As a result, I ask for a favorable decision on both Senate Bills No. 2356 and No. 2358 so that the above mentioned community dental clinics can strive to meet the ever increasing dental care needs of North Dakota. If you have any further questions, feel free to contact me at 701-367-7619.

Sincerely,

William Savage, DDS  
CAPT USPHS (Ret.)  
Dental Director

**SB 2358**

**Senate Human Services Committee**

**Senator Judy Lee, Chair**

**January 28, 2009**

**Testimony**

**Madame Chair and Members of the Human Services Committee, my name is Sharon Ericson, Chief Executive Officer of the Valley Community Health Centers (VCHC) with sites in Northwood, Larimore, and Grand Forks.**

**Valley Community Health Centers supports SB 2358, which provides for Loan repayment for the dentists who practice in the three public health dental clinics in North Dakota. At the present time, there is a loan repayment fund which provides support for dentists who choose to practice in rural North Dakota. Valley Community Health Centers believes that the support for rural practice is very important; after all, both Northwood and Larimore are rural communities and we serve a population over 3600 square miles in the Northern Red River Valley. However, we support the additional pool of funds for public health dental clinic loan repayment for these reasons.**

**We provide access to nearly 7500 people with Medicaid in two counties. Most of the people we have served in our first 13 months of operation have not had dental care in the past five years. The dentist who practiced in Larimore recently passed away, leaving more people in our area without access to care. Valley Community Health Centers served 1,842 people; fifty-one percent under age 16. We provided 4,840 encounters or visits. Seventy-five percent of those visits were to people who have Medicaid as their insurance. We have served people from as far away as Minot – that person came in a blizzard when no travel was advised because she had waited for years to get in to see a dentist. Fifty-one percent of our patients are children under age 16. Thirty percent of the children under age 11 had decay in five or more teeth. These are the children**

**we hope will stay in North Dakota. We want them to be healthy. We need dentists to provide their care.**

**Valley Community Health Centers has been very fortunate to recruit two young men who are natives to North Dakota. Our salaries are significantly lower than in private dentistry and both our dentists have substantial debt. Loan repayment from the federal government is nearly non-existent. Our Dental Director, Grant Korsmo, a native of Northwood, was successful in receiving state loan repayment last year. It is our hope that Dr. Robert Remmick, a native of Devils Lake, will also receive loan repayment. However, we support the notion that they compete for funds which are separate from those available to dentists choosing to practice in rural communities in the state.**

**Valley Community Health Centers and the two other public health dental clinics serve a population with great need. Recognizing that oral health is a crucial part of our overall health, we believe that dentists are critical providers of care. We appreciate the support of the wider community in our state to support our efforts to improve the health of our people.**

**Funds provided by SB 2358 will assist our efforts to provide oral health care access. I urge you to recommend a Do Pass for SB 2358 to support and assure access and continuity of care for our patients.**

**Thank you for allowing me to bring this testimony before you.**



# Valley Community Health Centers

P.O. Box 160 Northwood, ND 58267

## Valley Community Health Centers Dental Clinic Patient Origin - November, 2007 through November 30, 2008

North Dakota Patients	1007	55%
Minnesota Patients	824	45%
SD Patients	1	
Colorado	1	
No zip	9	
	1842	

North Dakota Patients by County		
Grand Forks	945	
Trail	15	
Ramsey	12	
Pembina	13	
Walsh	11	
Nelson	5	
Cass	3	
Benson	1	
Steele	1	
Cavalier	1	
	1007	

# of Male Patients	858	47%
# of Female Patients	984	53%

Age of Patients		
0-16	944	51%
17-30	402	22%
31-64	457	25%
+65	39	3%
	1842	

Total Encounters 4840





P.O. Box 160 Northwood, ND 58267

STUDY OF VCHC DENTAL PATIENTS  
UNDER AGE 11 (80% of children seen)  
NOVEMBER 8, 2007 THROUGH OCTOBER 30, 2008  
Vonnie Krysko

Children seen: 282  
Treatment Plan Completed: 111 (39.3%)  
Treatment Plan in Progress 50 (17.7%)  
Total: 161 (57%)

Plan not complete and no progress attempted: 30(10.6%)

Periodic Exams Completed: 67 (23.7%)  
Periodic Exams Scheduled 17 (6%)  
Total: 84 (29.7%)

Children with 5 or more teeth with decay on first visit: 85 (30.1%)

No additional decay @ periodic exam: 44 (65.7%)



January 28, 2009

*same to Senate appropris to House Human Services*



Dear Senator Lee and Members of the Human Services Committee:

Please accept our letter of support for SB 2358 to provide loan repayment for dentists practicing at Valley Community Health Centers, Family Health Center in Fargo or Bridging the Dental Gap in Bismarck.

