

HB

26

Representative Mike Hawker

Alaska State Legislature



Session:

State Capitol
Juneau, AK 99801
907 465-4949 office
907 465-4979 fax

Interim:

716 W 4th Avenue
Anchorage, AK 99501
907 269-0244 office
907 269-0248 fax

House District 32:

Eagle River
Anchorage
Glen Alps
Rainbow
Indian
Bird
Girdwood
Portage
Whittier
Sunrise
Hope

TO: Representative Wes Keller, Co-Chairman
Representative Bob Herron, Co-Chairman
House Finance Committee

FROM: Representative Mike Hawker

A handwritten signature in black ink, appearing to be "MH".

DATE: January 29, 2009

RE: House Bill 26

I request that House Bill 26, which would extend the current Medicaid Adult Dental program, be scheduled for a hearing at your earliest convenience. The program is scheduled to sunset on June 30, 2009. Early passage of this legislation will ensure continuation of care for the patients who rely on these services.

I have attached a Sponsor Statement, copy of the bill, Sectional Analysis, and some background materials. I have requested additional materials from the Department of Health and Social Services, which is the only department affected by this program. As soon as these materials are finalized, I will forward them to you. I will not need any audio/visual equipment.

I expect testimony from the following organizations:

Department of Health & Social Services
The Alaska Mental Health Trust Authority
The Alaska Dental Society or Dental Providers

Please feel free to contact me, or my legislative aide, Juli Lucky at 465-6587, if you need any additional information.

Representative Mike Hawker

Alaska State Legislature



House Bill 26

Sponsor Statement

Session:

State Capitol
Juneau, AK 99801
907 465-4949 direct
800 478-4950 toll free
907 465-4979 fax

Interim:

716 W 4th Avenue
Anchorage, AK 99501
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House District 32:

Eagle River
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“An Act repealing the repeal of preventative and restorative adult dental services reimbursement under Medicaid; providing for an effective date by repealing the effective date of sec. 3, ch. 52, SLA 2006; and providing for an effective date.”

House Bill 26 would extend the current Medicaid Adult Dental program, which is scheduled to sunset this year. In 2006, the legislature passed House Bill 105, which restructured our approach to adult dental services allowed under Medicaid to provide a more complete level of services.

Prior to 2006, adults on Medicaid could only receive emergency care to relieve pain and fight infection. The passage of HB 105 authorized exams, cleaning, tooth restoration or extraction and dentures. In short, Alaska moved from a “Deferred Maintenance” to a “Preventative Maintenance” approach for adult dental care.

In order to have a chance to assess the viability of the program, the legislature added a sunset to the program of June 30, 2009. House Bill 26 would remove the sunset, allowing the program to become permanent.

HB 26

Sectional Analysis

Prepared by Representative Mike Hawker's Office

- Section 1:** Repeals Section 3 and 5 of ch. 52, SLA 2006 (HB 105). Section 3 reinserted the statute as it existed before passage of HB 105; Section 5 repealed the new section added by HB 105.
- Section 2:** Repeals Section 7 of ch. 52, SLA 2006 (HB 105), which provided an effective date for Section 3.
- Section 3:** Immediate effective date.

FISCAL NOTE

STATE OF ALASKA
2009 LEGISLATIVE SESSION

Fiscal Note Number: _____
Bill Version: HB026
() Publish Date: _____

Identifier (file name): HB026-DHSS-APDMS-02-23-09 Dept. Affected: Health & Social Services
Title: Medicaid for Adult Dental Services RDU: Health Care Services
Component: Adult Preventative Dental Medicaid
Sponsor: Hawker
Requester: House HSS Component Number: 2839

Expenditures/Revenues (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

	Appropriation Required	Information					
		FY 2010	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
OPERATING EXPENDITURES							
Personal Services							
Travel							
Contractual							
Supplies							
Equipment							
Land & Structures							
Grants & Claims	0.0	7,288.4	7,535.9	7,783.6	8,031.1	8,278.6	8,526.1
Miscellaneous							
TOTAL OPERATING	0.0	7,288.4	7,535.9	7,783.6	8,031.1	8,278.6	8,526.1

