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# MARY FELZKOWSKI

STATE SENATOR • 12<sup>TH</sup> SENATE DISTRICT

## **Testimony on SB 689**

Senate Committee on Health

Senator Mary Felzkowski

12<sup>th</sup> Senate District

December 7<sup>th</sup>, 2023

Good afternoon Chairwoman Cabral-Guevara and fellow committee members,

Thank you for taking the time to hear testimony on Senate Bill 689, regarding the licensure of dental therapists.

Please imagine you are the parent of a child on Medicaid with several cavities in her mouth. Because she is one of more than 1 million people on medical assistance that live in one of Wisconsin's 64 of 72 counties with a dental professional shortage, she has very limited access to a dentist that can work with her on restorative and preventative oral health care. The wait for care your child needs can be months long. During that time, your child is in pain, in danger of infection, and she's not eating, learning, or growing like she should be. This is the reality for many families in rural Wisconsin and urban areas like Milwaukee who have untreated dental disease with limited access to current dental professionals.

With these struggles, it comes as no surprise that Wisconsin ranks as one of the worst states when it comes to low-income pediatric dental care. The good news is that the state legislature can help change this story by pursuing tools to alleviate our statewide oral health crisis. This bill provides one of those tools by allowing for the licensure of dental therapists in Wisconsin. Similar to physician assistants in the medical field, dental therapists, serving as a mid-level provider, help dental practices reduce the access gap. The most common dental needs are oral exams and fillings. This is especially true for the Medicaid population who do not have the same access to crucial preventative care.

While current law only allows dentists to perform these procedures, a dental therapist would be a new member of the dental team with extensive training to provide this type of dental care under the supervision of a dentist. The training that dental therapists would undergo for these procedures mirrors the training dentists go through on the same procedures -the programs that train them would have to meet standards approved by the Commission on Dental Accreditation (CODA), which is authorized by the U.S. Department of Education and housed within the American Dental Association. It is the exact same body that sets the training standards for all dental schools in the United States.

Since 2011, dentists in Minnesota have been hiring dental therapists to expand routine care to more patients, offer evening and weekend hours, and extend their reach to rural satellite clinics, low-income schools, and nursing homes – often using mobile equipment to reach less mobile individuals. Dental therapists also make it more affordable for practices to deploy providers to locations that are more convenient to patients. It is now easier for Minnesota dental practices to see more Medicaid patients, and for nonprofit clinics to see more Medicaid and uninsured patients with their limited dollars.

Dental therapy is a common sense approach that is a cost-effective way to grow a more flexible oral health workforce and one that an increasing number of states have adopted. Where they are on the ground in Minnesota and in Alaska, they have made a difference in the lives of thousands struggling to find accessible quality care. Over the years in Wisconsin, this legislation has been supported by over 60 groups across the spectrum. You'll hear from some of these groups today.

After working with the Wisconsin Dental Association on amendments relating to CODA accreditation, supervision requirements, and employment parameters over the last 2 sessions, they are neutral on this bill.

Thank you all for taking the time to listen to my testimony on this important legislation. I would be very happy to answer any questions you may have.



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# JON PLUMER

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STATE REPRESENTATIVE • 42<sup>nd</sup> ASSEMBLY DISTRICT

## Senate Committee on Health

December 7, 2023

### Testimony SB 689

Good Morning Chairman Cabral-Guevara and Committee members. Thank you for holding a hearing and offering me the opportunity to testify in support of Senate Bill 689, which provides a licensure process and framework for Dental Therapists in Wisconsin. And thank you to Senator Felzkowski for her hard work and leadership getting this important legislation crafted and important stakeholders on board.

Many Wisconsinites, especially individuals on Medical Assistance programs, suffer from a lack of adequate access to dental care. Significant areas of the state face dental access shortages. The end result is fewer individuals getting the preventative dental care they need and more emergency room visits when serious issues arise.

Senate Bill 689 helps address the problem by allowing the licensure and practice of Dental Therapists to serve patients directly within their scope of care. This will result in more capacity and care options and reduced costs for those who need it. Dental Therapists provide the same type of important mid-level care as a Physician Assistant or Nurse Practitioner does in a doctor's office.

Under this bill, Dental Therapy education programs must meet specific accreditation requirements. Dental Therapists must also serve as an employee and under the supervision of a dentist. These requirements, along with additional parameters laid out in the bill, will ensure quality of care and allow Dental Therapists to operate smoothly within the dental infrastructure across the state.

I am proud to be the Assembly author of this important step in addressing a serious issue facing our state. Thank you again for hearing this legislation.

SB 689 – Licensure of Dental Therapists

Chair Cabral-Guevara and members of the Committee,

My name is Jennifer Lehto, I am the Immediate Past President of WI-DHA. I am a Registered Dental Hygienist and Certified Dental Assistant. I work at Chippewa Valley Technical College (CVTC) as a dental assisting instructor, dental hygiene instructor, and a clinical hygienist. I am pleased to testify again in support of this bill.

Although I am not interested in becoming a dental therapist, I want to advocate for it to better serve our communities in Wisconsin. I have witnessed the incredible deficit of available dental care providers in underserved populations. Especially rural residents, children, the elderly, veterans, and those with special needs. I am passionate about volunteering, especially at events like Give Kid's a Smile and Give Vet's a Smile. At these one-time yearly events, this would often be the only time these individuals and families would see a dental provider. They would drive hours, wait hours, and in the minimal time available we would do our best to provide whatever we could.

I am not here representing CVTC, but I would like you to have some insight on my day to day experiences. CVTC is a working and learning dental clinic. CVTC has a partnership with Marquette to provide care to our community members who lack a dental home due to patients' financial situations. We are not a free clinic, but we provide inexpensive dental care for low-income and Medicaid patients. We do our best to serve our community needs but have extensive waiting lists due to dental shortage areas in our county and the surrounding counties. Annually, we provide services for patients who reside in 20-24 different counties. I hear countless stories about how many hours they drove to find a clinic that would provide care and accept their insurance. They were grateful to be able to find someone after exhaustive searches for providers and the endless waitlists. Many would try to seek relief using ill-equipped Emergency Rooms as their only option. Still, I wonder how many more were not able to find any care at all.

I would like to emphasize the importance of recognizing the incredible need in Wisconsin. One viable solution is dental therapy in Wisconsin. Dental therapists will work collaboratively under the supervision of a dentist or dentists. These providers allow the underserved quicker and more availability to necessary care. Dentists could also benefit from dental therapists by helping to lower overhead costs while increasing access to care. This will help serve their communities without worrying about the burden of Medicaid reimbursement rates, thus better-serving patients that are viewed as not as profitable. Dental therapists are a more cost-effective option for simple procedures allowing dentists more flexibility to perform more complex, profitable ones. I believe strongly that all dental team members should be encouraged and allowed to work to their full scope to maximize office production, meet the needs of patients, and serve Wisconsin citizens. Dental therapy is a solution to help provide access to care to all members of our community, regardless of socio-economic barriers and location, and that is why I am speaking in support of this bill.

Jennifer Lehto, BSDH, RDH, CDA  
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### Testimony in SUPPORT of SB-689, Licensure of Dental Therapists

Good morning, Senators and Representatives:

My name is Robin Hemerley, I am the current President of the Wisconsin Dental Hygienists Association (WI-DHA). On behalf of the WI-DHA statewide membership, we **support** Senate Bill 689 and would like to express our appreciation to all those legislators who have worked diligently over the past several years to advance dental therapy legislation, particularly Senator Mary Felzkowski. We believe this is an exciting opportunity for the whole oral health community and we are hopeful to see it come to fruition during this session.

I am honored to offer testimony on behalf of the WI-DHA. We continue to be **in support** of dental therapy and believe that incorporating another licensed oral health provider will help to provide better access to care and improve oral health in Wisconsin. A multi-faceted approach to care, that includes dental therapy, allows each provider to work to the top of his or her scope of practice, providing thorough, inclusive care in all populations.

I would also like to offer **support** for this bill based on my own personal perspective. I have over 20 years of experience in the dental field. I first worked as a dental assistant starting in 2001, after completing a one-year training course through Western Technical College in La Crosse. I got my dental hygiene license in 2007, after returning to WTC in La Crosse and earning my Associate's degree in dental hygiene. For the first few years of my career, I worked only in private practice. Since 2010, my career goals have focused on public health. I began part-time with a mobile dental program offered through my local health department, and eventually transitioned to working full-time with a Federally Qualified Healthcare Center, serving in areas of rural Wisconsin with a large population of uninsured or medicaid-dependent children and adults. Part of this experience has been working with a Wisconsin Seal-A-Smile school-based program. In schools I have seen many children who live with untreated tooth decay. Some of these children are in pain, have an abscessed infection, or have other dental needs that should be urgently addressed. I am able to connect these families and children with my local federally qualified

dental clinic to get scheduled for further evaluation and care. However, clinics are often limited to the number of patients that can be seen by the available providers. Children dependent on Medicaid often have further limitations to available dental care.

Another aspect of my experience with mobile dental care has been offering preventative services in long-term care and nursing home settings. Many residents have limited mobility and other health issues that put them at a high risk for dental concerns and can prevent them from seeking dental care in a traditional setting. Loss of teeth, untreated cavities, and other oral disease leaves these adults in pain and unable to eat properly.