VCHC has operated a dental clinic as a part of our Federally Quality Health Center since November, 2007. We have been successful in recruiting two young men who are native to North Dakota: Grant Korsmo who grew up in Northwood and Robert Remmick who is a native of Devils Lake. Public Health Dentistry does not attract a great number of people. We are serving people that other dental practices are unwilling to serve including low income people and people with Medicaid as their insurance. Our salary schedules cannot compete with those of private dentistry. Both of our dentists are significantly in debt. In order to retain them or to attract new demists if they should leave, loan repayment is crucial.

We very much appreciate that people in this state are willing to provide loan repayment for these special and necessary practices. Dr. Grant Korsmo has received loan repayment from the current fund which has been vital to retaining him. This bill would provide an opportunity for Dr. Remmick to also receive loan repayment.

We believe the three public health practices provide access to health care for patients who are not served elsewhere. For example, in our first year of operation, fifty-one percent of our patients were children under age 16. Thirty percent of the children under age 11 had decay in five or more teeth. Our staff is currently measuring the number of patients of all ages who have not seen a dentist in the past five years when they first come for services. We believe, based on their experience that the percentage will be close to 100%.

Thank you for considering this bill. It is our great hope that the state of North Dakota will provide the support requested for loan repayment for our clinic as well as for the clinics in Fargo and Bismarck.

Sincerely,



Jane Lukens  
President







## **PUBLIC HEALTH DEPARTMENT**

151 South 4th Street, Suite N301 • Grand Forks, ND 58201-4735 • Telephone (701) 787-8100 • Fax (701) 787-8145

January 23, 2009

*Same to Senate Approvs*

Dear Senator Lee and Members of the Senate Human Service Committee:

I am writing to request your support of Senate Bill 2358, a bill to provide a dental loan repayment program for dentists practicing in public health dental clinics in North Dakota.

In my role as the chairperson for the Northern Valley Dental Health Coalition, it has been my pleasure to work closely with the dentists at Valley Community Health Centers Dental Clinic in Grand Forks the past year. Dr. Grant Korsmo and Dr. Robert Remmick are dedicated dentists committed to serving their patients at Valley Community Health Centers Dental Clinic. Upon graduation from dental school, they could have chosen to practice dentistry in a more lucrative setting in another state allowing them to more easily pay back their huge investment in education. Instead they have chosen to practice in North Dakota in a public health dental clinic, which is testimony to their commitment to the residents of our state.

This new dental loan repayment program established by SB 2358 is extremely important to recruiting and retaining dental professionals to work in public health clinics where dental health disparity is great. Dental access is an issue not only in rural areas of the state, but in our urban centers where patients on public insurance programs cannot find dentists who accept their insurance. It is crucial that the program be expanded, especially in light of the recent establishment of public health dental health clinics like the one in Grand Forks.

You may be interested to know that from November 27, 2007 through December 31, 2008, Valley Community Health Centers Dental Clinic had almost 3,000 patient visits! The strong collaboration of community partners made the clinic a reality. The policy initiatives like the North Dakota Dental Loan Repayment program will ensure continued success and improved dental care access.

Please support Senate Bill 2358 with a "do pass" recommendation. Please feel free to contact me at 701-787-8113 or [dswanson@grandforksgov.com](mailto:dswanson@grandforksgov.com) if I can provide additional information or answer any questions.

