

# STATE OF ALASKA

## DEPT. OF HEALTH & SOCIAL SERVICES

*Alaska Commission on Aging*

**SARAH PALIN, GOVERNOR**

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February 2, 2009

The Honorable Representative Mike Hawker, Co-Chair  
House Finance Committee  
Alaska State Capitol, Room 505  
Juneau, AK 99801-1182

**Subject: Support for Reauthorization of the Medicaid Adult Dental Program**

Dear Co-Chair Hawker:

The Alaska Commission on Aging (ACoA) encourages support of HB 26, a bill to reauthorize preventive and restorative dental services for adult Medicaid recipients, sponsored by you and co-sponsored by Representative Muñoz. Medicaid coverage for these services will sunset June 30, 2009 without legislative reauthorization.

Good nutrition is vital for health and wellness across the life span and depends on oral health. Dental pain and missing or decayed teeth can affect dietary choices for seniors that may impact overall health and wellness. Without preventive and restorative dental services, which include exams, fillings, extractions, and dentures, vulnerable older Alaskans are at risk of developing dental infections that have been associated with periodontal disease, diabetes, pneumonia, and other chronic diseases including cardiovascular disease. Currently, Medicaid dental services are limited to expensive emergency care for immediate relief of pain and acute infection, with no coverage for preventative and restorative dental care. These limited services often lead to extraction of permanent teeth.

In addition to the health issues involved, decayed or missing teeth can be a significant factor in employability or job advancement, which is of concern to all persons seeking employment, regardless of age. Preventive and restorative dental services result in fewer tooth extractions for Medicaid clients and offer increased chance of employment, according to research findings (University of California, San Francisco School of Dentistry 2004).

Preventive and restorative dental services can help prevent the progression of serious dental disease and discomfort which can result in more costly emergency care. These services promote healthy lifestyles, assist in chronic disease prevention, and help to contain future Medicaid costs for emergency dental work and other related health care problems.

Since inception on April 1, 2007 through September 30, 2008, this program has served 9,267 unduplicated persons, which includes approximately 1,800 persons aged 60 years and older, of whom 900 received dentures.

Currently, the limit for services is \$1,150 per year per Medicaid beneficiary. This amount was originally used because it would pay for an exam and either an upper or lower set of dentures. We understand that the average cost for dentures has increased to \$1,700 or \$1,800 per set. The Commission suggests that the cap for services be reconsidered in light of the current costs for providing dental care.

ACoA supports HB 26 and believes this program to be a wise public investment that will help reduce expensive emergency dental needs and associated health care costs, and enhance health and wellness for elderly Alaskans. Please feel free to contact Denise Daniello, ACoA's executive director (465-4879), should you have any questions regarding our position. Thank you for your support of this important legislation.

Sincerely,



Sharon Howerton-Clark

Chair Alaska Commission on Aging

Sincerely,



Denise Daniello

ACoA Executive Director

CC: House HSS Committee Members  
Honorable Representative Herron, Co-Chair  
Representative Cissna  
Representative Lynn  
Representative Coghill

Honorable Representative Keller, Co-Chair  
Representative Holmes  
Representative Seaton

**Alaska Commission on Aging  
KEY POINTS TO KNOW ABOUT:**

**Continuation of the Medicaid Adult Dental Program  
February 2009**

**Issue:**

The Alaska Commission on Aging was a strong proponent of the original 2006 legislation which added preventive and restorative dental care to the palette of services available to adult Medicaid recipients. At the time, we realized that many low-income seniors were living with a variety of painful, destructive dental problems because they could not afford to pay for routine dental exams or dentures.

Prior to implementation of this program in 2006, dental services for Medicaid recipients were limited to expensive emergency care for relief of pain and acute infection only – often leading to extraction of permanent teeth. Waiting for dental emergencies resulted in more expensive dental care and limited the dentist's ability to address problems that would result in future dental emergencies.

