

Introduced by

Legislative Management

(Health Services Committee)

1 A concurrent resolution directing the Legislative Management to continue to study dental
2 services in the state, including the effectiveness of case management services and the state
3 infrastructure necessary to cost effectively use mid-level providers to improve access to
4 services and address dental service provider shortages in underserved areas of the state.

5 **WHEREAS**, the 2013-14 interim Health Services Committee studied how to improve access
6 to dental services and ways to address dental service provider shortages; and

7 **WHEREAS**, oral health professionals are located mostly in urban areas of the state,
8 resulting in a shortage of providers in rural areas of the state; and

9 **WHEREAS**, access to dental care is limited for Medicaid-eligible children, rural residents,
10 low-income adults, the elderly, especially those in nursing homes, and Native Americans; and

11 **WHEREAS**, emergency room visits for preventable dental conditions result in unnecessary
12 costs to the state and hospitals; and

13 **WHEREAS**, the 2013-14 interim Health Services Committee learned case management
14 services may have the potential to reduce dental costs and improve access to services; and

15 **WHEREAS**, the 2013-14 interim Health Services Committee received a report on the early
16 impacts of dental therapists in Minnesota prepared by the Minnesota Department of Health and
17 Minnesota Board of Dentistry for the Minnesota Legislature in 2014 indicating mid-level
18 providers serve more patients enrolled in public health insurance programs and some patients
19 served in clinics employing dental therapists experienced reduced wait times and travel times
20 with no quality or safety concerns; and

21 **WHEREAS**, the North Dakota Oral Health Coalition recommends the following oral health
22 initiatives:

- 23 • Expansion of the Seal! ND Program through the State Department of Health oral health
24 programs to target low income children at public schools;

- 1 • Additional funding for dental safety net clinics to include mobile, non-profit and federally
2 qualified health centers;
- 3 • Funding for a case management outreach model supported through the State
4 Department of Health and the North Dakota Dental Association;
- 5 • Expansion of duties for dental assistants and hygienists through innovative, non-
6 traditional, outreach education programs to minimize geographic and employment
7 barriers for the current workforce; and

8 **WHEREAS**, a report by the North Dakota Center for Rural Health regarding an assessment
9 of the oral health needs in the state and proposed interventions to reduce need identified the
10 following priorities models:

- 11 • Increase funding and reach of safety-net clinics to include services provided in western
12 North Dakota using selected models.
- 13 • Increased funding and reach of the Seal! North Dakota Program – to include using
14 dental hygienists to provide care and incorporating case management and identification
15 of a dental home.
- 16 • Expand scope of dental hygienists and utilize dental hygienists at the top of their current
17 scope of work to provide community based preventive and restorative services and
18 education among populations of high need.
- 19 • Create a system to promote dentistry professions among state residents and encourage
20 practice in North Dakota through a consolidated loan repayment program and access to
21 schools of dentistry.
- 22 • Increase Medicaid reimbursement, and

23 **WHEREAS**, the 2013-14 interim Health Services Committee determined additional
24 information was needed regarding the effectiveness of case management services and the
25 state infrastructure necessary to cost effectively utilize mid-level providers to improve access to
26 services and address dental service provider shortages in underserved areas of the state;

27 **NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF NORTH DAKOTA, THE**
28 **HOUSE OF REPRESENTATIVES CONCURRING THEREIN:**

29 That the Legislative Management continue to study dental services in the state, including
30 the effectiveness of case management services and the state infrastructure necessary to cost

Sixty-fourth
Legislative Assembly

- 1 effectively utilize mid-level providers to improve access to services and address dental service
- 2 provider shortages in underserved areas of the state; and
- 3 **BE IT FURTHER RESOLVED**, that the Legislative Management report its findings and
- 4 recommendations, together with any legislation required to implement the recommendations, to
- 5 the Sixty-fifth Legislative Assembly.