Sincerely,

*Debbie Swanson*

Debbie Swanson, RN  
Nursing and Nutrition Supervisor  
Chair, Northern Valley Dental Health Coalition

January 26, 2009

*Same to Senate approves*

Dear Senator Lee and Members of the Human Services Committee:

I am writing this letter on behalf of Dr. Robert Remmick and myself, Dr. Grant Korsmo. We are currently the two dentists providing care at Valley Community Health Centers – Dental Clinic in Grand Forks. The purpose of this letter is to inform you of the importance of a couple of bills that are to be heard in the legislature this coming week.

The first of the two is Bill SB 2356 which allocates a one-time grant to the three Community Dental Clinics in North Dakota. The three eligible clinics are Family Health Care in Fargo, Bridging the Dental Gap in Bismarck, and Valley Community Health Centers in Grand Forks. This one time grant would be \$150,000 per clinic. This money would go a long way toward updating old equipment and maintaining current equipment. There is no excess money within each organization to be able to replace some of the equipment that no longer works the way it should, and this grant would make it possible to make some much need improvements.

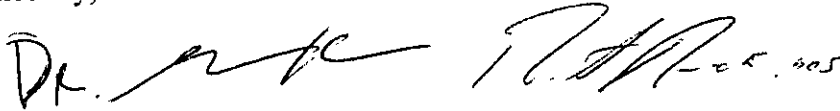
The second of the two bills in which I would like your support is Bill SB 2358. This is a bill that designates state loan repayment to dentists working in one of these three clinics. Both Dr. Remmick and I are recent graduates of dental school. The burden of student loans is daunting and a large factor in the decision on what to do after dental school. The three community clinics are not able to offer a competitive salary that many private offices are able to provide. I personally choose to work at VCHC for a couple of reasons. I grew up in Northwood where the “home” clinic for VCHC was established. VCHC also has a medical clinic on Larimore as well. I always knew I wanted to return to North Dakota after dental school. I also have been involved with missions and traveled to the Dominican Republic to provide dental services to those unable to get any dental care elsewhere. The decision to work here has been a good one, but a hard one as well. Dr. Remmick is also a native North Dakotan. He was very pleased to be able come back to the area and provide services to the people in the region. His choice to work here has been a tough one as well. Without loan repayment, the retention of Dr. Remmick and other dentists just like him is very difficult.

This bill will have a direct affect on the future on these clinics. It is very hard to recruit new competent and willing dentist to work at these types of clinics when compared to the earning potential in private practice. This loan repayment program will make the clinics more competitive, therefore increasing the chances of recruiting new dentists and retaining those already working there. The current dental loan repayment plan is a great one for getting dentists to work in the rural areas of North Dakota. Being the clinics are located in the three most populous cities in North Dakota, the preference is given to those working in rural ND. We don’t want to have to compete for that money. I feel it is necessary to have to separate programs, both of which are very important.

To finish this up I just wanted to give a little perspective to the need of these clinics. Among the hundreds of stories I have heard about patients who have been living with dental pain for years because they were unable to see a dentist, one has stuck out. I

had a patient in the chair the other day, and I asked him how everything has been feeling and if he had any pain or discomfort lately. He replied that his mouth feels great since he has been coming to the clinic and he is free from tooth pain for the first time in the last 6 years. This story isn't an anomaly, and goes to show the need and demand for these clinics. Please show your support for these bills and thank you for you time.

Sincerely,



Drs. Grant Korsmo and Robert Remmick  
Valley Community Health Centers – Dental Clinic

Dental Student Loan Repayment Senate Bill 2358

You have already heard my testimony for Senate Bill 2356 that outlined some of the history of Bridging the Dental Gap so I will forgo repeating that information.

When Bridging the Dental Gap was set up, it was with a business plan showing a number of volunteer dentists who would provide care. The number of paid staff would be part-time or minimal. Unfortunately that has not come to fruition. Although we do have 2 volunteer dentists who come in about once a month, in order to run a full time clinic and treat the large number of individuals who require care, we have to pay for the staff. Since we are non-profit, we cannot provide the level of payment for salaries and benefits that they could earn in a private practice. We need to have some other "carrot" or means of attracting dentists to our staffs. A dental student loan repayment program is that extra benefit. Even when we attract a dentist, they usually only stay in our employment for a year and then move on. The loan repayment program would at least assure that we could have some continuity for a 2-3 year period.