While much of the focus on tooth decay concentrates on children, adults remain at high risk for dental decay, especially elderly and other adults on certain medications or undergoing cancer treatments that decrease saliva output. Studies have also shown the link between oral health and chronic diseases such as diabetes and cardiovascular disease. For seniors, the inability to properly chew food due to poor dentition leads to chronic malnutrition and its many consequences for health. Furthermore, those with ill-fitting dentures, missing teeth, no dentures, and other disfiguring dental problems may avoid the social engagement that is so essential to maintaining mental and physical health for seniors.

Program statistics for the period April 1, 2007 through September 30, 2008 indicate the following:

- ◆ Approximately 1,800 seniors were served by this program, comprising 19.4 percent of all those served.
- ◆ Approximately 900 seniors received dentures under the program, 38.6 percent of the total persons who received dentures.
- ◆ Expenses for seniors totaled 24.6 percent of program expenses.
- ◆ The average cost for care provided to a senior on the program was \$855.

**Recommendation:**

Re-authorize the Medicaid Adult Dental Program. Continue this beneficial program, which supports the health of low-income seniors and others.



## Reauthorize preventative and restorative dental services for adult Medicaid recipients

The Governor's Council on Disabilities and Special Education, Alaska Mental Health Board, Advisory Board on Alcoholism and Drug Abuse, and Alaska Commission on Aging, in collaboration with the Alaska Mental Health Trust Authority, jointly support the reauthorization of preventive and restorative dental services for adult Medicaid recipients. Medicaid coverage for these services will sunset June 30, 2009 without legislative reauthorization. The provisions for this reauthorization are in HB 26.

- The Department of Health and Social Services reports that approximately 7,600 adult Medicaid recipients received these dental services in FY08 with 252 participating dental providers.
- The American Dental Association recommends adult preventive and restorative dental services be included in all state Medicaid programs, and as former U.S. Surgeon General C. Everett Koop stated, "You're not healthy without good oral health."<sup>i</sup>
- Trust beneficiaries continue to list dental services as a priority unmet health needs.
- Dental pain, missing and decayed teeth and infection can affect employment and job advancement, contribute to missed work, dietary choices for seniors, and complicate management of other chronic diseases.<sup>ii</sup>
- Individuals on public assistance who receive rehabilitative dental treatment (including fillings, extractions, and dentures) were "... twice as likely to receive favorable or neutral employment outcomes as they were to receive unfavorable outcomes."<sup>iii</sup>
- Dental infections due to periodontal disease have been associated with adverse pregnancy outcomes (e.g., pre-term births)<sup>iv</sup>, management problems for individuals with diabetes, risks for pneumonia in nursing homes, and other chronic diseases including cardiovascular disease.<sup>v</sup>
- The bacteria involved with the dental decay process are typically passed parent to child. Part of the efforts to reduce dental decay in young children relates to reducing the level of dental infection in the caregiver.<sup>vi</sup> Additionally, parents with dental coverage are more likely to access dental services for their children.
- The coverage of preventive and restorative dental care for adult Medicaid recipients along with necessary behavioral changes, over the long term, offer the potential for

reduced utilization of emergent dental services (e.g., accessing the hospital emergency room for management of a dental infection).

**Supporters:** AARP-Alaska, Alaska Public Health Association, Alaska Dental Society All-Alaska Pediatric Partnership, ANTHC and Alaska Primary Care Association.

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<sup>i</sup> Oral Health America, <http://www.oralhealthamerica.org/whoweare.html>, noting quote from C. Everett Koop, former U.S. Surgeon General.

<sup>ii</sup> Association of State and Territorial Health Officials (ASTHO), “The oral health and chronic disease connection”, available at: [http://www.astho.org/templates/display\\_pub.php?pub\\_id=327](http://www.astho.org/templates/display_pub.php?pub_id=327), May 2002.