I am proud to see the strides that Wisconsin continues to take towards mitigating the concern of access to dental care. Initiative such as increase of Medicaid reimbursement and increasing the practice settings for dental hygienists has helped bring care to the underserved. However, there is still a large population of Wisconsin residents who struggle to find dental care. I believe the next step towards increasing access to care in Wisconsin, is to add an additional licensed provider - a dental therapist.

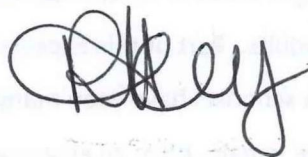
A dental therapist easily fits into a mobile care model. Following the guidelines laid out in this bill, once a collaborative management agreement has been established and supervision period fulfilled, the dental therapist could work remotely to offer care in schools or long-term care facilities like nursing homes. By utilizing a dental therapist and mobile equipment, mobile programs could offer more comprehensive care and restorative services when people are unable to be seen for treatment in a traditional setting.

I have seen, firsthand, the impact that poor access to dental care has, and I truly believe that incorporation of dental therapists into the dental team will improve access to dental care in smaller, rural areas. Better access to dental care will certainly make a lasting impact on the health and well-being of Wisconsin's residents throughout their lives.

Thank you for taking the time to hear testimony on dental therapy. Your time and commitment are sincerely appreciated.

Respectfully submitted:

**Robin Hemerley, BSDH, RDH**  
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December 7, 2023

To: Chair Cabral-Guevara  
Senate Committee on Health

From: Wisconsin Primary Health Care Association

Re: Senate Bill 689, Licensure of Dental Therapists

Chair Cabral-Guevara and Members of the Committee,

Thank you for holding a hearing on multiple oral health bills today, including Dental Therapy. On behalf of the 19 Community Health Centers in Wisconsin, WPHCA supports SB 689 as one essential tool to address workforce challenges, increase team efficiency, and ultimately improve oral health access and outcomes for patients across Wisconsin.

WPHCA is the membership organization for the 19 Federally Qualified Health Centers (FQHCs or Health Centers) in Wisconsin. Community Health Centers are non-profit, community-directed medical, dental, and behavioral health providers. In 2022, Community Health Centers served nearly 300,000 patients in communities throughout the state, including patients from every county. One in five patients lack insurance, and 70% of patients are at or below 200% of the Federal Poverty Level, which is \$30,000 for a family of four. Since 2008, Community Health Centers have tripled their dental capacity to answer the call of Wisconsinites who are living without oral health care; over one-third of Community Health Center visits are for dental care. Today I am joined by a Health Center colleague who will provide testimony shortly.

WPHCA supports licensure of Dental Therapists as one way to improve access to oral health and improve oral health outcomes for patients. We appreciate the legislature's attention to addressing oral health access issues through various efforts such as the recent rate increase for private practices, oral health grants, and DHS's Oral Health Workforce Pathway Advisory Group.

The attached issue brief highlights sobering statistics about oral health care in Wisconsin. According to 2022 Medicaid data:

- Less than 40% of Medicaid-enrolled children received *any* dental services
- Only one in four working age adults received any dental care
- 26% of Medicaid members received an oral health exam and 28% received preventative services

WPHCA also analyzed licensure data from DSPS this summer and learned that more than half of Wisconsin's zip codes have no Dentists, and that an additional 22% of zip codes have less than two Dentists. This is an imperfect data set as Dentists may practice in areas other than their registration address, but provides some sense of geographic distribution of providers in the state.



Serving Wisconsin Community Health Centers

WPHCA understands it will take an all-hands-on-deck approach from Community Health Centers, private practices, hospitals, public health agencies, free clinics, and partners in DHS and the legislature to improve oral health access and outcomes. Dental Therapy is a part of the solution. WPHCA has engaged with Health Center dental directors across the state on the topic of dental therapy over the last several years and appreciate Senator Felzkowski and Representative Plumer's ongoing attention to addressing oral health care gaps through this bill. Thank you also to the 24 lawmakers who have already signed on to co-sponsor the bill.

We have carefully studied dental therapy models, including visiting Minnesota where we learned about the training and education requirements for Dental Therapists and the rigorous quality standards to which they are held. We are confident that adding Dental Therapists to the Community Health Center team would allow Dentists to focus on the most complex procedures, while Dental Therapists would assist in routine treatment, check-ups, and other services within their scope, *without sacrificing quality of care*. Adding Dental Therapists could shorten wait time for patients, provide cost-effective preventive and routine restorative care, and improve community health in multiple settings, such as through school-based services. We appreciate the updates to the bill this session that focus on high-need populations, and the attention to high-quality training for Dental Therapists, including building confidence in their skills through 2,000 hours of direct supervision.

WPHCA greatly appreciates the bipartisan support for licensure of Dental Therapy, continued coalition support, and thanks the Wisconsin Dental Association for their engagement on this topic this session.

Thank you for the opportunity to share information regarding the potential benefits for Community Health Centers and our patients, and for your consideration of SB 689.

*Richelle Andrae*

Richelle Andrae  
Government Relations Specialist  
Wisconsin Primary Health Care Association  
[randrae@wphca.org](mailto:randrae@wphca.org) | 608-571-6168

**ABOUT WPHCA:**

WPHCA is the membership association for Wisconsin's 19 Federally Qualified Health Centers (FQHCs) also known as Community Health Centers (CHCs). Community Health Centers work to create healthier communities by improving access, providing quality health care and reducing health disparities for Wisconsin's underserved and low-income populations. Our aim is to ensure that all Wisconsinites achieve their highest health potential. We execute our mission and focus our aim through providing training and technical assistance to Wisconsin's Community Health Centers and advocating on their behalf.





December 7, 2023

TO: Chair Cabral-Guevara  
Members of the Senate Committee on Health

FROM: Partnership Community Health Center

RE: In support of Dental Therapy, Senate Bill 689

Chair Cabral-Guevara and Members of the Committee, thank you for the opportunity to provide support for Senate Bill 689, Licensure of Dental Therapy. On behalf of Partnership Community Health Center I am writing to provide additional information for the consideration of this Committee regarding Dental Therapy. We support licensure of dental therapy as one tool to improve access to oral health and improve oral health outcomes for patients.

Partnership Community Health Center provides dental services in 3 locations, Appleton, Oshkosh and Waupaca. In 2022 Partnership Community Health Center served 9,531 patients with 28,150 clinic visits. We participate in several Head Start programs in 3 counties providing dental screenings to children. Additionally, our Appleton Clinic provides dental care to students through a program with the Appleton Area School District.

Partnership Community Health Center appreciates the Wisconsin legislature's attention to addressing oral health access issues. As leaders in the oral health care safety net, Community Health Centers know that oral health is whole-body health. The health of our mouths is vital to our ability to consume food, drink water and communicate. Beyond healthy teeth, oral health includes being free of chronic oral and facial pain, treatment of certain oral cancers, as well as other disorders and diseases.

A 2015 Wisconsin Department of Health Services (DHS) survey found 15% of Wisconsin adults had untreated tooth decay, 17% had gum disease, and 16% needed treatment for oral decay, abscesses, or lesions.<sup>1</sup> The same study found one in five Wisconsin adults also reported having an unaddressed need for dental care. Partnership Community Health Center sees an urgent need to address barriers to oral health care and improve outcomes. For example:

- A current wait list of New Patients seeking care that far exceeds our capability to schedule due to treatment plans of current patients not completed. If the Dental Therapist bill were to pass, the Dental Therapist could treat many of the cases of the open treatment plans and permit the Dentist to focus on the complex cases, therefore completing treatment plans and ultimately leading the capability of seeing new patients.

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<sup>1</sup> Yang, A. and Olsen, M. (2015) The Oral Health of Wisconsin Adults. Wisconsin Department of Health Services. Retrieved from <https://www.dhs.wisconsin.gov/publications/p01074.pdf>



The Dental Therapy bill would allow Community Health Centers to continue advancing access to oral health by incorporating dental therapists into the dental team model. We believe that licensure of dental therapists in Wisconsin would allow Community Health Center dentists to focus on the most complex procedures, while dental therapists would assist in routine treatment, check-ups, and other services within their scope, *without sacrificing quality of care*. Adding dental therapists could shorten wait time for patients, provide cost-effective preventive and routine restorative care, and improve community health.

If the Dental Therapist bill becomes law, Partnership Community Health Center has Dental Hygienists in each of our 3 locations that are interested in becoming Dental Therapists. With your support of Dental Therapists, we anticipate that these changes could lead to the following outcomes:

- Reduction of New Patient wait lists therefore serving more people
- Completion of Treatment Plans in a reduced time resulting in a healthy mouth.
- Increased integration of our medical patients to dental services
- Reduction of wait times for a restorative procedure

Partnership Community Health Center greatly appreciates the bipartisan support for licensure of dental therapy. Thank you for the opportunity to share information regarding the potential benefits for Community Health Centers and our patients. We respectfully ask for your support of SB 689.

Sincerely,

*Tracey M Losse*

Tracey M. Losse RDH, BS

Oral Health Director

Partnership Community Health Center



Improving health. Improving lives.

December 7, 2023

**To:** Chair Cabral-Guevara  
Members of the Senate Committee on Health

**RE:** In support of Dental Therapy (Senate Bill 689)

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Chair Cabral-Guevara and Members of the Committee, thank you for the opportunity to provide support for Dental Therapy on behalf of Access Community Health Centers and for holding a hearing on Authorizing Licensure of Dental Therapists.

