

**HB**

**265**

# ALASKA STATE LEGISLATURE

## Juneau

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## Anchorage

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## **Representative Berta Gardner** *House District 24*

### Sponsor Statement- House Bill 265

#### **HB 265 – An Act relating to a two year funding cycle for medical assistance coverage for dentures.**

HB 265 makes a simple change to the Adult Medicaid Dental program that would allow patients who are approved for dentures to receive both the uppers and lowers in a single fiscal year. The bill would let patients access two years of funding in a single year, thereby allowing them and their dentists to schedule treatment around the oral health of the patient, rather than the bureaucratic ease of the state fiscal year.

Current law places a limit on expenditures per eligible client at \$1,150 per year. This number was designed to pay for ½ of a set of dentures, either uppers or lowers, in a single fiscal year. When the program was created, the idea was that a client who needed dentures could receive one set on June 30<sup>th</sup>, and the second on July 1<sup>st</sup>. Unfortunately, this has proven to be impractical. Dentists who are forced to pull teeth can't always do so on the state's fiscal calendar, and Alaskans shouldn't suffer needlessly because their medical emergency occurred in the fall rather than the summer.

Adult Medicaid Dental has been recognized across the political spectrum as a successful government health care program. Over the past three years, the state has saved substantial amounts of money – and poorer Alaskans have been saved immense pain and hardship – by allowing Medicaid to pay for exams, cleanings, fillings, root canals, and dentures before painful and expensive surgery became necessary. HB 265 will fix a small flaw in the cost-containment portion of the program and help protect this important state investment.

**HOUSE BILL NO. 265**

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SIXTH LEGISLATURE - SECOND SESSION

BY REPRESENTATIVES GARDNER, PETERSEN, AND GARA

Introduced: 1/8/10

Referred: Prefiled

**A BILL**

**FOR AN ACT ENTITLED**

1 "An Act providing for a two-year funding cycle for medical assistance coverage for  
2 dentures."

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

4 \* **Section 1.** AS 47.07.067(a) is amended to read:

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

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

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

1 \* Sec. 2. AS 47.07.067 is amended by adding a new subsection to read:

2 (e) If the department authorizes or approves payment for complete or partial  
3 dentures for an eligible recipient, the department may authorize the payment in one  
4 fiscal year of the maximum payment amount for not more than two fiscal years. A  
5 recipient is not eligible for additional benefits under this section for a two-year period.

# FISCAL NOTE

**STATE OF ALASKA**  
**2010 LEGISLATIVE SESSION**

Fiscal Note Number: \_\_\_\_\_  
Bill Version: HB265  
( ) Publish Date: \_\_\_\_\_

Identifier (file name): HB265-DHSS-MAA-2-9-10 Dept. Affected: Health & Social Services  
Title: Medicaid Coverage for Dentures RDU: Health Care Services  
Component: Medical Assistance Administration  
Sponsor: Gardner, Peterson, Gara  
Requester: House HSS Component Number: 242

**Expenditures/Revenue (Thousands of Dollars)**

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

	Appropriation Required	Information						
		FY 2011	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016
<b>OPERATING EXPENDITURE</b>								
Personal Services	84.5							
Travel								
Contractual	54.8							
Supplies	1.0							
Equipment	7.6							
Land & Structures								
Grants & Claims								
Miscellaneous								
<b>TOTAL OPERATING</b>	<b>147.9</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

<b>CAPITAL EXPENDITURE</b>								
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<b>CHANGE IN REVENUES</b>								
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**FUND SOURCE (Thousands of Dollars)**

1002 Federal Receipts	86.4							
1003 GF Match	61.5							
1004 GF								
1005 GF/Program Receipt								
1037 GF/Mental Health								
Other Interagency Receipt								
<b>TOTAL</b>	<b>147.9</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of any current year (FY2010) c: \_\_\_\_\_

**POSITIONS**

Full-time	1.0							
Part-time								
Temporary								

**ANALYSIS:** (Attach a separate page if nece:

HB 265 is meant to address limitations of coverage for upper and lower dentures within a given state fiscal year under the \$1,150 annual limit. The annual limit provides for expenditures that would typically cover only an upper or lower denture, thus requiring Medicaid recipients to wait until the subsequent fiscal year to obtain the opposing denture under the Medicaid program.