There is already in place a Dental Student Loan Repayment program however the priority goes to dentists who locate in rural areas of North Dakota. The bill that is before you would provide a student loan repayment that is just for dentists practicing in non-profit dental clinics. The provisions in this current bill will allow it to be run similarly to the one already in place. I have asked Gary Garland to be present from the State Health Department to respond to any legislator's questions regarding how the loan repayment programs are handled.

I would urge your support of this bill.

Marcia Olson

Clinic Manager Bridging the Dental Gap

Dear Senator Holmberg and Members of the Appropriations Committee:

I am writing on behalf of Family Health Care Dental Clinic in Fargo, North Dakota. My name is Jamie Steidl and I have worked here since June of 2005. I am hoping that I can help you to see the importance of a couple of bills that will be heard in the legislature soon.

The first of the two is Bill SB 2356 which allocates a one-time grant to the three Community Dental Clinics in North Dakota. The three eligible clinics are Family Health Care in Fargo, Bridging the Dental Gap in Bismarck, and Valley Community Health Centers in Grand Forks. This one time grant would be \$150,000 per clinic. This is very important especially in our clinic in Fargo. Most of our equipment is very old, and we also have a limited supply of it. For example we have four high speed hand pieces for operating on teeth. We cannot afford to purchase new ones so we continue to work with old ones. Every month we have to send one or more in to repair it. This ends up costing about five hundred dollars per time and also leaves us short of equipment. This is the way it is with everything we have, if anything breaks it puts us short on already overused equipment. Also many people may be put off from coming here for care due to the appearance of our clinic. It looks very old and outdated.

The second of the two bills in which I would like your support is Bill SB 2358. This is a bill that designates state loan repayment to dentists working in one of these three clinics. I was a recipient of this loan repayment, and although I really enjoy working on the underserved, I don't know if I would have taken this job without loan repayment. Most private offices can offer so much more money that it is hard to say no. We see so many Medicaid patients and people who are uninsured. I would guess that the three health clinics in North Dakota see a great majority of these patients.

It is also very hard for community clinics to recruit new dentists. Most of the people who want to work here are new graduates who are just getting some income while they set up a private office, or older dentists who are interested in working a few days a week. What we need is motivated dentists who want to work here for many years. In order to find dentists like this we must have added incentive. We cannot even come close to the salary that dentists can achieve in the private sector.

I urge you and your fellow senators and representatives to consider these bills and hopefully you can understand how important they are in bringing quality care to the underserved populations.

Jamie Steidl DDS

2

**SB 2358**

**Senate Appropriations Committee**

**Senator Ray Holmberg, Chair**

**February 4, 2009**

**Testimony**

**Senator Holmberg and Members of the Senate Appropriations Committee, my name is Sharon Ericson, Chief Executive Officer of the Valley Community Health Centers (VCHC) with sites in Northwood, Larimore, and Grand Forks.**

**Valley Community Health Centers supports SB 2358, which provides for loan repayment for the dentists who practice in the three public health dental clinics in North Dakota. At the present time, there is a loan repayment fund which provides support for dentists who choose to practice in rural North Dakota. Valley Community Health Centers believes that the support for rural practice is very important; after all, both Northwood and Larimore are rural communities and we serve a population living in over 3600 square miles in the Northern Red River Valley. However, we support the additional pool of funds for public health dental clinic loan repayment for these reasons.**

**We provide access to nearly 7500 people with Medicaid in two counties. Most of the people we have served in our first 13 months of operation have not had dental care in the past five years. The dentist who practiced in Larimore recently passed away, leaving more people in our area without access to care. Valley Community Health Centers served 1,842 people; fifty-one percent under age 16. We provided 4,840 encounters or visits. Seventy-five percent of those visits were to people who have Medicaid as their insurance. We have served people from as far away as Minot – that person came in a blizzard when no travel was advised because she had waited for years to get in to see a dentist. Thirty percent of the children under age 11 had decay in five or more teeth. These are**

the children we hope will stay in North Dakota. We want them to be healthy. We need dentists to provide their care.