CAPITAL EXPENDITURES							
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CHANGE IN REVENUES (
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FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	0.0	4,758.7	4,714.4	4,592.3	4,738.3	4,884.4	5,030.4
1003 GF Match	0.0	2,529.7	2,821.5	3,191.3	3,292.8	3,394.2	3,495.7
1004 GF							
1005 GF/Program Receipts							
1037 GF/Mental Health							
Other Interagency Receipts							
TOTAL	0.0	7,288.4	7,535.9	7,783.6	8,031.1	8,278.6	8,526.1

Estimate of any current year (FY2009) cost: _____

POSITIONS

Full-time							
Part-time							
Temporary							

ANALYSIS: (Attach a separate page if necessary)

This bill eliminates the sunset date of June 30, 2009 on enhanced dental services for adult Medicaid recipients. Services for adult Medicaid recipients would otherwise revert to emergent dental services (treatment for immediate relief of pain and acute infection), only. During FY2008 about 7,600 adults received treatment under this program. Forecasted expenditures are based on an analysis of paid claims reflecting the most recent trends. The estimated federal portion is based on projected federal financial participation rates for 2010 through 2015 using federal reimbursement rates from the American Recovery and Reinvestment Act 2009 economic stimulus bill. The amount for FY2010 is included in the Governor's amended budget request.
(continued on page 2)

Prepared by: William J. Streur, Deputy Commissioner Phone 279-7827
Division: Health Care Services Date/Time 2/20/09 12:00 AM
Approved by: Alison Elgee, Assistant Commissioner Date 2/23/2009
DHSS Finance & Management Services

FISCAL NOTE

**STATE OF ALASKA
2009 LEGISLATIVE SESSION**

BILL NO. HB026

ANALYSIS CONTINUATION

In April 2007, Alaska began providing preventive and restorative dental care for adults age 21 and older enrolled in Medicaid. The Legislature established a three year trial period to evaluate the new program, which will end June 30, 2009, if not reauthorized. Services provided under the Adult Preventative Dental Medicaid program must be preauthorized and are subject to a \$1,150 annual cap per individual. Services include exams, cleanings, fillings, root canals and dentures. Total program costs are controlled by spending limits set by the legislature, ensuring that total program spending remains within the budgeted amount.

The Adult Preventative Dental Medicaid program helps protect and promote the health of Alaskans by improving affordable access to dental care services to the nearly 40,000 eligible adult Alaskans enrolled in Medicaid annually. During fiscal year 2008 about 7,600 adults received treatment under this program. In the past, Medicaid only treated emergency pain relief and acute infection for adult dental needs. This coverage expansion was added because infections in the mouth are no different than infections in other parts of the body. Dental infections cause pain and lost time at work, and affect overall health. Waiting until a dental emergency occurs can result in more expensive dental care. Missing teeth can affect employability.

The Alaska Mental Health Trust Authority contributed to state matching funds during the first three years of the program but will not do so after June 30, 2009. Fund source calculations for this fiscal note assume only GF match for the state portion. The federal portion is estimated for 2010 through 2015 based on the proportion of tribal and Title XIX reimbursable costs as forecast for 2010, and the estimates of federal matching percentages for 2010 through 2015. Approximately 18% of the claims are eligible for Indian Health Services which receives 100% federal reimbursement. The remaining 82% of claims are eligible for regular title XIX FMAP, which is projected to average 58.68% for state FY2010, 54.34% for FY2011 and 50% for FY2012 to FY2015.

HB 26

Adult Dental Program Facts

Prepared by Representative Mike Hawker's Office
Information Provided by DH&SS

1. How many recipients have taken advantage of the program?

The unduplicated count of adult Medicaid recipients receiving these services since implementation of the services on April 1, 2007 – September 30, 2008 is approximately 9,300 adults with 283 dental providers participating in the program.

2. How much has been expended so far?

The expenditure information on preventative and restorative dental services for adult Medicaid recipients (in thousands of dollars) is:

Fiscal Year 2007 (4th Quarter): \$418.5

Fiscal Year 2008: \$4,640.5

Providers have up to 12 months to submit Medicaid claims and the listed expenditures are based on the date of payment of the claims.