My name is Joanne Holland, the Chief Financial Officer of Access. For the past 20 years, I have worked to establish, develop and grow our dental practice so that we could address the need for dental care in southcentral Wisconsin. Each year, Access provides dental care to 20,000 people. We have clinics in Dodgeville, Madison and Sun Prairie. We also have a school-based dental program that includes restorative care. Access serves people from over 12 counties.

I support the Dental Therapy bill as one tool to improve access to oral health and improve oral health outcomes for patients. Dental Therapists will help all members of the oral health team to be efficient and allow Dentists to focus on the most complex care. Dental Therapists are highly trained professionals who will graduate from accredited programs. They will practice under the direct or general supervision of a Dentist. Authorizing licensure of Dental Therapists in Wisconsin will allow us to adapt our dental practice with a workforce that will have a greater likelihood of being sustainable over time and provide the access to care and continuity thereof that our community deserves.

The Dental Therapy Profession offers the potential of a meaningful career path for dental professionals that complements that of the Dentist. As an example, our Dodgeville Clinic currently has 3 dentists, and it may more than a year before we are able to add a fourth dentist. Yet, this practice is an excellent example of where a provider mix that included a Dental Therapist would be optimal, especially if the candidate trained in Fennimore at Southwest Wisconsin Technical College. Our patients, like all of us, have a range of dental care needs. By having a range of professionals available to treat our patients, Access and other dental providers will be better positioned to meet the needs of our community. Access' dentists are highly trained professionals who are skilled in performing complex procedures such as root canals, crowns, dentures and extractions. While some of our patients need those services, a Dental Therapist would offer capacity for less intense needs that are instrumental to maintaining one's oral health.

Our Dodgeville Dental Clinic will treat over 3,000 patients this year. Based on the number of calls we receive and community data, we estimate that at least 3,000 more people need our services in the area surrounding Dodgeville. Many of our patients travel more than one hour to reach our clinic. The clinic

manager has gas cards available because sometimes our patients have to travel so far that they run low on fuel and may not have the funds to otherwise return home. The Dental Therapy profession could help alleviate the problem of how far people have to travel as there would be more dental professionals available.

I will also add that from the perspective of one's career pathway, Dental Therapy represents a wonderful opportunity for a someone already connected to the dental field who would like to expand their skillset without having to relocate to a dental school. Access already has several staff who have trained at the technical college and see additional training in Dental Therapy as the potential for natural augmentation of their career.

The examples I offered today highlight needs experienced by people who live in a rural setting. I also want to state that Dental Therapy would be beneficial at all of Access' locations and would likely provide similar benefits in an urban setting as well.

At Access Community Health Centers, we are especially excited to see multiple bills focusing on oral health, including the new interstate licensure compact, funding for oral health training programs, and a focus on the rural workforce.

Thank you for the opportunity to provide support for Dental Therapy on behalf of Access Community Health Centers and our patients, and for your consideration of Dental Therapy legislation.

Thank you.

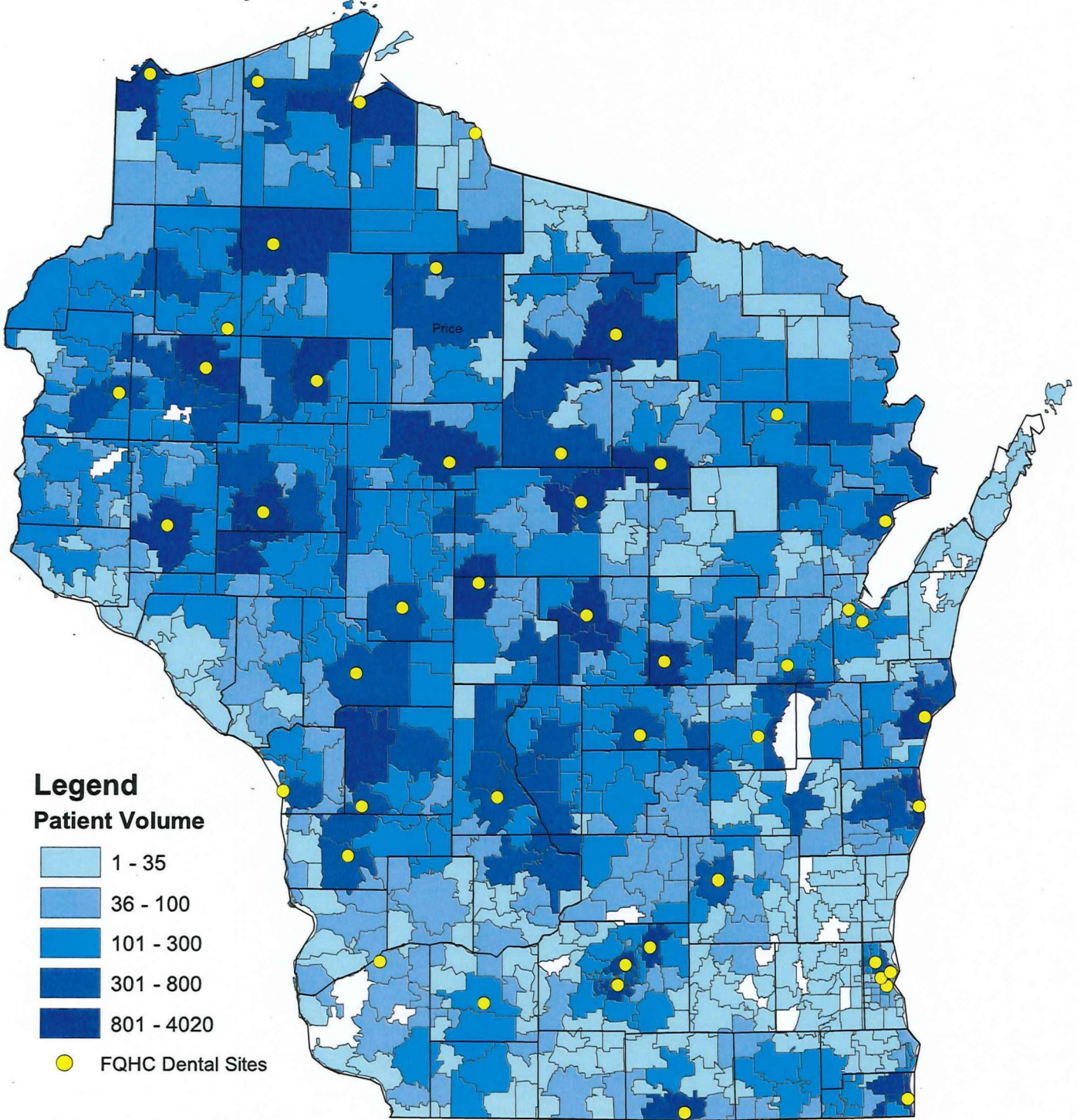
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**CONTACT:**

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Chief Financial Officer  
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# Dental Patients Treated by Zip Code Calendar Year 2020

Federally Qualified Health Centers with on-site Dental



## Legend

### Patient Volume

- 1 - 35
- 36 - 100
- 101 - 300
- 301 - 800
- 801 - 4020
- FQHC Dental Sites

### Dental Activity by Calendar Year

Categories	2018	2019	2020
<i>Patients</i>	158,400	169,182	123,930
<i>Visits</i>	415,881	436,816	283,392
<i>Average Enc/pt</i>	2.63	2.58	2.29

Map prepared August 2021  
by Family Health Center of Marshfield, Inc.

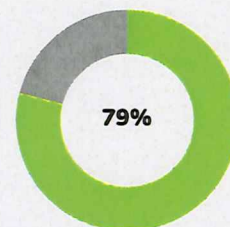
# WHAT IS A COMMUNITY HEALTH CENTER?

January 2023

There are 19 federally-designated Community Health Centers in Wisconsin with more than 200 service delivery sites, serving nearly 300,000 patients.

## DID YOU KNOW?

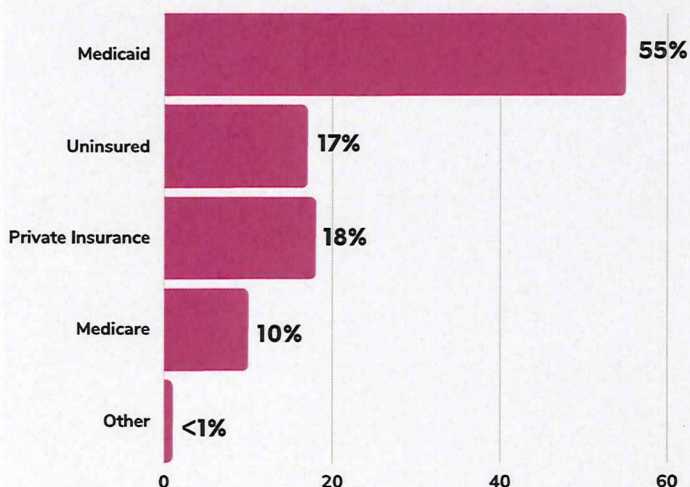
- Community Health Centers are clinics that provide **primary care services, including check-ups, behavioral health, dental care, substance use disorder treatment**, and enabling services like care coordination and community referrals.
- Wisconsin's 19 Community Health Centers are part of a national network of clinics that serve as the medical home for over **29 million people** of all ages in over 12,000 communities.
- Community Health Centers provide services to everyone **regardless of insurance status**, with fees adjusted based on a patient's ability to pay.
- Because of their special federal designation, Community Health Centers participate in unique programs like the **National Health Service Corps**, a program to place providers in areas without enough providers to serve the population.
- Community Health Centers receive **limited funding from public investments** to provide care for uninsured individuals and high-need populations (approximately one-third of revenue is state or federal grant funding).
- Every \$1 in federal investments generates \$7 in economic activity across Wisconsin, delivering over **\$652 million in economic activity annually**.