The bill would authorize the department to allow for provision of both an upper and lower denture within the same state fiscal year, however when these services are provided the adult recipient would not be eligible for additional services under Medicaid preventative and restorative dental for a two-year period.

Prepared by: William J. Streur, Deputy Commissioner  
Division: DHSS Health Care Services

Phone: (907) 334-2520  
Date/Time: 2/9/10 9:20 AM

Approved by: Alison Elgee, Assistant Commissioner  
DHSS Finance & Management Services

Date: 2/9/2010

FISCAL NOTE

STATE OF ALASKA  
2010 LEGISLATIVE SESSION

BILL NO. HB265

ANALYSIS CONTINUATION

The Division of Health Care Services estimates that it will need a total of 1 FTE to fully track expenditures and to authorize procedures up to the limit of the proposed legislation in the first year of the program, prior to modification of the claims payment system (MMIS) to permit automated tracking of expenditures.

Administrative Costs:

1 Medical Assistance Administrator II (Range 18), \$84,510; All personal services costs include benefits. Assumes \$9.6 per FTE annually for office space, phones, and other contractual costs; \$2.6 one time costs per FTE for computers and software; \$5.0 one time costs per FTE for office equipment; \$2.0 per FTE annually for supplies. GF portion of these expenses is 50%.

Medical Assistance Administrator II Duties

If legislation is passed and implemented to allow recipients the ability to utilize two fiscal year's annual cap for dentures (full sets and partials) during SFY2011, it will create a labor intensive process of tracking the service limits manually. Our current Medicaid Management Information System has the capability of applying service exceptions on an annual basis only. Combining two years' limits will initially require a manual work-around for tracking the 11 denture and partial procedure codes being utilized by approximately 4,400 recipients, and follow-up to ensure limits are not exceeded nor services duplicated at any point in the two year period. To authorize payment of individual dental claims, staff will have to research, review, and evaluate the recipients' claims and treatment history for the two year period in question. The division estimates the need for a Medical Assistance Administrator II to handle the increased workload until modifications can be made to the MMIS.

Modification of MMIS

DHSS estimates that it will cost \$50.0 in contractual to modify the present MMIS or enhance the new MMIS currently in development. Part of the development process involves ceasing all modifications to the current MMIS prior to conversion, to ensure that the new system can replicate the functionality of the present system. DHSS assumes that it will not be able to make the necessary modifications prior to the "freeze" of the current system, likely to occur early in the summer of 2010. If DHSS is able to make the modifications before the freeze, it will not fill the position requested. GF portion of the system modification is 25%.

# FISCAL NOTE

**STATE OF ALASKA**  
**2010 LEGISLATIVE SESSION**

Fiscal Note Number: \_\_\_\_\_  
 Bill Version:           **HB265**            
 () Publish Date: \_\_\_\_\_

Identifier (file name): HB265-DHSS-APDMS-2-9-10 Dept. Affected:           Health & Social Services            
 Title           Medicaid Coverage for Dentures           RDU           Health Care Services            
 Component           Adult Preventive Dental            
 Sponsor           Gardner, Peterson, Gara            
 Requester           House HSS           Component Number           2839          

**Expenditures/Revenue** (Thousands of Dollars)

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

	Appropriation Required	Information						
		FY 2011	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016
<b>OPERATING EXPENDITURE</b>								
Personal Services								
Travel								
Contractual								
Supplies								
Equipment								
Land & Structures								
Grants & Claims	935.0		467.5	0.0	0.0	0.0	0.0	0.0
Miscellaneous								
<b>TOTAL OPERATING</b>	<b>935.0</b>	<b>0.0</b>	<b>467.5</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

<b>CAPITAL EXPENDITURE</b>								
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<b>CHANGE IN REVENUES</b>								
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**FUND SOURCE** (Thousands of Dollars)