Valley Community Health Centers has been very fortunate to recruit two young men who are natives to North Dakota. Our salaries are significantly lower than in private dentistry and both our dentists have substantial debt. Loan repayment from the federal government is nearly non-existent. Our Dental Director, Grant Korsmo, a native of Northwood, was successful in receiving state loan repayment last year. It is our hope that Dr. Robert Remmick, a native of Devils Lake, will also receive loan repayment. However, we support the notion that they compete for funds which are separate from those available to dentists choosing to practice in rural communities in the state.

Valley Community Health Centers and the two other public health dental clinics serve a population with great need. Recognizing that oral health is a crucial part of our overall health, we believe that dentists are critical providers of care. We appreciate the support of the wider community in our state to support our efforts to improve the health of our people.

Funds provided by SB 2358 will assist our efforts to provide oral health care access. I urge you to recommend a Do Pass for SB 2358 to support and assure access and continuity of care for our patients.

Thank you for allowing me to bring this testimony before you.

Dental Student Loan Repayment Senate Bill 2358 *Mansha Olson*

You have already heard my testimony for Senate Bill 2356 that outlined some of the history of Bridging the Dental Gap so I will forgo repeating that information.

When Bridging the Dental Gap was set up, it was with a business plan showing a number of volunteer dentists who would provide care. The number of paid staff would be part-time or minimal. Unfortunately that has not come to fruition. Although we do have 2 volunteer dentists who come in about once a month, in order to run a full time clinic and treat the large number of individuals who require care, we have to pay for the staff. Since we are non-profit, we cannot provide the level of payment for salaries and benefits that they could earn in a private practice. We need to have some other "carrot" or means of attracting dentists to our staffs. A dental student loan repayment program is that extra benefit. Even when we attract a dentist, they usually only stay in our employment for a year and then move on. The loan repayment program would at least assure that we could have some continuity for a 2-3 year period.

There is already in place a Dental Student Loan Repayment program however the priority goes to dentists who locate in rural areas of North Dakota. The bill that is before you would provide a student loan repayment that is just for dentists practicing in non-profit dental clinics. The provisions in this current bill will allow it to be run similarly to the one already in place. If there are questions concerning the administration issues etc. of the current Student Loan Repayment program or any new program, Gary Garland from the State Health Department could be called upon for information.

I would urge your support of this bill.



SB 2358

#1

House Human Services Committee  
Representative Robin Weisz, Chair

March 10, 2009

Testimony

Mister Chair and Members of the Human Services Committee, my name is Patricia Patron, Executive Director of Family HealthCare Center (FHC) in Fargo.

Family HealthCare Center supports SB 2358, which provides for loan repayment for the dentists who practice in non-profit and public health dental clinics serving the most vulnerable populations in the State, including the uninsured and those living under poverty in North Dakota. The current loan repayment program in the State gives preference to dentists who choose to practice in rural North Dakota. FHC supports the current program because it greatly improves the ability to secure dental access for populations living in rural areas in the State. Even though FHC is located in an urban area, on daily basis, FHC serves patients that travel long distances to access dental services at our facility. It is not unusual for patients to travel more than 100 miles for dental appointments. FHC supports the additional funding for public health and non-profit dental clinic loan repayment for the following reasons:

Barriers to dental access in our State are pretty significant. Non-profit and public health clinics like FHC provide access not only to patients insured through Medicaid, but more importantly to patients who lack dental insurance coverage all together. The aging of North Dakota's population is a pretty significant challenge today. Elderly patients, eligible for Medicare coverage, lack dental insurance coverage most of the time. A significant issue in our State is the tremendous increase in the number of people over 65 living under 200% of poverty. Those uninsured patients are accessing dental services at our public health clinics. Another significant issue is the fact that most of the uninsured in our State are young adults, working more than one part-time job and living

under poverty. This segment of the population is not eligible for any public programs like Medicaid in North Dakota. Keeping our working force healthy is critical for the good of the State. Access to dental services ensures the immediate and future wellbeing of our work force.