**79% of Community Health Center patients live below 200% of the Federal Poverty Line.**

The Federal Poverty Line in 2021 is \$26,500 for a family of four.

## Insurance Status of Wisconsin Community Health Center Patients



## WHAT MAKES COMMUNITY HEALTH CENTERS UNIQUE?

### Community Health Centers are:

- Dedicated to filling gaps in traditional health care systems by serving under-resourced communities
- Private or public not-for-profit organizations
- Located in or serving high need communities, based on federal requirements, which may be urban or rural areas
- Governed by a patient-majority Board of Directors
- Responsible for meeting performance and accountability requirements and publicly reporting clinical and financial data to the federal government

### Community Health Centers sit at the crossroads of health care and public health. They are not:

- Hospitals or health systems
- Free and charitable clinics
- Local public health departments

# COMMUNITY HEALTH CENTER WORKFORCE

January 2023

Wisconsin Community Health Centers employ over 1,300 medical, dental, and behavioral health staff providing primary care, behavioral health, and support services for 278,800 Wisconsin residents.

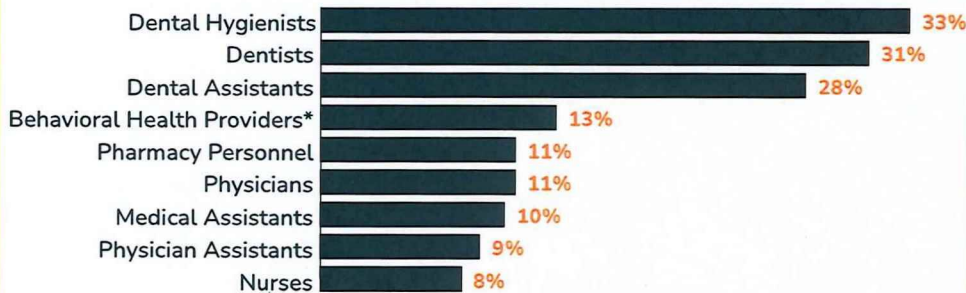
A top challenge to meeting community needs are critical workforce shortages inhibiting their ability to serve patients. **Staffing shortages for clinical providers such as Medical Assistants (MAs) and Dental Assistants (DAs), oral health staff, and behavioral health providers are most acute.**

Particularly in rural areas, the impact of each provider is especially significant. With one retirement or departure to another location, a whole community can lose access to care. Recruiting and retaining every single provider truly matters in a small community.

## COMMUNITY HEALTH CENTER EFFORTS

- Development of MA and DA apprenticeship programs for new entry-level providers
- Cross-sector collaboration to build a Teaching Health Center physician residency program
- Creation of career ladders to recruit and retain mission-oriented staff

### WI Community Health Center Provider Vacancy Rates (July 2022, N=10 CHCs)



\*Behavioral Health Providers include mental health and substance use treatment providers  
Source: WI CHC Workforce Survey, July 2022. Wisconsin Primary Health Care Association

The dental team includes Dentists, Dental Hygienists, and DAs. Community Health Centers report open positions for **more than 100 dental team members** across these provider types.

WPHCA encourages policymakers to **explore all avenues to reduce barriers to health professions training in order to increase the total number of new providers in primary care professions.** This includes investments in UW system schools and technical colleges to hire and retain faculty, partner with health care entities for clinical training, and eliminate wait lists.

## PUBLIC POLICY OPPORTUNITIES

- Pass Dental Therapy legislation in Wisconsin and provide funding for development of Dental Therapy academic programs
- Add funding and broaden eligibility for loan assistance programs for MAs and DAs
- Provide resources to increase exposure to health professions for high school students

Read WPHCA's complete Workforce Issue Brief online at <https://www.wphca.org/public-policy/issue-briefs-and-data>, which outlines additional efforts to strengthen the Community Health Center workforce and public policy opportunities.

# DENTAL THERAPY: AN OPPORTUNITY TO IMPROVE ORAL HEALTH CARE IN WISCONSIN

## WHAT IS A DENTAL THERAPIST?

A Dental Therapist is a mid-level provider, similar to a Physician Assistant in medicine.<sup>1</sup> They practice under the supervision of a Dentist and work in a team model with other oral health providers including Dental Assistants and Hygienists. Dental Therapists provide preventive and routine restorative care, including filling cavities, placing temporary crowns, and extracting baby teeth and adult teeth that are extremely loose. This allows Dentists to focus on the most complex care and work at the top of their license. Dental Therapists are not currently authorized to practice in Wisconsin.

## WHY SUPPORT DENTAL THERAPY?

Many Wisconsinites, especially individuals who are uninsured, low-income, or experience health disparities, face barriers accessing preventative oral health care. COVID-19 exacerbated existing challenges, as many patients needed to delay in-person care and clinics experienced record staff departures.<sup>2</sup>

Preventative oral health care is important for both children and adults. Studies show that when children receive preventive dental care, they miss fewer days of school, and adults can avoid missing work.<sup>3</sup> Tooth decay, pain, and poor oral health can also lead to expensive emergency room visits. The 2015 Wisconsin Healthy Smiles Survey found that ninth-grade students experiencing tooth or mouth pain two or more times in the prior year were more than twice as likely to receive lower grades in school compared to students experiencing pain less frequently.<sup>4</sup>

**ONLY 180,000 (30%) OF THE 590,000 WISCONSINITES UNDER 21 WHO ARE ENROLLED IN MEDICAID RECEIVED PREVENTATIVE DENTAL SERVICES IN 2022<sup>5</sup>**

**ONE-FIFTH OF WISCONSIN THIRD-GRADERS HAVE UNTREATED DENTAL DECAY AND 5% HAVE AN URGENT CONDITION CAUSING PAIN AND/OR INFECTION<sup>6</sup>**

The good news is that most oral health issues are preventable, if caught early. Authorizing practice of Dental Therapy will add options for new oral health team members, increase the efficiency of existing oral health staff, and help close the gap for needed preventative care in Wisconsin.

Wisconsin Community Health Centers provided dental care for 158,158 patients in 2022 and are dedicated to closing oral health care access gaps. Unfortunately, the wait time for a new patient to schedule preventative dental care at a Community Health Center is increasing. Primarily due to staffing challenges, some Community Health Centers are prioritizing appointments to established patients



and individuals with dental emergencies. Even for existing patients, dental appointments are often scheduled over six months out. Community Health Centers report it takes on average three months to hire a Hygienist, and over double that timeline, nearly six months, to hire a Dentist.<sup>7</sup> Many patients do not have options for other sources of dental care, which means they are delaying care, and that dental concerns are exacerbated by the time they see a provider.

The majority of Wisconsin counties are dental Health Professions Shortage Areas (HPSAs); the Health Resources and Services Administration estimates that an additional 275 Dentists would be needed to remove shortage designations statewide and meet a recommended 5,000:1 population to dentist ratio.<sup>8</sup>

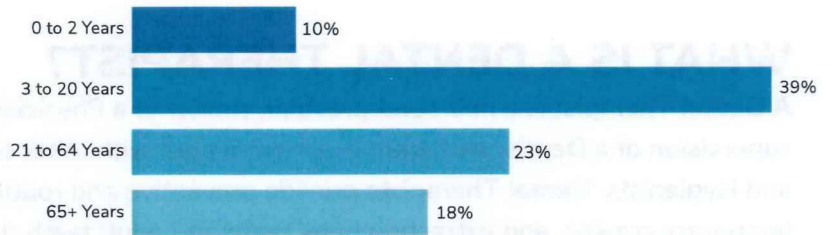
## WHAT IS IN WISCONSIN'S DENTAL THERAPY LEGISLATION?

2021 Senate Bill 181 / Assembly Bill 169 was introduced by Sen. Felzkowski and Rep. Plumer, and co-sponsored by a bipartisan group of 33 legislators. In the 2021-2022 legislative session, over 25 organizations registered in support of the legislation; the Wisconsin Dental Association was neutral on the bill. Organizations such as the Badger Institute, Children's Hospital, Delta Dental, Rural Wisconsin Health Cooperative, technical colleges, Disability Rights Wisconsin, Tribal clinics, and Kids Forward were supportive. Senate Bill 181 passed unanimously in the Senate; no hearing was held in the Assembly.

## % Medicaid Members with any Dental Service by Age Group in Wisconsin

(DHS 2022)

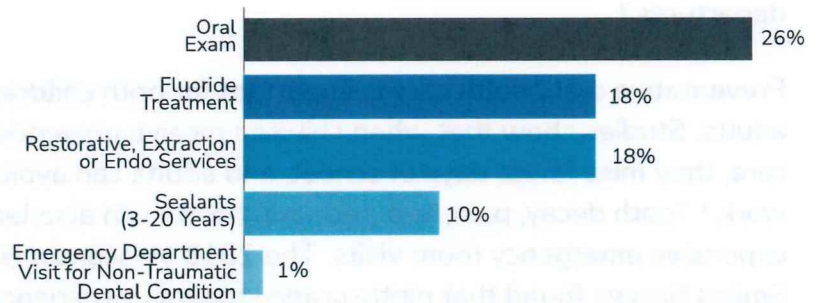
Less than 40% of Medicaid enrolled children (ages 3-20) received dental services in 2022. Working age adults and seniors were even less likely to have received dental services.