1002 Federal Receipts	626.5		266.5					
1003 GF Match	308.6		201.0	0.0	0.0	0.0	0.0	0.0
1004 GF								
1005 GF/Program Receipts								
1037 GF/Mental Health								
Other Interagency Receipts								
<b>TOTAL</b>	<b>935.0</b>	<b>0.0</b>	<b>467.5</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of any current year (FY2010) c \_\_\_\_\_

**POSITIONS**

Full-time								
Part-time								
Temporary								

**ANALYSIS:** (Attach a separate page if nece:

This bill addresses limitations of coverage for upper and lower dentures within a given state fiscal year with the current \$1,150 annual limit. The annual limit provides for expenditures that would typically cover only an upper or lower denture, thus requiring Medicaid recipients to wait until the subsequent fiscal year to obtain the opposing denture under the Adult Preventive Dental (APD) program. The bill would authorize the department to allow for provision of both an upper and lower denture within the same state fiscal year, however when these services are provided the adult recipient would not be eligible for additional services under the APD program for a 2-year period.

In SFY 2009, the total cost of complete, partial and immediate denture claims was approximately \$1,620.0.

(continued on page 2)

Prepared by: William J. Streur, Deputy Commissioner  
 Division Health Care Services

Phone 269-7827  
 Date/Time 1/25/10 9:34 AM

Approved by: Alison Elgee, Assistant Commissioner  
DHSS Finance & Management Services

Date 2/9/2010

FISCAL NOTE

STATE OF ALASKA  
2010 LEGISLATIVE SESSION

BILL NO. HB265

**ANALYSIS CONTINUATION**

We estimate that the cost of denture services in the APD has grown at the same rate as all Health Care Services Medicaid Services costs (forecasted to be 6%) from FY 2009 to 2010. Medicaid growth for APD alone is forecasted to be 8.9% from FY 2010 to 2011 to reach a baseline cost of \$1,868.0 for denture services in FY 2011 with no changes to the program.

With the changes proposed in this bill and an expected effective date of July 1, 2010, we estimate the baseline costs noted above for denture services in FY 2011 will increase by 50%, assuming half of denture services recipients would be completing the denture process from FY2010 and the other half would be getting both their upper and lower dentures in FY 2011 for a total cost of \$2,803.0 (a difference of \$935.0 from baseline). We would still expect some increased costs over baseline in FY2012 as the number of people getting denture services has been growing each year as adults continue to learn about the APD program and this bill allows for them to be paid in one year. For FY2012, we estimate the need for increased funds to be half of the amount needed in FY 2011.

For subsequent years, we would expect the cost of denture services to level out to approximately what we would expect without the changes in this bill, the shift being not in cost but in how many recipients are receiving services.

For FY2011, we estimate 67% of APD services to be federally reimbursable, assuming ARRA FMAP increases are valid through all 4 quarters of FY 2011. For FY2012 we expect a FMAP of 50%. As some ADP services are IHS and reimbursed at 100%, we expect 57% of ADP costs to be federally reimbursable.



**Alaska Dental Society, Inc.**

9170 Jewel Lake Road, Suite 203  
Anchorage, Alaska 99502-5390  
(907) 563-3003 • FAX: 563-3009  
info@akdental.org

The Honorable Johnny Ellis  
State Capitol, Rm 103  
Juneau, AK 99801 + 1182

5 November 2009

Dear Senator Ellis:

Thank you for sponsoring the legislation to allow Medicaid recipients to utilize two years of benefits to receive a full set of dentures. This will provide a valuable service for Medicaid recipients and will improve the delivery of care for providers. In a true win-win solution this should lessen the overall costs for the Medicaid division when the additional travel costs for delivering the same service twice and the associated medical and dental costs for trying to retain non salvageable teeth during that interim year are factored in.

Respectfully yours

Gary A. Moeller, DDS  
President

L O G A N  
D E N T A L

November 10, 2009

Senator Ellis  
716 W. 4th Ave. Suite 500  
Anchorage AK, 99501-2133

Dear Senator Ellis:

Thank you for sponsoring a bill to allow Medicaid recipients to use two consecutive years of supplemental benefits in the same year to receive upper and lower dentures at the same time. This will greatly help recipients as a single denture when you have no teeth to oppose it is of limited value. I believe it will ultimately lower costs for the Medicaid division, also, when travel benefits are factored in for this multi step procedure that must be repeated twice under the current system.