3. What services were the funds spent on?

The expenditures for categories of dental services for the period of April 1, 2007 – September 30, 2008 (as reflected on claims for this period that had been processed the 2nd week of November 2008) are:

- ♦ Fillings (1 and 2 surface amalgam and resin restorations): 9,313 procedures - \$1,015,196
- ♦ Root canal therapy on permanent teeth: 1,027 procedures (including 289 of those on front teeth) - \$435,412. *These are situations that would have often resulted in extracting teeth as Medicaid was not covering root canals under emergent dental.*
- ♦ Dentures (includes full & partial dentures): 2,343 procedures - \$2,227,288. *Please note that the Medicaid program restricts denture coverage to every five years for adults, however procedures to adjust the fit of the would be covered. The denture procedures and expenditures listed do not include repairs and/or adjustments to dentures.*



LAWS OF ALASKA

2006

Source
SCS CSHB 105(FIN)

Chapter No.
52

AN ACT

Relating to coverage for adult dental services under Medicaid; and providing for an effective date.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

THE ACT FOLLOWS ON PAGE 1

AN ACT

1 Relating to coverage for adult dental services under Medicaid; and providing for an effective
2 date.

3

4 * **Section 1.** The uncodified law of the State of Alaska is amended by adding a new section
5 to read:

6 PURPOSE; INTENT. (a) The purpose of this Act is to increase adult dental care
7 services for an eligible recipient of Medicaid under AS 47.07 to ensure that services critical to
8 a recipient are implemented first, while controlling the overall growth of the costs of the
9 increase in services.

10 (b) It is the intent of the legislature that the Department of Health and Social Services
11 implement the increase in adult dental care services authorized by this Act through the
12 adoption of regulations consistent with the department's obligation to contain the costs of the
13 increased services in order to provide the services within appropriation limits. It is further the
14 intent of the legislature that the Department of Health and Social Services implement

1 mechanisms to contain costs, which may include establishing a maximum amount of benefits
2 for each eligible recipient in a fiscal year for the services and specifying the scope of the
3 services.

4 * **Sec. 2.** AS 47.07 is amended by adding a new section to read:

5 **Sec. 47.07.067. Payment for adult dental services.** (a) Subject to
6 appropriation, the department shall pay for minimum treatment and for preventative
7 and restorative adult dental services provided under AS 47.07.030(b) and under
8 regulations adopted by the commissioner in conformity with applicable federal
9 requirements and this chapter. Regulations adopted under this section must include the
10 following:

11 (1) a maximum amount of benefits for preventative and restorative
12 adult dental services of \$1,150 for each eligible recipient in a fiscal year; and

13 (2) specification of the scope of coverage for preventative and
14 restorative adult dental services.

15 (b) On or before June 30 of each year, the department shall review
16 appropriations available for the purposes of this section for the following fiscal year,
17 and estimate the scope of services to be used and the number of eligible recipients
18 anticipated to be served during the following fiscal year. Notwithstanding the
19 maximum amount of benefits specified in (a)(1) of this section, the department shall
20 reduce, by regulation, the specified maximum amount of benefits for the following
21 fiscal year if the department's estimates under this subsection would exceed
22 appropriations available for that fiscal year.

23 (c) Notwithstanding any contrary provision of AS 44.62, the department may
24 adopt emergency regulations to implement (b) of this section.

25 (d) As used in this section, "minimum treatment" means the application or
26 prescription of a medication or material deemed necessary by a licensed dentist for the
27 immediate relief of pain or to reduce the spread of infection.

28 * **Sec. 3.** AS 47.07.900 is amended by adding a new paragraph to read:

29 (20) "adult dental services" means minimum treatment for the
30 immediate relief of pain and acute infection provided by a licensed dentist.

31 * **Sec. 4.** AS 47.07.900(1) is repealed.

1 * **Sec. 5.** AS 47.07.067, as added in sec. 2 of this Act, is repealed June 30, 2009.

2 * **Sec. 6.** The uncodified law of the State of Alaska is amended by adding a new section to
3 read:

4 **TRANSITION: REGULATIONS.** The Department of Health and Social Services may
5 proceed to adopt regulations necessary to implement the changes made by this Act. The
6 regulations take effect under AS 44.62 (Administrative Procedure Act), but not before the
7 effective date of the statutory changes.

8 * **Sec. 7.** Section 3 of this Act takes effect July 1, 2009.

9 * **Sec. 8.** Section 6 of this Act takes effect immediately under AS 01.10.070(c).

10 * **Sec. 9.** Except as provided in secs. 7 and 8 of this Act, this Act takes effect July 1, 2006.



AARP Alaska
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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

Adult Dental

New Adult Dental Services

On March 29, 2007, Alaska's Medicaid for adults began covering \$1,150 worth of preventive dental care, such as exams and cleanings, each year for Alaskans 21 and older who receive Medicaid services.