## % Total Medicaid Members by Receipt of Oral Health Service by Type in Wisconsin

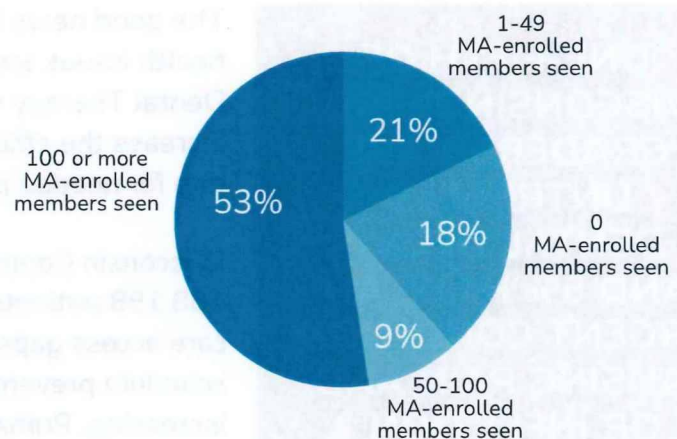
(DHS 2022)

26% of Medicaid members received an oral health exam and 28% of members received preventive services (Fluoride treatment and Sealants for children 3-20).



## Wisconsin Medicaid Enrolled Dentists and Medicaid Patient Care Provided

(DHS 2022) N=878 Dentists

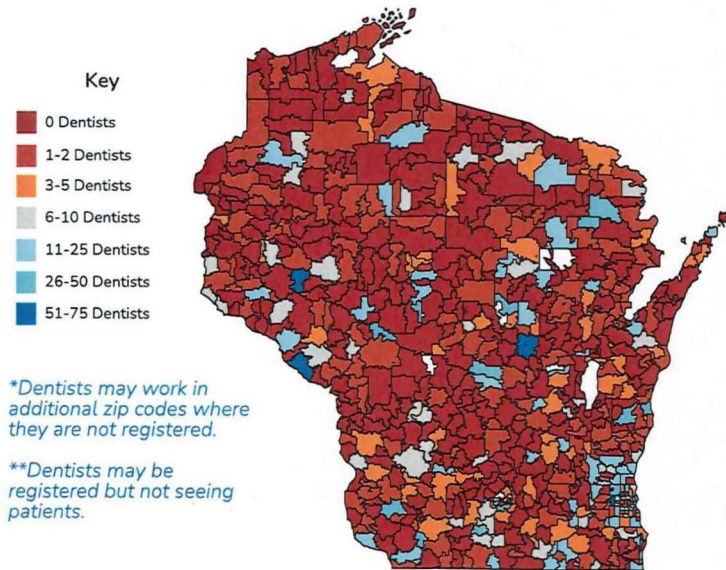


**NEARLY ONE-FIFTH OF MEDICAID-ENROLLED DENTISTS DID NOT SEE MEDICAID PATIENTS<sup>8</sup>**

## Number of Dentists Licensed by Zip Code in Wisconsin

(DSPS 2023) N=3,444 licensed dentists

53% of zip codes in Wisconsin have 0 Dentists registered.  
An additional 22% of zip codes have less than 2 Dentists.<sup>9</sup>



## TRAINING AND SUPERVISION REQUIREMENTS

The legislation outlines a set of procedures that Dental Therapists may perform, subject to a collaborative management agreement with a Dentist. Once a licensed Dental Therapist has provided services for at least 2,000 hours, they may provide care under the general supervision of a Dentist. Dental Therapists must also, under the bill, either 1) limit their practice to federally defined dental shortage areas or 2) practice in settings where at least 50% of their patient base consists of certain specified populations such as individuals enrolled in Medicaid, uninsured patients, veterans, and individuals with disabilities. They must also graduate from an accredited training institution, or, if unaccredited, receive approval from the Wisconsin Dentistry Examining Board. Fortunately, several technical colleges in Wisconsin are interested in starting Dental Therapy programs.

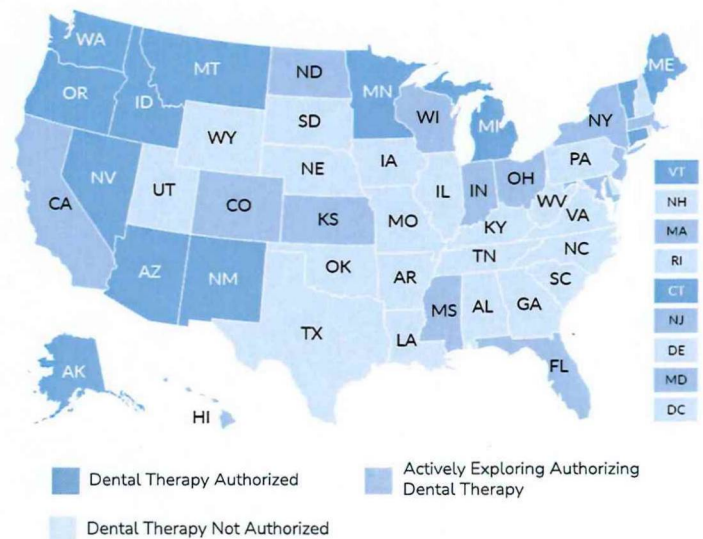
## WHERE DO DENTAL THERAPISTS PRACTICE IN THE U.S.?

Dental Therapists are authorized to practice in at least some settings in 13 states.<sup>10</sup> Over a dozen other states are actively exploring authorizing Dental Therapy.

## IS THERE EVIDENCE SHOWING DENTAL THERAPISTS PROVIDE HIGH-QUALITY CARE?

Yes! Studies of models in Alaska, Minnesota, and other states suggest that Dental Therapists, while working within a set of allowable determined procedures, offer the same quality of care as Dentists.<sup>11</sup>

## Dental Therapy Policies by State<sup>12</sup>



<sup>1</sup> National Partnership for Dental Therapy. *About Dental Therapy*. 2022.

<sup>2</sup> National Association of Community Health Centers. *Current State of the Health Center Workforce*. 2022.

<sup>3</sup> Wisconsin Oral Health Coalition. *Wisconsin's Roadmap to Improving Oral Health - 2020-2025*. 2020.

<sup>4</sup> Wisconsin Department of Health Services. *Oral Health Program. Wisconsin Healthy Smiles Survey*. 2015.

<sup>5</sup> Centers for Medicare & Medicaid. *Early and Periodic Screening, Diagnostic, and Treatment*. 2022.

<sup>6</sup> Wisconsin Department of Health Services. *Oral Health Program. Healthy Smiles Healthy Growth*. 2018

<sup>7</sup> Wisconsin Primary Health Care Association. *Wisconsin Community Health Center Workforce Report July 2022*.

<sup>8</sup> Wisconsin Department of Health Services. *Number of Dentist FTEs Needed to Reduce Significant Shortages for Medicaid Members*. 2019.

<sup>9</sup> Department of Safety and Professional Services. *List of Dentists Registered in Wisconsin*. 2023.

<sup>10</sup> Oral Health Workforce Research Center. *Authorization Status of Dental Therapists by State*. 2020.

<sup>11</sup> Health Resources & Services Administration. *Supporting Dental Therapy through Title VII Training Programs: A Meaningful Strategy for Implementing Oral Health Care*. 2022.

<sup>12</sup> PEW. *National Momentum Building for Midlevel Dental Providers*. Updated January 2023.



Ascension

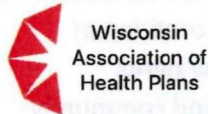


## Support for Legislation Authorizing Licensure of Dental Therapists (AB 668 / SB 689)

The connection between oral health and overall health is well documented, and Wisconsin is lagging in several oral health indicators, especially for children. Advocates agree that authorizing licensure of Dental Therapists in Wisconsin would directly improve access to care in our state. Recent annual data show that less than one-third of individuals under the age of 21 enrolled in Wisconsin's Medical Assistance program received preventative dental services. There are numerous documented cases across the country of patients dying because of preventable dental infections going untreated, and sadly many patients experiencing oral health pain and decay miss work and school due to preventable oral health issues. Further, untreated oral health issues cause costly emergency room visits. In Wisconsin, nearly 23,000 emergency room visits for preventable dental conditions were reported in 2019.

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 currently 13 states that have authorized the practice of Dental Therapy across the country and it's time Wisconsin is added to this list of innovators. The coalition of organizations supporting Dental Therapy in Wisconsin is broad, including disability rights organizations, a free-market think tank, primary care clinics, hospitals, insurers, and community-based service providers. We encourage state lawmakers to pass Dental Therapy legislation as an important tool to improve oral health in Wisconsin. The undersigned draw your attention to the following elements of the legislation:

1. Dental Therapists are intended to be a member of the dental team and not work independent of a Dentist. Wisconsin's Dental Therapy legislation requires a licensed Dental Therapist, after the completion of their education and receiving their license, to practice under direct or indirect supervision for 2,000 hours before they can practice under general supervision. Dental Therapists are required to enter into a collaborative management agreement with a licensed Dentist. This allows the Dental Therapist and Dentist to collaborate on treatment planning and the provision of care. This model is working well in Minnesota with more than 100 licensed Dental Therapists practicing across the state since the first dental therapist graduates in 2011 became licensed.
2. Dental Therapists are well trained and educated. The Commission on Dental Accreditation (CODA) adopted standards for Dental Therapy education in 2016. CODA ensures Dental Therapy training programs educate their graduates to meet a level of competency in the services which they will be providing. CODA has recently granted accreditation to programs in Alaska, Oregon, and Minnesota.
3. To support improved access to dental care for those populations that are currently most severely impacted by provider shortages and poor oral health outcomes, Wisconsin's Dental Therapy legislation requires that Dental Therapists practice in a dental health professional shortage area or provide care to special populations. "Special populations" as defined by the bill include a patient base where at least 50% of clients served are from any of the following groups: Medical assistance patients, uninsured patients, patients at free and charitable clinics, patients at Federally Qualified Health Centers, individuals who reside in long term care facilities, patients who are members of federally recognized tribe or band or those residing on tribal lands, veterans, and patients that have a medical disability or chronic condition limiting their access to dental care.