A case I did earlier this year may illustrate the problem providers' face. Due to HIPAA concerns I am not using names for this story.

I have a dental office in Juneau. Unfortunately, for a variety of reasons, dental offices in other Southeast communities do not usually accept new Medicaid patients. This patient had to travel over from Sitka and needed dentures, both upper and lower. He currently did not have either upper and lowers having lost both sets. The supplemental system for adult Medicaid benefits would cover a single denture, either the upper or lower. The patient, 78 years old and on fixed income, was unable to afford the second set even at reduced Medicaid fees. I wrote a letter Medicaid division, enclosed, outlining the problem and pointing out that travel costs associated with constructing the second set at a later date (when the new year's benefits kicked in) would ultimately cost more than the Medicaid fee for a denture. I received a reply from the division basically saying their hands were tied given the current statutes in place.

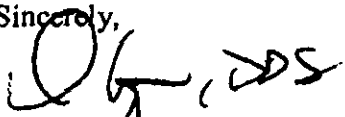
In the case of this patient I did a full set of dentures for the patient and absorbed the cost of construction of the second set. As I write this letter I saw two patients today in the same situation, one who lives here in Juneau that we are constructing an upper denture alone although he has no lower teeth. Currently are plan is construct the lowers after July

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1, 2010. The second patient traveled here from Angoon and lost both his upper and lower dentures 2 weeks ago. His treatment will be further complicated as his old set was apparently ill fitting and led to a large tissue mass on the lower that will have to be removed prior to denture construction.

Sincerely,

A handwritten signature in black ink, appearing to read 'D Logan, DDS'. The signature is stylized and includes the letters 'DDS' at the end.

David Logan, DDS

2237 N. Jordan Avenue, Juneau, AK 99801

Phone: (907) 780-6066 Fax: (907) 780-4274 [info@juneausmiles.com](mailto:info@juneausmiles.com)

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L O G A N  
D E N T A L

December 17, 2008

ACS  
Preauthorizations  
POB 240808  
Anchorage, AK 99524-0808

Re: [REDACTED]  
Medicaid #: [REDACTED]


Dear Sirs:

Mr. [REDACTED] is currently edentulous (without teeth) upper and lower. We have previously preauthorized Mr. [REDACTED] for a lower denture (preauth [REDACTED]) - working with a Sitka Clinic we had not previously seen Mr. [REDACTED].

Mr. [REDACTED] has been without teeth for 6 years. One denture, the maximum allowed under the MEDS system, will provide little improvement for him. Mr. [REDACTED] will be traveling to our office from Sitka for completion of the denture. The travel costs will ultimately cost more than the fee for the denture given the number of appointments required to properly construct a denture.

I am requesting preauthorization for upper and lower dentures (included) for Mr. [REDACTED]. This is a case where everyone will benefit: the state will have less overall costs than a second round of travel costs to construct the other denture after July 1, Mr. [REDACTED] will have opposing dentures to eat with, and my overall costs will be less than repeating the same appointments come July 1.

Sincerely,

  
David Logan DDS

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# The TRUST

The Alaska Mental Health  
Trust Authority

Alaskan Seniors  
**Living Longer Growing Stronger**  
from the Alaska Commission on Aging



**Governor's Council on Disabilities  
and Special Education**

**Advisory Board on Alcoholism  
and Drug Abuse**



**Alaska Mental Health Board**

## **Adjust Cap on Adult Dental Services Reimbursed by Medicaid**

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 and the Alaska Brain Injury Network, jointly support the developing a solution that will allow for the adjustment of the current cap on adult dental services reimbursed by Medicaid.

- Currently, the annual cap for dental services – such as cleanings, exams, crowns, root canals and dentures – is \$1,150 per individual. With the rising cost of dental care, this cap is proving not adequate yet the cap is set in statute and has not been increased in over three years.
- 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."
- Trust beneficiaries continue to list dental services as a priority unmet health needs.
- The challenge this session is to find a current bill or to introduce a new bill that will create a method for adjusting the adult dental Medicaid cap on a regular basis or will at least increase the cap to cover the increase the cost of living increases over a 4 or five year period.