In 2008, FHC provided services to 12,476 unique patients. Nearly 90% of those patients live under 200% of poverty. Forty-four percent or 5,400 patients do not have access to health and/or dental insurance and 4,900 are on Medicaid. FHC is one of the very few dental providers in our service area that accepts patients on medical assistance and uninsured patients. Access to oral health is essential to the patient's overall health. Timely dental access can detect early signs of oral health problems and can lead to treatments that will prevent further damage and in some cases reverse the problem. Oral health access also improves patient outcomes related to diseases such as heart disease, stroke, cancer; and it can decrease the risk for complicated pregnancies.

Most of the patients FHC serves have delayed accessing services for three to five years. Many report that the lack of dental insurance access impedes their access to prompt dental services. Our services are open to all regardless of ability to pay and of place of residency. On daily basis, over 20% of our scheduled appointments are filled with patients and their families traveling from places as far as Minot and from many other communities in the State. Our dental program has been in operation for over 13 years. Throughout the years, we have partnered up with other service providers to provide access to vulnerable populations in the State such as young children, refugees, and the elderly in our community. The need of services in our community is growing everyday. It is critical for people to be able to access oral health services in order to improve their general wellbeing and self-esteem.

FHC has struggled in the past tremendously to recruit dentists to serve our patient population. Three years ago, we were very fortunate to be able to attract a young North Dakota dentist fresh out of dental school. Dr. Steidl accepted the position at FHC because he was intrigued by the mission of the organization. He

took a salary offer below the market salary at that time. Dr. Steidl has benefited from loan repayment which has relieved some the substantial debt from his school loans. Today, Dr. Steidl serves only uninsured, homeless, low income, and Medicaid insured patients at FHC.

FHC's ability to provide dental access in our community and to keep our doors open to patients traveling long distances to access dental care depends on our ability to recruit and retain dentists. It is our hope that in the future we can keep attracting dentists to our practice by being able to participate in the North Dakota loan repayment program. The benefit comes back to our patients by being able to offer the access they deserve to live healthy lives.

Funds provided by SB 2358 will assist our efforts to provide oral health care access. I urge you to recommend a Do Pass for SB 2358 to support and assure access and continuity of care for our patients.

Thank you for allowing me to bring this testimony before you.

*Handwritten initials*

**SB 2358**

**House Human Services Committee  
Representative Robin Weisz, Chair**

**March 10, 2009**

**Testimony**

**Representative Weisz and Members of the Human Services Committee, my name is Sharon Ericson, Chief Executive Officer of the Valley Community Health Centers (VCHC) with sites in Northwood, Larimore, and Grand Forks.**

**Valley Community Health Centers supports SB 2358, which provides for Loan repayment for the dentists who practice in the three public health dental clinics in North Dakota. At the present time, there is a loan repayment fund which provides support for dentists who choose to practice in rural North Dakota. Valley Community Health Centers believes that the support for rural practice is very important; after all, both Northwood and Larimore are rural communities and we serve a population over 3600 square miles in the Northern Red River Valley. However, we support the additional pool of funds for public health dental clinic loan repayment for these reasons.**

**We provide access to 14,200 low income people in North Dakota as well as an additional 2100 in Minnesota. Nearly 65% of the start-up funds for our dental clinic came from Minnesota Foundations or other charitable programs. Of the eligible population from North Dakota, we estimate that 3,750 are eligible for Medicaid.**

**In our first year of operation, we concentrated our efforts on people who have Medicaid as their insurance; seventy-five percent of our visits were reimbursed by Medicaid. Valley Community Health Centers served 1,842 people. We provided 4,840 encounters or visits, we will double that number in our second year. Most of the people we have served in our first 13 months of operation have not had dental care in the past five years. The dentist who practiced in**

Larimore recently passed away, leaving more people in our area without access to care. We have served people from as far away as Minot – that person came in a blizzard when no travel was advised because she had waited for years to get in to see a dentist.

Fifty-one percent of our patients are children under age 16. Thirty percent of the children under age 11 had decay in five or more teeth. These are the children we hope will stay in North Dakota. We want them to be healthy. We need dentists to provide their care.

Valley Community Health Centers has been very fortunate to recruit two young men who are natives to North Dakota. Our salaries are significantly lower than in private dentistry and both our dentists have substantial debt. Loan repayment from the federal government is nearly non-existent. Our Dental Director, Grant Korsmo, a native of Northwood, was successful in receiving state loan repayment last year. It is our hope that Dr. Robert Remmick, a native of Devils Lake, will also receive loan repayment. However, we support the notion that they compete for funds which are separate from those available to dentists choosing to practice in rural communities in the state.