Wisconsin Chapter



- Dental Therapists, similar to Physician Assistants 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 have 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% of new patients seen by Dental Therapists were publicly 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.
- 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. Several technical colleges have already expressed interest in developing training programs once Wisconsin's legislation is passed.

For these reasons, our organizations 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 authorize Dental Therapy in Wisconsin and sign on in support of AB 668 / SB 689.** Sincerely,

- Access Community Health Centers
- American Family Children's Hospital
- Alliance of Health Insurers
- Anthem Blue Cross Blue Shield of Wisconsin
- Ascension
- Bad River Health and Wellness Center
- Badger Institute
- Disability Service Provider Network
- Children's Health Alliance of Wisconsin
- Children's Wisconsin
- Delta Dental of Wisconsin
- Kids Forward
- Minnesota Dental Therapy Association
- NorthLakes Community Clinic
- Oneida Nation
- Penfield Children's Center
- Rural Wisconsin Health Cooperative
- Sixteenth Street
- Social Development Commission
- Southwestern Wisconsin Community Action Program, Inc.
- UW Health
- UW Health Kids
- The Arc Wisconsin
- Wisconsin Oral Health Coalition
- Wisconsin Association of Free and Charitable Clinics
- Wisconsin Association of Health Plans
- Wisconsin Association of School Nurses
- Wisconsin Assisted Living Association
- Wisconsin Association of Local Health Departments and Boards
- Wisconsin Chapter American Academy of Pediatrics
- Wisconsin Dental Hygienists' Association
- Wisconsin Hospital Association
- Wisconsin Primary Health Care Association
- Wisconsin Public Health Association



**SB-689 - Licensure of Dental Therapists**  
**WAFCC Written Testimony**  
**Senate Committee on Health**  
**December 7, 2023**

Chairperson Cabral-Guevara, Vice Chair Testin, and Members of the Senate Committee on Health, thank you for the opportunity to submit written testimony today in support of SB-689 – Licensure of Dental Therapists. My name is Dennis Skrajewski and I’m the Executive Director of the Wisconsin Association of Free & Charitable Clinics. Our small, non-profit organization exists to support the 95 free and charitable clinics (FCCs) throughout the State. These 95 clinics provide medical, dental and behavioral health care to >160,000 uninsured and underinsured Wisconsinites annually.

As you know, the state of Medicaid Dental services in Wisconsin is “challenged”. Access to Medicaid Dental services is quite limited and in many cases, unavailable to the neediest of our State. We believe that correcting this situation will require multiple, complementary initiatives and that utilizing Dental Therapists to increase cost-effect access to care is part of the overall solution. If allowed to practice in Wisconsin, Dental Therapists could:

- provide cost-effective routine dental care,
- free up their supervising dentists to provide more complex services,
- improve access to care, particularly in underserved communities, and,
- reduce disparities in accessing dental services.

I’m confident that, if authorized in Wisconsin, Dental Therapists would thrive in our free and charitable clinics. Our low-cost environments are perfect to effectively leverage these cost-effective, mid-level providers to extend dental care into the underserved in our communities.

We support the enhanced training and experiential language in this new bill and strongly support its passage. Thank you Chairperson Cabral-Guevara, Vice Chair Testin, and Committee Members!

Respectfully,

*Dennis Skrajewski*

Dennis Skrajewski, PA, MBA, FACHE  
Executive Director  
Wisconsin Association of Free & Charitable Clinics  
1405 Capitol Drive, Unit C, #210  
Pewaukee, Wisconsin 53072



**To: Senate Committee on Health**  
**From: Matt Crespin, MPH, RDH, Executive Director, Children's Health Alliance of Wisconsin**  
**Date: December 7, 2023**  
**Re: Support for SB 689 – licensure of dental therapists**

Good morning Chair Cabral-Guevara and members of the committee. My name is Matt Crespin and I serve as the executive director at Children's Health Alliance of Wisconsin (Alliance). Thank you for the opportunity to share with you remarks in support of Senate Bill 689. We know that dental therapists are one of the many tools in a toolbox that can impact both access to care and oral health in our state. Dental therapy is of course not a silver bullet, and other policy changes and financial investments must be made to address access to care in Wisconsin. Our organization has long advocated for the creation of dental therapists in Wisconsin and has been at the forefront on this issue for many years.

The Alliance is a statewide organization, affiliated with Children's Wisconsin, focused on raising awareness, mobilizing leaders, impacting public health and implementing programs proven to work. The Alliance has six key initiatives including environmental health, emergency care, medical home, injury prevention, grief and bereavement and oral health. For more than 25 years, our oral health program has focused on improving access to quality oral health services. In collaboration with the Wisconsin Department of Health Services and Delta Dental of Wisconsin, we administer the Wisconsin Seal-A-Smile (SAS) program. Wisconsin SAS provides school-based preventive oral health services to more than 75,000 children in approximately 1,000 schools across the state. We thank the legislature for their continued dedication to this program through general purpose revenue but we must do more.

Every year, 1 in 4 children we see have oral health disease beyond what our programs can provide. Imagine, if you would for a minute, how difficult it would be to sit here and concentrate if you had a toothache. Now imagine how difficult it is for a 6-year-old child to focus and learn if they are sitting in class with mouth pain. To help alleviate this, the creation of dental therapists would allow for necessary follow up care by our school-based programs to be provided right in schools by utilizing this new provider in an extremely cost effective manner.

Dental therapists in Wisconsin would be required to graduate from a dental therapy program accredited by the American Dental Association's Commission on Dental Accreditation (CODA). These highly educated providers will be able to provide care to patients in dental health professional shortage areas or to a patient base that is made up of more than 50 percent Medicaid enrollees, uninsured or underinsured patients, residents of long term care facilities, veterans or patients with disabilities that are challenged accessing care. Dental therapists are well equipped to see all residents of Wisconsin; however, like other programs we support and manage, focusing efforts on those with the greatest challenge to accessing care will be critical. Dental therapists will work under direct supervision of a dentist and under a collaborative management agreement for their first 2,000 hours and will then be able to work under general supervision while maintaining this collaborative agreement. This will allow dental therapists to work alongside our school-based prevention teams to treat the nearly 20,000 children we identify with additional needs annually.

Our SAS programs spend an immense amount of time working on case management and only a fraction of the 20,000 children needing restorative care actually obtain it. A variety of factors play into this; however, the

addition of a dental therapist to these school-based teams would virtually eliminate most of these factors and ensure children get the appropriate follow up care needed. Right next door in Minnesota, programs like Children's Dental Services have realized this and integrated dental therapy into their school-based model. This makes it easier and more efficient for children to obtain necessary oral health restorative care. In a recent visit to Minnesota, one of the takeaways I had about dental therapy was how dental therapists work as part of the dental team. The therapists who I spoke with discussed working under general supervision through a collaborative management agreement and explained the amount of collaboration they did on a regular basis with the dentist they worked with. This is a commonly misunderstood aspect of dental therapy; many believe dental therapists are meant to work completely independent or even replace dentists. This could not be any further from reality. This collaborative model is critical and mirrors what is being proposed in Wisconsin.

The Commission on Dental Accreditation (CODA) adopted standards for dental therapy education in 2016. This was a critical and important step for the profession. It is important to understand that these standards were developed after the first dental therapy schools in the US were established. The standards were developed using the standards the Minnesota Board of Dentistry established to initially allow this type of training in their state. This process included weighing testimony from the dental community at large and also included the Federal Trade Commission weighing in on the original proposed standards as they were overly restrictive. Ultimately CODA approved the standards which are now in place. CODA is also responsible for accrediting all dental and dental hygiene educational institutions across the country and is affiliated with the American Dental Association. CODA is the only authorized entity by the US Department of Education to accredit dental education institutions. The commission is made up of predominately dentists who create, update and monitor the standards. CODA requires that graduates meet a level of competency in all areas outlined in the standards. This also gives the public assurances that graduates of CODA institutions are able to provide high-quality care. Additionally, dental therapists are required to complete clinical licensure exams. Currently in Minnesota, dental therapists are required to pass the same portions of the exam dental students pass for the procedures they are able to provide. Unfortunately due to a change in our bill in Wisconsin this session, we would initially eliminate the ability for about half of the current practicing dental therapists in Minnesota to practice here until their educational institutions complete the CODA accreditation process which is currently underway. Upon achieving CODA accreditation this issue will become moot and all graduates from Minnesota will be able to eventually practice in Wisconsin.