**Therefore, we support a legislative solution that will allow for the adjustment of the current cap on adult dental services reimbursed by Medicaid.**

# SENIOR VOICE

Serving Older Alaskans and Their Families Since 1978

A publication of *Older Persons Action Group, Inc.* 325 E. Third Ave., Suite 300, Anchorage, Alaska 99501

Vol. 32 No. 11 November, 2009

## Desperate senior prompts denture legislation

By SEN. JOHNNY ELLIS

Late last summer, an elderly man walked into my office and threatened to commit suicide. Needless to say, it was a very tense and upsetting situation for me and my staff. This gentleman had come from the Medicaid Adult Dental office, where he had been told that he had a choice – he could receive either the upper half or the lower half of the dentures that he needed, but not both, at least not in the same year. Of course, this set of options was really no choice at all, seeing as how he had no teeth at all. The state's wholly inadequate response to this constituent's unfortunate situation set my office in motion, and I am prepared to introduce legislation this session with bipartisan support that will provide a common-sense fix to an otherwise successful and needed program.

Medicaid Adult Dental was created three years ago. Until that time, Medicaid only covered emergency dental services for low income Alaskans. By expanding the program to cover preventative care – exams, cleanings, root canals, fillings and dentures – the state has saved millions of dollars and patients have avoided painful surgeries as the need for emergency care declines. In addition, good dental health

**I have worked with the Dept. of Health and Social Services to allow patients who qualify for dentures under the Medicaid Adult Dental program to receive their full set of dentures in one sitting.**

is closely linked with decreased risk for diabetes, heart disease, cancer and other serious diseases. Last year, the legislature unanimously made this successful program permanent.

The program limits the care that can be paid for in a single year, which is intended as a cost-control measure, an important feature in these uncertain budgetary times. Unfortunately, these measures go beyond cost control and have impacted the function of the program by limiting patients to half of a set of dentures per year. In public testimony on these limits, it was suggested that a patient could receive the upper dentures on June 30, the final day of the state fiscal year, and the lower dentures on July 1. I don't believe that we should be punishing citizens who happen to require dental care in the fall or winter, and I don't believe that dentists should be forced to schedule the care their patients need to make things more convenient for bureaucrats. This is the kind of frustrating flaw in our

system that drives people crazy and gives government a bad name.

That's why I have worked with the Department of Health and Social Services to develop a way to allow patients who qualify for dentures under the Medicaid Adult Dental program to receive their full set of dentures in one sitting, without destroying the cost-control mechanisms currently in place. The bill will be introduced when the legislature goes back into session in January, and I am pleased to have received bi-partisan support from my colleagues in the Senate.

In fact, as I have continued to work on this issue, I have heard more and more about how much sense this small change makes. A dentist in Juneau told me about the patients he sees from all around Southeast Alaska. The state pays for them to fly to Juneau, pays for their lodging, and pays for one half of their dentures. Then, a little while later, public money is spent to do it all over again for the other half. Allowing him and other

dentists to consolidate the care they are giving into one session will make the program a more efficient use of public money and improve the quality of care received by patients.

State government can be a large and unwieldy bureaucracy, and change is hard to do and often happens slowly. Most of the attention goes to the big issues that attract press coverage or help generate campaign slogans. But sometimes, there are issues that require us to place people over politics and give a direct benefit to the neighbors and constituents we are privileged to serve. It's too late for the gentleman who threatened to kill himself in my office – we worked with him to get his dentures through the existing two-year process – but it's not too late for others in his situation. This may be a small bill, and it won't change the world, but it will improve the lives of a few senior citizens in need – and that's a job I'm glad to do.

*Senator Johnny Ellis represents downtown and midtown Anchorage in the Alaska State Senate and serves as the Majority Leader of the Senate Bi-Partisan Working Group.*

# STATE OF ALASKA

## DEPT. OF HEALTH & SOCIAL SERVICES

### *Alaska Commission on Aging*

SEAN PARNELL, GOVERNOR

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

January 29, 2010

Representative Berta Gardner  
Representative Pete Petersen  
Representative Les Gara  
House Health and Social Services Committee  
Alaska State Capitol - Rooms 424,422, 434  
Juneau, AK 99801-1182

**Subject: Support Letter for HB 265**

Dear Representatives Gardner, Petersen and Gara:

The Alaska Commission on Aging (ACoA) is pleased to offer support for HB 265, a bill to provide access to Medicaid patients who are approved for dentures using a two-year funding cycle for medical assistance benefits to cover the costs for complete and partial dentures in a single fiscal year. Thank you for sponsoring this important legislation.