<sup>iii</sup> “Dental Treatment Highly Effective in Helping Welfare Recipients Gain Employment”, University of California – San Francisco School of Dentistry”, press release, March 10, 2004.

<sup>iv</sup> Lieff S, Hared H, McKaig R, et al., “Periodontitis and Preterm Low Birth Weight in Pregnant Women”, *Journal of Dental Research*, 2000; 79(supplemental):608.

<sup>v</sup> U.S. Department of Health and Human Services (USDHHS), *Oral Health in America: A Report of the U.S. Surgeon General*, USDHSS, National Institute of Dental and Craniofacial Research, National Institutes of Medicine, 2000.

<sup>vi</sup> Berkowitz, RJ, “Causes, treatment and prevention of early childhood caries: a microbiologic perspective”, *Journal of the Canadian Dental Association*, 69(5):304-307b, 2003.

# Alaska Primary Care Association

*"...uncompromising in the pursuit of access to primary care for all Alaskans."*



The Honorable Representative Hawker  
Alaska State House of Representative  
State Capitol, Room 505  
Juneau, Alaska 99801-1182

Re: Support for Medicaid for Adult Dental Services – HB 26

February 25, 2008

Dear Representative Hawker,

The Alaska Primary Care Association (APCA) represents 26 health care organizations and 141 non-profit Community Health Centers (CHCs), as well as other safety net providers throughout Alaska. In 2008, our sites provided primary healthcare to over 80,000 Alaskans from across the state.

The APCA supports repealing the repeal of preventative and restorative adult dental services reimbursement under Medicaid. The APCA knows that access to preventative dental services improve health outcomes and reduce overall health care costs. Oral health is critical for overall health and adults in the Medicaid program receiving access to dental services reduces the likeliness that they will develop more expensive and acute dental problems.

We appreciate your hard work and service to Alaskans and support your efforts to expand access to health care for all Alaskans.

Respectfully,

Regan Mattingly  
State Affairs Coordinator

Shelley S. Hughes  
Government Affairs Director



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February 25, 2009

The Honorable Wes Keller, Co-Chair  
House Health and Social Services Committee  
Alaska Capitol, Room 13  
Juneau, AK 99801-1182

The Honorable Bob Herron, Co-Chair  
House Health and Social Services Committee  
Alaska Capitol, Room 415  
Juneau, AK 99801-1182

RE: HB 26 (Hawker)—Support

Dear Co-Chairs Keller and Herron:

On behalf of the members of AARP in Alaska, we encourage you and your colleagues on the House Health and Social Services Committee to support HB 26, authored by Representative Mike Hawker and co-sponsored by Representatives Munoz, Gara and Kerttula.

Previously, under Alaska's Medicaid program, the only dental coverage offered adult beneficiaries was for emergency care. HB 105 offered funding, albeit annually capped at \$1,150, which began to address preventive and restorative care. Now, for example, an older Alaskan on Medicaid who resides in a long term care facility and needs dentures can secure them under the program. Older persons who have dental problems, missing teeth, or are in need of dentures often have accompanying nutrition problems. These nutrition problems can exacerbate other health issues and create an overall deterioration in health status. We believe dental care is essential to quality health care. Funding for dental care should be considered sensible prevention with the long term possibility of saving Medicaid funds that would not be need to be spent on more serious health care problems resulting from poor oral health status.

Understandably, the Legislature wanted to evaluate the initial results of the program and scheduled it to sunset in June, 2009. As Representative Hawker indicates in his sponsor's statement, the program has moved adult Alaska Medicaid beneficiaries from "deferred maintenance" to "preventive maintenance." Representative Hawker's HB 26 would eliminate the sunset provision.

Of the 7,600 adults who have benefited, about 1,800 are older Alaskans, including 900 who received dentures. The average cost for care provided to a senior Alaskan in the program was \$855.