Dental therapists in Minnesota are without question making an impact. Since 2017, more than 175,000 patient visits have occurred and data shows 80 percent of patients being seen are publically insured. Dental offices in Minnesota that employ dental therapists are able to decrease wait times, see more patients and increase revenue. Dental therapy has been practiced across the globe for many years and in the past several years, multiple states have authorized the practice of dental therapy including Michigan, Nevada, Connecticut and Arizona. It is time for Wisconsin to continue to be an innovator in the dental delivery model in the U.S. and join this movement that other states have taken the lead on.

The data, high quality educational standards and ability to improve oral health in Wisconsin is why the Alliance supports SB 689. Our goal is to find a way to get the most efficient care to the thousands of children we identify with disease every year. There are no published studies or peer reviewed literature that show any negative effects you might hear about regarding dental therapy. We applaud the legislature and this committee for addressing this important issue. Finally, we give immense praise to Senator Felzkowski for her persistence and dedication over the past seven years to finding common ground on this issue to ensure Wisconsin becomes the next state to authorize dental therapy in the nation.

Respectfully submitted: Matt Crespin, MPH, RDH, Executive Director, Children's Health Alliance of Wisconsin, [mcrespin@chw.org](mailto:mcrespin@chw.org), (414) 337-4562.

# DENTAL PROFESSIONALS COMPARISON



## GENERAL DENTIST

**Licensure/  
Certification**

License required  
Biannual renewal that includes proof of continuing education

**Education**

Undergraduate degree + Graduation from a Commission on Dental Accreditation (CODA) accredited dental school (approx. four years)

**Where and what type of care is provided**

Dentists usually work in a dental clinic. They can provide the full scope of dental procedures and treatments with some pursuing specializations such as orthodontics and endodontics.



## DENTAL THERAPIST

License required  
Biannual renewal that includes proof of continuing education

At least three years post-secondary academic training from a CODA accredited Dental Therapy Program.

Dental therapists provide care in offices and community settings, such as schools, senior centers, and mobile clinics. They are specifically trained to work in dental shortage areas and provide routine dental care, including exams and filling cavities. They work as part of a dentist-led team complementing the work of dental hygienists and DAs.



## REGISTERED DENTAL HYGIENIST (RDH)

License required  
Biannual renewal that includes proof of continuing education

Graduation from a CODA accredited dental hygiene program (associates or bachelors degree).

Dental hygienists specialize in preventing disease. They focus on procedures like sealants, fluoride varnish, preventing and treating gum disease and promoting good oral health practices. They work in clinic or community settings such as schools, medical offices and nursing homes.



## EXPANDED FUNCTIONS DENTAL AUXILIARY (EFDA)

One time certification with 12 required continuing education credits every two years

Graduation from a CODA accredited dental assisting program that includes additional EFDA training.  
Must have 1,000 hours of on the job experience or be a certified DA.

EFDAs are DAs that are trained in a handful of additional procedures to improve efficiency in a dental office. They work in dental offices or community sites. EFDAs components of the treatment a dentist provided (e.g., dentist drills tooth, EFDA fills the tooth, dentist checks final work).



## DENTAL ASSISTANT (DA)

None required, can become certified

In Wis. no education is required. Training can be provided on the job or obtained at a dental assisting education program.

DAs work in offices and community settings, supporting other providers and administering basic services. They often serve as a second set of hands for another member of the dental team.

DA educational programs do not need to be CODA accredited and may offer the ability to become a certified DA.



# DENTAL PROFESSIONALS COMPARISON



**GENERAL  
DENTIST**

## Common procedures

Comprehensive diagnosis/treatment planning, fillings, root canals, bridges, surgical extractions.

## Required supervision

None

## Approximate number of procedures

**400**



**DENTAL  
THERAPIST**

Diagnosis and treatment planning within their scope. Some prevention (topical fluoride, sealants, etc.), oral health education, fillings, non-surgical extraction of baby teeth.

Works under direct supervision of a dentist for the first 2,000 hours and then can work under general supervision of a dentist. Must have a collaborative management agreement with a dentist.

**95**



**REGISTERED  
DENTAL  
HYGIENIST  
(RDH)**

Oral health assessment, x-rays, teeth cleaning and polishing, scaling below the gums, oral health education, prevention (topical fluoride, sealants, silver diamine fluoride, etc.).

Works under direct supervision of a dentist and in some settings may work independent of a dentist within their scope.

**45**



**EXPANDED  
FUNCTIONS  
DENTAL  
AUXILIARY  
(EFDA)**

Under the delegation and supervision of a dentist, can complete procedures such as: placing and finishing a filling after a dentist drills, placing sealants, taking impressions, removing cement from crown etc.

Works under direct supervision of a dentist.

**10**



**DENTAL  
ASSISTANT  
(DA)**

Take and develop x-rays, chairside assistance to other dental providers, impressions, sterilization, patient aftercare instruction.

Works under direct supervision of a dentist.

**30**



**Dr. Morna K. Foy, President**

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**Senate Bill 689  
Senate Committee on Health  
December 7, 2023**

Chairperson Cabral-Guevara and Members of the Committee:

The Wisconsin Technical College System (WTCS) asks for your support for Senate Bill 689. These bills provide for the licensure of dental therapists, creating a pathway to expand access to dental care and address dental access shortages that are persistent throughout the state.

As providers of dental assistant and dental hygienist programs, WTCS colleges are well positioned to be a key provider of dental therapy education and training. Wisconsin's technical colleges currently offer dental hygienist programs accredited by the American Dental Association's Commission on Dental Accreditation (CODA) and can build upon existing educational infrastructure to prepare dental therapists using methods that are industry-aligned and responsive to community needs.

Please support Senate Bill 689 and the opportunity provided to expand access to dental care in Wisconsin. Thank you for your consideration.



December 7, 2023

Wisconsin State Senate  
Committee on Health

**Testimony in favor of SB 689: Licensure of Dental Therapists**

Dear Chairwoman Cabral Guevara, Vice-Chair Testin and Members of the Committee:

My name is Annie Meece and I serve as Director of Dental Programs and Clinics on behalf of Ascension Wisconsin, thank you for the opportunity to submit this testimony in support of SB 689, Licensure of Dental Therapists. Ascension Wisconsin operates 17 hospitals and more than 100 related clinics and other health care facilities from Racine to Appleton. We employ more than 1,100 primary and specialty care clinicians and serve 629,000 unique patients annually. We are committed to providing quality care and ensuring that the unique needs of our patients and larger communities are being met. This commitment extends beyond medical care in Milwaukee and Racine. Ascension Wisconsin provides dental care in both Milwaukee and Racine through the Ascension Wisconsin Smart Smiles program and Ascension Seton Dental Clinic.

Ascension Wisconsin supports SB 689, which would create a new licensure for dental therapists in Wisconsin, allowing dental care teams to operate with greater efficiency and allowing dentists to focus on the most complex patient care. We believe licensed dental therapists will allow each member of our care team to practice at the top of his/her license while expanding access to preventive and restorative dental care to the many vulnerable patients who seek care through Ascension's dental services.

Ascension currently operates two critical dental programs, Ascension Smart Smiles and Seton Dental Clinic. Our care team regularly witnesses how limited access to dental care negatively impacts the health of children, families and our communities at large. The impact is especially acute for people who are most vulnerable in our communities, including those living in poverty. As of November 1, 2023, Kaiser Family Foundation reports that Wisconsin currently has 180 Health Provider Shortage Areas, leaving over 1.6 million without adequate dental resources. An estimated 279 practitioners are needed to fill this gap.

Smart Smiles and Seton Dental Clinic teams currently include 10 dental assistants, 10 full-time dental hygienists and 3 full time dentists. In 2022, the Smart Smiles served approximately 12,000 students in 107 Milwaukee schools and over 800 students in 10 Racine schools each year, making this program Wisconsin's largest provider of school-based oral health care. Smart Smiles provides students preventive care including screening, sealants, and fluoride application.

Nearly 40% of Smart Smiles patients have untreated cavities and other early restorative needs. Another 1,000 students annually have acute dental needs that have progressed to the point where they need urgent treatment to receive care for abscess, infection and tooth extractions.



These patients are often referred into Ascension Seton Mobile Dental Clinic, which provides follow-up care at the schools for students without a dental home.

The Ascension Seton Dental Clinic has two locations in Milwaukee; within St. Francis Hospital and at the Outreach Community Health Center. The Seton Clinic team provides urgent care dental services, which include examinations, x-rays, cavity treatment, basic extractions and identifying other oral health needs or emergencies to those living in poverty. Many patients seen at these clinics are referred directly from our emergency department. In 2022, we served over 600 un- and underinsured patients with acute needs at these clinics.

Adding a dental therapist to our teams would allow our Ascension Smart Smiles and Seton Clinic to increase the breadth and talents of our dental care teams, ensure providers can practice at the "top of licensure" in a manner similar to our medical clinics, and expand our ability to reach more patients in need of scarcely available dental services. Dental therapists are needed now, more than ever, as we continue to experience professional shortages and see great need for care within our patient population.

Thank you for your consideration of this new licensure option. We respectfully urge you to support SB 689 to create a licensure for dental therapists, who could work under the supervision of and in collaboration with a dentist, as it is one way to quickly increase access to care.

Thank you for the opportunity to provide this ~~written~~ testimony. If you have any questions or if we can provide additional information, please contact Tracy Wymelenberg, Director, Advocacy and Government Relations, at [tracy.wymelenberg@ascension.org](mailto:tracy.wymelenberg@ascension.org).



