

February 2, 2012

INTERIM HEALTH CARE REFORM REVIEW COMMITTEE Bridging the Dental Gap

REPRESENTATIVE KEISER AND COMMITTEE MEMBERS:

My name is Marcia Olson. I am Executive Director of Bridging the Dental Gap here in Bismarck. I am here to share information about our facility and programs, other safety net clinics with dental programs and the Ronald McDonald Care Mobile, and how you can help all of us continue our work in future years.

Bridging the Dental Gap became operational in August of 2004. It was founded based on community needs for dental care for Medicaid and low income populations. At that time, too few dentists were accepting Medicaid reimbursement. Renovation of space and purchase of new and used dental equipment was achieved through a variety of grants the largest of which was a Bush Grant. The mission of the organization is *"Supporting and providing primary dental care for those in need, including the underinsured and the uninsured."* The vision is: *"Bridging the Dental Gap will be a leader in promotion and delivery of primary dental care services to those in need in a viable, sustainable manner."*

Our care is limited to a fifty mile radius of Bismarck-Mandan communities simply due to the high volume of care needed and the number of staff available. While it was originally hoped we could operate using some volunteer dentists in addition to a base staff, it became evident that volunteers were not forthcoming and we would be limited by the patient load our staff could treat alone.

Our third dentist recently went into private practice, so we are down to two dentists. We have over 11,000 patients in our patient base. 6500 patient appointments are seen per year. Two to three additional staff dentists would allow us to increase our service area. The problem is attracting and retaining dentists to practice in the public health arena.

We are a non-profit entity overseen by a board of 15 community members from a variety of professions. We DO NOT receive federal funds other than Medicaid reimbursement for services. We are NOT affiliated with a community health center or a federally funded health center. We operate solely as a public health dental clinic providing primary basic services based on sliding fees dependent on an individual's income and National Poverty guidelines. Donations and grants are sources for larger equipment purchases and any expansions.

Our board is willing to expand services and service areas depending on need and the ability to sustain what is already in place. In order to do some additional outreach and based on an unmet need, a HRSA (Health Resources and Services Administration) grant was obtained that provided funding for equipment to set-up mobile outreach to nursing homes. In October service started at two area nursing homes utilizing portable equipment that is transported to a space within the nursing homes. In the 4 months of

operation, we have treated 124 nursing home patients. This is a program that can continue to expand at other area nursing homes.

The treatment of children in underserved areas and those of low income status continues to be a concern. Ronald McDonald House Charities worked for a number of years to get funding for the Ronald McDonald Caremobile to provide outreach to children in the western half of North Dakota. Funding was secured through HRSA grants, legislative appropriation and several major donors. The Caremobile is finally a reality and will begin operation next week at schools in Bismarck-Mandan that have a 50% or greater population of free and reduced meals. Bridging the Dental Gap is collaborating with Ronald McDonald House Charities to meet these needs. Staff hired through our clinic and under our auspices will man the truck. We see this as a way to reach beyond our 50 mile limit to demonstrate our commitment to dental needs for North Dakota. At the end of this presentation, I invite you to tour the Caremobile which has been brought to the capital for you to get an idea of what this undertaking has entailed.

In addition to Bridging the Dental Gap and the Caremobile, there are several dental health clinics in the state that are federally funded or connected to community health centers. They are Valley Community Health Centers in Grand Forks, Family Healthcare Center in Fargo and Moorhead, Red River Valley Dental Access (volunteer dentists), Coal Country Community Health Centers in Beulah who contract for some dental services, and Northland Community Health Center in Turtle Lake. None of these facilities have an area limit for their patients and will take all individuals. They are all based on sliding fees or Medicaid fees for their income in addition to any grants, donations or federal funding they receive. These are all under the Community Healthcare Association of the Dakotas umbrella.

The ND Seal IT program through the ND Department of Oral Health has reached a large number of children in schools to provide sealants and fluoride varnish. The public health hygienists have been able to provide these services through an expansion in the dental rules and regulations granted by the ND Board of Dentistry and supported by the ND Dental Association. This same expansion benefits our nursing home program and the Caremobile by allowing hygienists to "triage" patients prior to a dentist being on-site.

As stated previously, a big concern for all of these entities is attracting and retaining dentists. We would all benefit through funding of the Dental Student Loan Repayment program. Three legislative sessions ago, wording was added to the existing Dental Student Loan Repayment program to allow dentists in Bismarck, Fargo and Grand Forks to qualify in addition to those from rural areas based on some criteria for serving the underinsured. In practice, this did not do enough to assure that the non-profit dentists received some preferential treatment. (NDCC 43-28.1-03 number 4 a and b). Two legislative sessions ago, a separate section was added (NDCC 43-28.1-01.1) that specifically addressed dentists in public health and non-profit dental clinics. Funding was appropriated to 3 dentists under this provision at 3 different clinics. The last legislative session funding was provided only for the main loan repayment program and not to the non-profit sector. This funding would go a long way to secure dentists to all

of these programs. In the next legislative session, we will be bringing this issue forward for consideration.

The Fargo clinics are currently undergoing a major building project to expand services in the health and dental areas. Bridging the Dental Gap would open service areas if we could secure funding for building renovation and equipment needed. Northland Community Health Center is looking at equipment needs to add a mobile nursing home outreach similar to ours. All of the clinics and the Caremobile will have equipment needs which can only be met through either donations, grants or appropriations. What part the legislature chooses to play in meeting the needs to provide dental care and increased oral health care to North Dakota citizens remains to be seen but will become an issue over the next couple years especially as healthcare reform proceeds. Legislators will be able to watch these various new programs to determine the impact they have on these needs.

Other areas that could be considered is expanding the dental assistant program from Wahpeton and coordinating with a school in the western part of the state to train dental assistants. Dental Assistants are one of the jobs that many dental offices including the non-profits find in short supply.

The North Dakota Department of Oral Health through a Dentaquest grant is looking at issues affecting access to care and attempting to formulate a statewide strategic plan to achieve oral health in North Dakota. This three year grant spends a year on gathering input at community forums and putting together a plan and then will spend the next two years in various phases of carrying out the plan including addressing legislative issues.

This presentation gives you a quick background look at our program and some of the others providing dental care. It also has highlighted just a few of the issues that will be coming in the future. I appreciate the opportunity to share this information today. I am open for questions.

Thank you. And please join us at the Caremobile at the west entrance to the capital.