The only concern we have about the program is the annual cap of \$1,150. Although the average cost of a senior Alaskan was \$855, we understand that the fee for an upper or lower set of dentures is now between \$1,700 and \$1,800. We also understand that some adult Medicaid beneficiaries have more significant oral health problems that may go considerably beyond the cap.

One of the goals of the program was to provide care that might take a Medicaid beneficiary from being among the unemployed because of missing teeth (and unable to pass an employment interview) to enabling them to secure employment and eventually getting off the Medicaid program. Some of these adults will need more oral care than can be provided under the cap.

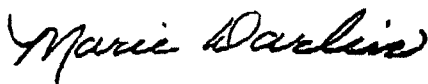
We suggest exploring the possibility of raising the cap to enable more beneficiaries to get the total dental care they need.

AARP urges an "AYE" vote on HB 26.

Should you have any questions about our position, please feel free to contact me (586-3637) or Patrick Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,



Marie Darlin, Coordinator  
AARP Capital City Task Force  
415 Willoughby Avenue, Apt. 506  
Juneau, AK 99801  
586-3637 (voice)  
463-3580 (fax)

CC: Representative John Coghill  
Representative Bob Lynn  
Representative Paul Seaton  
Representative Sharon Cissna  
Representative Lindsey Holmes  
Representative Mike Hawker





*Matt Claman,  
Acting Mayor*

# Municipality of Anchorage

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## Senior Citizens Advisory Commission

February 25, 2009

The Honorable Wes Keller, Co-Chair  
House Health and Social Services Committee  
Alaska Capitol, Room 13  
Juneau, AK 99801-1182

The Honorable Bob Herron, Co-Chair  
House Health and Social Services Committee  
Alaska Capitol, Room 415  
Juneau, AK 99801-1182

Dear Co-Chairs Keller and Herron:

RE: HB 26 (Hawker)—Support

The Anchorage Municipal Senior Citizens Advisory Commission seeks the support of you and your colleagues on the House Health and Social Services Committee in regard to HB26 authored by Representative Mike Hawker and co-sponsored by Representatives Munoz, Gara and Kerttula. We are asking that this vital dental program be extended through FY 2010 and beyond, and that the existing cap of \$1,150 be removed. This will allow the Department of Health and Social Services the flexibility to adjust the cap based on program costs and the Medicaid budget.

We know that many older persons who have dental problems, missing teeth, or are in need of dentures often have nutrition problems. This can exacerbate other health issues and create an overall deterioration in health status. We believe dental care is essential to quality health care. Funding for dental care should be considered sensible prevention with the long term possibility of saving Medicaid funds that might be used on more serious health care problems resulting from poor oral health.

Another aspect to consider is the very personal effect teeth have on a persons ability to be a part of society. Missing teeth or other obvious oral health problems tend to keep seniors isolated which can lead to depression and other health issues.

As with most medical procedures, the cost of dental care has risen since the original legislation was enacted. The cap of \$1,150 no longer covers the cost of an upper or lower set of dentures. Many seniors have more significant oral health problems that might go beyond the cap.

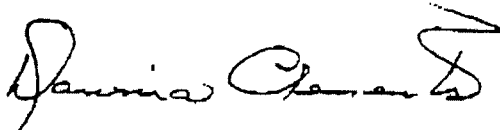
*Community, Security, Prosperity*

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We ask that you vote to continue this vital program and explore the possibility of raising the cap, allowing more beneficiaries to get the dental care they need.

The Commission very much appreciates your consideration of this matter

Sincerely,



Dawnia Clements, Chair  
Senior Citizens Advisory Commission  
6800 Louise Court  
Anchorage, AK 99507  
(907) 346-2064  
(907) 346-4602 FAX  
[Ray@ak.net](mailto:Ray@ak.net)

CC: Representative John Coghill  
Representative Bob Lynn  
Representative Paul Seaton  
Representative Sharon Cissna  
Representative Lindsey Holmes  
Representative Mike Hawker

*Community, Security, Prosperity*