Valley Community Health Centers and the two other public health dental clinics serve a population with great need. Recognizing that oral health is a crucial part of our overall health, we believe that dentists are critical providers of care. We appreciate the support of the wider community in our state to support our efforts to improve the health of our people.

Funds provided by SB 2358 will assist our efforts to provide oral health care access. I urge you to recommend a Do Pass for SB 2358 to support and assure access and continuity of care for our patients.

Thank you for allowing me to bring this testimony before you.

*Marcia Olson*

*MS*

Background: Senate Bill 2358

Bridging the Dental Gap began to meet community needs to respond to the lack of dental access for Medicaid and low income individuals. We have been operational since August of 2004. Initial start up funds were received through grants by the Bush Foundation, Community Development Block Grants, Ronald McDonald House Charities and others. We provide basic dental services to uninsured, low income and Medicaid families. Our patients range in age from 2 to 100. 68% of our clients are Medicaid, the remainder are low income with only 3% having any form of insurance or not qualifying for some form of sliding fee. Individuals who are not on Medicaid qualify for sliding fees or discounts based on Federal Poverty Guidelines. Currently we have over 7000 patients in our records system. During 2008 there were 6800 patient appointments. Our staff currently consists of 2 dentists, 3 assistants, 2 hygienists, 2 receptionists/medical records clerks, and myself as Executive Director of the non-profit corporation and as Clinic Manager. We get NO Federal Funds. We are self-supporting from Medicaid and discounted fees as well as on-going support through various grants.

When Bridging the Dental Gap was set up, it was with a business plan showing a number of volunteer dentists who would provide care. The number of paid staff would be part-time or minimal. Unfortunately that has not come to fruition. Although we do have 2 volunteer dentists who come in about once a month, in order to run a full time clinic and treat the large number of individuals who require care, we have to pay for the staff. Since we are non-profit, we cannot provide the level of payment for salaries and benefits that they could earn in a private practice. We need to have some other "carrot" or means of attracting dentists to our staffs. A dental student loan repayment program is that extra benefit. Even when we attract a dentist, they usually only stay in our employment for a year and then move on. The loan repayment program would at least assure that we could have some continuity for a 2-3 year period.

There is currently a dental student loan repayment program in place which is over seen by the Dept of Health. That program is designed primarily to attract dentists to rural areas and for the most part has been successful. The 3 non-profit dental clinics could benefit from a similar program since the current program gives priority to areas other than Grand Forks, Fargo and Bismarck.

Senate Bill 2358 requests funding for a program that would also be administered by the Dept of Health with similar guidelines as the existing program but with targets to non-profit dental clinics.

There is a bill before the Legislature that will ask to raise the Medicaid reimbursement rate and some legislators may argue that this is sufficient to meet the needs of dental access. However I do not believe that this will address the entire issue. It may result in more access in some areas but the sheer volume needing treatment will not deplete the numbers of those that we service. The population that we serve presents additional hardships to the private practice which will continue to serve as stumbling blocks to inclusion: slow payment practices of Medicaid –red tape and paperwork, recipient liability issues,

restrictions on coverage, requirement for pre-authorizations for services, not to mention that this population has a tendency to miss multiple appointments and their follow through with treatment requirements is minimal. All of these factors as well as other socio-economic concerns will not easily allow the low income population to "fit" into a standard private practice .

There is also a bill before the legislature that asks for one time funding of a Caremobile program to bring dental services to rural areas. This will provide access to care for many rural individuals. This is complementary to services that we are providing. We see ourselves as a referral clinic for those children who will have on-going dental needs. In South Dakota, the Caremobile usually only gets to a community once or twice a year. During the interim and to provide a dental home for these children, we will be partnering with the Caremobile program to provide some of the additional services needed.

I ask for your support of this bill for the non-profit dental clinics in North Dakota to allow them to better serve the most vulnerable of our populations.