New services also include fillings, root canals and dentures.

In the past, adult dental Medicaid only treated emergency pain relief and acute infection.

For a full list of new services in the state regulations passed last year authorizing the changes, [click here](#).

The limited amount of preventive and restorative coverage, as well as limited access to dentists who accept Medicaid patients, means patients will need to

- ▶ plan carefully with their dentists what to do first, and when it can be scheduled;
- ▶ keep their appointments.

Missed appointments are a primary complaint among dentists. The state recently clarified that when dentists charge patients for missed appointments, that policy includes Medicaid patients. Medicaid will not cover the cost of missed appointments.

For help finding a dentist who takes new Medicaid patients, call the recipient helpline: 1-800-780-9972.

Funding

The state investment of \$1.3 million in general funds is being matched with federal funds and \$1.425 million a year from the Mental Health Trust Authority, for a total annual cost of \$10.2 million, an eight-fold return on state general fund dollars.

The coverage expansion was added because infections in the mouth are no different than infections in other parts of the body. Dental infections cause pain, lost time at work and missing teeth can affect employability. Waiting for dental emergencies often results in more expensive dental care and limits the dentist's ability to address dental problems that will result in future dental emergencies.

Recommended Reading:

- ▶ [press release](#)
- ▶ [fact sheet \(PDF\)](#)
- ▶ [letter to dentists explaining new regulations \(PDF\)](#)
- ▶ [state regulations authorizing the new services \(PDF\)](#)

Questions:

- ▶ Recipient helpline: 1 (800) 780-9972



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."ⁱ
- 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.ⁱⁱ
- 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."ⁱⁱⁱ
- Dental infections due to periodontal disease have been associated with adverse pregnancy outcomes (e.g., pre-term births)^{iv}, management problems for individuals with diabetes, risks for pneumonia in nursing homes, and other chronic diseases including cardiovascular disease.^v
- 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.^{vi} 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.

¹ Oral Health America, <http://www.oralhealthamerica.org/whoweare.html>, noting quote from C. Everett Koop, former U.S. Surgeon General.

² 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, May 2002.

³ "Dental Treatment Highly Effective in Helping Welfare Recipients Gain Employment", University of California – San Francisco School of Dentistry", press release, March 10, 2004.

⁴ 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.

⁵ 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.

⁶ Berkowitz, RJ, "Causes, treatment and prevention of early childhood caries: a microbiologic perspective", *Journal of the Canadian Dental Association*, 69(5):304-307b, 2003.

STATE OF ALASKA

DEPT. OF HEALTH & SOCIAL SERVICES

Alaska Commission on Aging

SARAH PALIN, GOVERNOR

P.O. BOX 110693
JUNEAU, ALASKA 99811-0693
PHONE: (907) 465-3250
FAX: (907) 465-1398

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.

Matthew Johnson

From: Butch Carber
Sent: Tuesday, March 03, 2009 12:36 PM
To: Marianna Carpeneti; Matthew Johnson
Subject: HHSS committee today

Hi,

Last Thursday, Co-Chair Keller closed public testimony for HB 26. Do you know if there is a plan to open that again?

Do you know if there will be more public testimony on HB 2?

If so, I will prepare witness registers, though I do keep some blank ones with me, just in case.

Thanks,

Butch

Butch Carber

House Records

465-2258

26-LS0142\E
Mischel
2/20/09

CS FOR HOUSE BILL NO. 26()
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-SIXTH LEGISLATURE - FIRST SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES HAWKER, Muñoz, Gara, Kerttula

A BILL
FOR AN ACT ENTITLED

1 **"An Act relating to adult dental services; providing for an effective date by amending**
2 **the effective date of sec. 3, ch. 52, SLA 2006; and providing for an effective date."**

3 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

4 *** Section 1.** Section 5, ch. 52, SLA 2006, is amended to read:

5 Sec. 5. AS 47.07.067, as added in sec. 2, ch. 52, SLA 2006 [OF THIS ACT], is
6 repealed June 30, 2014 [2009].

7 *** Sec. 2.** Section 7, ch. 52, SLA 2006, is amended to read:

8 Sec. 7. Section 3 of this Act takes effect July 1, 2014 [2009].

9 *** Sec. 3.** This Act takes effect immediately under AS 01.10.070(c).