**TO:** Senate Committee on Health  
**FROM:** Michael Boeder, Chief Operating Officer, Chorus Community Health Plans  
**DATE:** December 7, 2023  
**RE:** Support for Dental therapy licensure – SB 689

Chair Moses and members of the Committee,

Thank you for holding the hearing today on AB 668 which would authorize the practice of dental therapy in Wisconsin. My name is Mike Boeder and I'm the Chief Operating Officer at Chorus Community Health Plans (CCHP), an affiliate of Children's Wisconsin. We appreciate the work of the bill authors, including Senator Felzkowski and Representative Plumer, and their passion for improving oral health care access in Wisconsin. I look forward to sharing brief written remarks outlining our support for dental therapists in Wisconsin.

CCHP is a mission centric licensed Health Maintenance Organization and since our inception in 2006 we have been dedicated to providing our members with access to high quality health care with community partners and providers of care to improve health outcomes and to design unique programs that are specifically designed to support our member's needs. We believe health starts in our communities, our homes, schools and workplaces. We work to strengthen and support our communities through strategic partnerships focused on increasing access to fresh food and healthy lifestyles by offering healthy shopping classes at local grocery stores, discounts on fresh produce and access to free registered dietician consultations. We offer free transportation options to members with complex needs to ensure they receive the care they need, including transportation to dental services, if needed. We offer access to safe and affordable housing via our collaboration with Milwaukee County's Housing First Program and we establish employment connections by sponsoring events with W2 and career development organizations. We offer innovative care coordination programs for members with complex conditions and wellness programs in order to support new parents and their infants as well as to strengthen an individual's ability to improve their management of asthma, diabetes, behavioral health and smoking cessation. We also offer member advocates to provide personalized support to members, including the offering of a dental advocate whose role is to specifically support the dental needs of our members. In short, we are much more than the "average" insurance company.

Currently we serve 160,000 individuals and families across eastern Wisconsin in a variety of products with approximately 52% of our membership being kids and 48% being adults. CCHP serves 140,000 members participating in the BadgerCarePlus program in 29 counties (making us the 3<sup>rd</sup> largest HMO serving the Medicaid population in the state and the largest in southeastern WI), nearly 3,000 youth in foster care in 6 southeastern Wisconsin counties through the Care4Kids program and more than 16,000 individual and family plan members in 15 counties in eastern Wisconsin through Marketplace coverage both on and off the federal Exchange. And in 2022, CCHP also began offering stand-alone dental plans for kids and adults.

While CCHP utilization rates for dental care routinely surpass that of other HMO's, we still face many challenges in supporting our members' access to dental care, notably in the BadgerCarePlus Medicaid program in particular. More than 1 million Wisconsinites receive dental coverage through Medicaid, however just over one-third of dentists in our state are able to care for these patients. Further, nationally, Wisconsin ranks at the bottom in access to dental care for kids covered by Medicaid.

Each year in Wisconsin, more than 80,000 kids under age 5 who are covered by Medicaid visit a physician, but don't visit a dentist. Within CCHP, 48.2% of our covered children and adolescents saw a dentist in 2022. This means that over half (51.8% or 38,412) of our members ages 2 - 20 did not have any contact with a dentist during the year. We believe that this statistic could be significantly improved if dental therapists were available and accessible. We know that strong oral health is critical to overall health, and especially important to patients with diabetes, heart disease, pregnant women and children.

Poor oral health, including tooth decay and gum disease, can cause significant pain resulting in days of missed work or school, and may result in potential infection or other disease. As we all know, it's *important to start good oral health habits early among children* as poor oral health can impact a child's ability to learn, their speech, overall nutrition and their social interactions. Lack of access to oral health care can result in individuals visiting the emergency department, which is costly and often does not address the underlying health issues. Importantly, many oral health conditions are preventable and dental therapists could be an important part of the solution to help individuals obtain timely and cost-effective care.

Adequate access to oral health care also helps reduce the likelihood of future poor oral health outcomes and keeps health care costs low. As a responsible steward of Medicaid program funding, we believe that efforts to increase access to lower cost preventive care as well as restorative services, like some of the care that could be provided by dental therapists, would be a smart investment in the overall health of our members. Licensed dental therapists working under a dentist's supervision could provide basic, yet important, restorative treatments, like filling cavities. They are trained to perform a limited number of restorative procedures, beyond the scope of a dental hygienist, which would allow dentists to focus on more complex care and treatment. Improving oral health care access requires a multi-faceted approach and several solutions. However, by working collaboratively with dentists, dental therapists could help provide much needed oral health care to some of our most vulnerable community members.

One example would be members who receive care as part of a school-based program. Currently when dental hygienists deployed in a school setting identify the need for follow up care, most often being restorations, we at times struggle to get these child members treated by a dentist in a timely manner. If dental therapists were allowed to practice in Wisconsin, a child would be able to obtain care from a dental therapist in a school setting, saving parents and caregivers time from having to leave work and allowing the child to receive care sooner. This lessens the likelihood that the child will develop more complex dental issues that when untreated or delayed cost the Medicaid program more for something that could have been easily addressed by a more efficient and safe model. Furthermore, allowing members to access appropriately trained providers like dental therapists might lead to a reduction of visits to the emergency department for dental pain which often can't be comprehensively treated in that setting leading to costlier, inefficient care. More than a dozen states have implemented a dental therapist model and the Health Resources Services Administration recommends dental therapy to better serve those lacking access to oral health care.<sup>1</sup>

Making more providers available in more locations to meet basic restorative needs means that we save on the more costly procedures that become necessary when care is delayed too long. We also know that dental health affects overall physical health, so by utilizing dental therapists, we'd be keeping our population healthier and keeping our overall health care expenditures down, which is a proven way to

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<sup>1</sup> <https://www.hrsa.gov/sites/default/files/hrsa/advisory-committees/primarycare-dentist/reports/actpcmd-19th-report-dental-therapy.pdf>

bend the health care cost curve and improve access, especially for those who need it the most. Dental therapy alone will not completely solve Wisconsin's dental access issue, but we believe it will improve it.

Chorus Community Health Plans & Children's Wisconsin encourage your support of this legislation and we are glad to serve as a resource on this important topic to help improve care and services for some of our most vulnerable kids and families. Thank you again to the bill authors, and to this Committee for holding a hearing on this proposal. If you have any questions, comments or concerns regarding my remarks after the hearing, please contact me at [mboeder@chorushealthplans.org](mailto:mboeder@chorushealthplans.org).

Thank you once again for your time and attention to this matter.

# Memo

TO Chair Cabral-Guevara and Members of the Senate Committee on Health

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FROM Doug Ballweg, President & CEO, Delta Dental of Wisconsin

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DATE December 7, 2023

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RE Support of Senate Bills 689 (Licensure of Dental Therapists), 692 (Dentist/Dental Hygienist Compact), and 706 (Marquette Dentistry Scholarships)

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Thank you, Chairwoman Cabral-Guevara, and members of the Senate Committee on Health, for taking time to consider these important bills on oral health access. Delta Dental believes that together the bills are helpful building blocks that will continue moving Wisconsin forward toward better access to oral health care, especially in our rural areas.

Delta Dental continues to work as a partner with the State of Wisconsin in providing support to both dental patients and professionals in an effort to improve oral health care for all Wisconsinites. Through a partnership with Wisconsin Department of Health Services, Delta Dental of Wisconsin and the Delta Dental of Wisconsin Foundation have contributed more than \$5 million to the Seal-a-Smile program. Each year the program provides oral health screenings, fluoride varnish, and sealants when necessary to elementary students across Wisconsin, at no cost to participants. Typically, 70,000 students participate with nearly half receiving dental sealants.

Delta Dental also realizes the importance of supporting providers who choose to work in underserved areas. Delta Dental currently does this through a fellowship program where our Foundation provides funding for up to three recent Marquette University School of Dentistry graduates to participate in an advanced general dentistry training program that focuses on the needs of low-income patients in rural areas. To complement this fellowship program, the Delta Dental Foundation established a Service Loan Repayment Program, which provides financial assistance of up to \$100,000 in loan repayments for dentists who commit to providing dental care in designated underserved geographical areas. We believe SB 706, which would fund scholarships for Marquette dental students who commit to practicing in these same areas, is highly complementary to these efforts and we urge passage.



# Memo

Delta Dental has long been a proponent of licensing dental therapists in Wisconsin, and we laud the work Senator Felzkowski and others have done to move the policy this far. Our message on dental therapy has been consistent in that it is one necessary piece to a broader set of reforms. It can help reduce costs, provide greater access to care by allowing for another pathway toward becoming a dental professional in Wisconsin and it can also facilitate the expansion of dentist supervised services into additional settings, such as nursing homes, veteran facilities, schools, hospitals, mobile clinics, and satellite dental clinics. Community clinics and Federally Qualified Health Centers are too valuable an asset to the citizens of Wisconsin to continue to put them at risk. Long-term solutions like employing dental therapists are needed to address the workforce and reimbursement issues they face. We urge passage of SB 689.

Access to dental care is a serious issue for the state's underinsured or uninsured, but it is also becoming an issue for those with insurance in places where access to dental professionals is limited. Ratification of the Dentist and Dental Hygienist Compact is another way to expand our pool of oral health professionals able to work in Wisconsin. Encouraging a system that allows for portability of licenses from other states while still maintaining Wisconsin's high standards is a small but important step we can take to increase access.

Thank you again for your attention to this important matter. We encourage the Senate Committee on Health to support SB 689, SB 692, and SB 706.

Sincerely,



Doug Ballweg  
President/CEO  
Delta Dental of Wisconsin