#5

Dear Representative Weisz and Members of the Human Services Committee:

I am writing on behalf of Family HealthCare Dental Clinic in Fargo, North Dakota. My name is Jamie Steidl and I have worked here since June of 2005. I am hoping that I can help you to see the importance of Senate Bill No 2358.

I would like to respectfully request your support for Bill SB 2358. This is a bill that designates state loan repayment to dentists working in one of the three non-profit, public health clinics in the State. I was a recipient of this loan repayment, and although I really enjoy working on the underserved, I don't know if I would have taken this job without loan repayment. Most private offices can offer so much more money that it is hard to say no. In my practice at Family HealthCare Center, the patients I see on daily basis are uninsured, homeless, or Medicaid recipients. I would guess that the three health clinics in North Dakota see a great majority of these patients.

It is also very hard for community clinics to recruit new dentists. Most of the people who want to work here are new graduates who are just getting some income while they set up a private office, or older dentists who are interested in working a few days a week. What we need is motivated dentists who want to work here for many years. In order to find dentists like this we must have added incentive. We cannot even come close to the salary that dentists can achieve in the private sector.

I urge you and your fellow representatives to consider this bill and hopefully you can understand how important it is in bringing quality care to the underserved populations in our State.

Jamie Steidl DDS



March 6, 2009

Dear Representative Weisz and Members of the House Human Services Committee:

I am writing this letter on behalf of Dr. Robert Remmick and myself, Dr Grant Korsmo. We are currently the two dentists providing care at Valley Community Health Centers – Dental Clinic in Grand Forks. The purpose of this letter is to inform you of the importance of a bills that will be heard in the legislature this coming week.

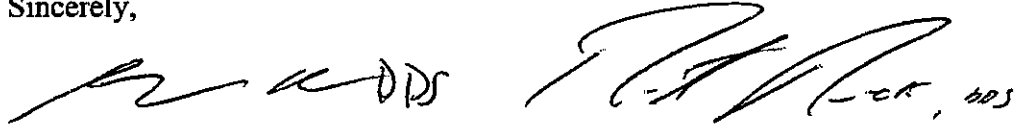
I would like your support for SB 2358. This is a bill that designates state loan repayment to dentists working in one of these three clinics. Both Dr. Remmick and I are recent graduates of dental school. The burden of student loans is daunting and a large factor in the decision on what to do after dental school. The three community clinics are not able to offer a competitive salary that many private offices are able to provide. I personally choose to work at VCHC for a couple of reasons. I grew up in Northwood where the “home” clinic for VCHC was established. VCHC also has a medical clinic on Larimore as well. I always knew I wanted to return to North Dakota after dental school. I also have been involved with missions and traveled to the Dominican Republic to provide dental services to those unable to get any dental care elsewhere. The decision to work here has been a good one, but a hard one as well. Dr. Remmick is also a native North Dakotan. He was very pleased to be able come back to the area and provide services to the people in the region. His choice to work here has been a tough one as well. Without loan repayment, the retention of Dr. Remmick and other dentists just like him is very difficult.

This bill will have a direct affect on the future on these clinics. It is very hard to recruit new competent and willing dentist to work at these types of clinics when compared to the earning potential in private practice. This loan repayment program will make the clinics more competitive, therefore increasing the chances of recruiting new dentists and retaining those already working there. The current dental loan repayment plan is a great one for getting dentists to work in the rural areas of North Dakota. Being the clinics are located in the three most populous cities in North Dakota, the preference is given to those working in rural ND. We don't want to have to compete for that money. I feel it is necessary to have to separate programs, both of which are very important.

To finish this up I just wanted to give a little perspective to the need of these clinics. Among the hundreds of stories I have heard about patients who have been living with dental pain for years because they were unable to see a dentist, one has stuck out. I

had a patient in the chair the other day, and I asked him how everything has been feeling and if he had any pain or discomfort lately. He replied that his mouth feels great since he has been coming to the clinic and he is free from tooth pain for the first time in the last 6 years. This story isn't an anomaly, and goes to show the need and demand for these clinics. Please show your support for these bills and thank you for you time.

Sincerely,



Drs. Grant Korsmo and Robert Remmick  
Valley Community Health Centers -- Dental Clinic