

Wisconsin Senate Committee on Public Benefits, Licensing and State-Federal Relations
Senator Chris Kepenga, Chair
Wisconsin Assembly Committee on Health
Representative Joe Sanfelippo, Chair

Support for SB 784 / AB 945 – Licensure of Dental Therapists



Ascension



Leading experts agree and data shows that nationally Wisconsin ranks last in access to dental care. The connection between oral health and overall health is well documented and advocates agree SB 784 / AB 945 would directly impact access to care in our state. There are numerous documented cases across the country of patients dying, including 12-year-old Diamonte Driver in Maryland, because of preventable dental infections going untreated, and spreading to their brains or other organs. We do not want to see this in Wisconsin

The authorization of dental therapists in Wisconsin is an important step to improve access to dental care. There is no one silver bullet that will fix this problem. However, our neighbors in Minnesota have allowed dental therapists to practice and have well documented the success this change has made.

There are several important aspects of this legislation that should be understood.

1) Dental therapists are intended to be a member of the dental team and not work independent of a dentist. SB 784 / AB 945 requires a licensed dental therapist to enter into a collaborative management agreement with a licensed dentist. This allows the therapist and dentist to collaborate on treatment planning and the provision of care. Therapists may work under general supervision which would allow a therapist to provide care when the dentist is not physically present. However, the care would all be authorized by the dentist with whom the collaborative management agreement is with. This model is working well in Minnesota with nearly 80 licensed therapists practicing across the state since the first dental therapist graduates in 2011 became licensed.

2) Dental therapists are well trained and educated. The Council on Dental Accreditation (CODA) adopted standards for dental therapy education in 2016. CODA is the same body that accredits dental and dental hygiene schools across the country. CODA ensures dental therapy training programs educate their graduates to meet a level of competency in the services which they will be providing. The University Of Minnesota School Of Dentistry not only supports dental therapists in their state but trains them right alongside future dentists and dental hygienists.

3) Wisconsin currently has 1.5 million residents who live in dental shortage areas. In 2016, 50 percent of dental therapists worked in the populous Twin Cities area, a decrease from 73 percent in 2013. Further, dental therapists are distributed more closely to the Minnesota population than dentists; 63 percent of dentists (compared to 50 percent of dental therapists) are in the Twin Cities.

4) Dental therapists, similar to a physician assistant on a medical team, provide cost-effective preventive and routine restorative care. Dentists in Minnesota who have hired dental therapists are seeing more patients and increased revenue. A 2014 report released by the Minnesota Board of Dentistry and Department of Health shared in addition to more patients



being seen, more than 80 percent of new patients seen by dental therapists were publically insured. Patients experienced less travel time and decreased wait times. More recent estimates in Minnesota show dental therapists have provided more than 107,600 patient visits.

5) Dental therapists are being trained at two institutions in Minnesota including the University of Minnesota School of Dentistry and Metropolitan State University (in conjunction with Normandale Community College). Vermont, which passed dental therapy legislation in 2016, launched a dental therapy training program at Vermont Technical College in June 2017. They have hired a director and are in the process of developing curricula and applying for accreditation from CODA. With a CODA accredited dental school and eight CODA accredited dental hygiene schools in Wisconsin there is already an educational infrastructure to explore training programs in our state.

6) In Wisconsin more than 41,000 emergency room visits for preventable dental conditions were reported by hospitals in 2015. This represents nearly \$25 million in hospital charges. Typically emergency rooms stabilize patients with antibiotics and pain medication but ultimately patients need to find a dentist for treatment of the larger issue at hand. Emergency rooms across Wisconsin are working to coordinate follow up care for patients however finding dentists willing to accept patients on Medicaid can be challenging.

It is for these reasons our organizations have joined together in agreement to support dental therapy in Wisconsin. Dental therapists will be well educated, trained, licensed and provide high quality and most importantly much needed care to many in Wisconsin who currently lack access to dental care. We urge you to support SB 784 / AB 945 and authorize dental therapy in Wisconsin.

Sincerely,

- Alliance of Health Insurers
- Anthem Blue Cross and Blue Shield
- Ascension Wisconsin
- Beloit Area Community Health Center
- Children's Hospital of Wisconsin
- Children's Health Alliance of Wisconsin
- Disability Service Provider Network
- Kids Forward
- Milwaukee Area Health Education Center
- Milwaukee Latino Health Coalition
- Sixteenth Street Community Health Center
- UW Health
- UW Health – American Family Children's Hospital
- Wisconsin Counties Association
- Wisconsin Dental Hygienists Association
- Wisconsin Oral Health Coalition
- Wisconsin Primary Health Care Association
- Wisconsin Public Health Association
- Wisconsin Association of Local Health Departments and Boards