The Commission believes HB 265 provides a common sense solution that allows patients and their dentists the flexibility to schedule treatment around the oral health needs of the patient, which will improve the quality of care for older Alaskans and other qualifying recipients. Moreover, this legislation enhances the cost-effectiveness of the current Medicaid Adult Dental program by reducing the number of oral surgery visits, medical procedures, and related travel costs required for individuals who need a complete set of dentures but are limited to half of a set of dentures per fiscal year under the existing program. Anecdotally, we have learned that some individuals may even refuse partial extractions in one arch knowing that they could be without teeth for a prolonged period waiting for Medicaid to cover the cost of the other complete denture in the next fiscal year.

Good nutrition is vital for health and wellness across the life span and depends on oral health. Dental pain and missing or decaying teeth can affect dietary choices for seniors that may impact overall health and wellness. 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. Restorative dental care can help to prevent the progression of serious dental disease and discomfort which can result in more costly emergency care.

Older Alaskans utilize the Medicaid Adult Dental program. According to data based on Medicaid claims information for persons age 60 years and older for the period April 1, 2007 thru December 31, 2009, there were a total of 3,104 (unduplicated) seniors served by the Medicaid Adult Dental Program. The average cost for partial dentures for seniors ranges between \$1,085 (for a complete maxillary denture) to \$1,125 (for a complete mandibular denture). The approximate cost for a complete set of dentures is \$2,225. The current program cap is \$1,150 per year.

As we move forward, the Commission respectfully asks for your consideration of our recommendations below to enhance HB 265 and the Adult Dental Medicaid program for qualifying older Alaskans and other Medicaid recipients:

- Allow eligible patients access to two years of total funding as determined by the cost cap of the Medicaid Adult Dental program to permit individuals receiving partial dentures through the program the ability to access remaining benefits under the cost cap should they need additional denture services during the two-year period.
- Pending approval of HB 265, begin work with the Department of Health and Social Services to expand the two-year access of services to phase in other preventative and restorative services allowed under the Medicaid Adult Dental program in FY 2012.
- Adjust the annual cost cap for dental services (currently in statute for the last three years) to address the rising costs of dental care and encourage more participation of Medicaid dental providers.

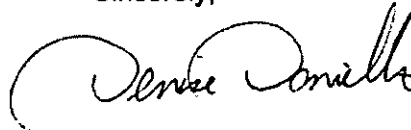
Please accept our sincere appreciation for your efforts to improve the Medicaid Adult Dental program by allowing patients who qualify for dentures under the program to receive their full set of dentures according to a treatment schedule determined by the patient with their dentist. We believe that HB 265 will help to improve health and wellness for many older Alaskans who need dentures and we support passage of this legislation. Please feel free to contact Denise Daniello, ACoA's executive director, by phone (465-4879) or email ([denise.daniello@alaska.gov](mailto:denise.daniello@alaska.gov)) should you have questions or require additional information. Thank you.

Sincerely,



Sharon Howerton-Clark  
Chair, Alaska Commission on Aging

Sincerely,



Denise Daniello  
ACoA Executive Director



AARP Alaska  
3601 C Street  
Suite 1420  
Anchorage, AK 99503

T 1-866-227-7447  
F 907-341-2270  
TTY 1-877-434-7598  
www.aarp.org/ak

November 19, 2009

Honorable Johnny Ellis  
Majority Leader  
Alaska Senate  
716 W. 4<sup>th</sup> Avenue  
Anchorage, AK 99501

Dear Majority Leader Ellis:

On behalf of the 97,000 members of AARP in Alaska, we would like to pledge our support for your bill to establish a two year funding cycle for the adult dental benefit in Medicaid.

We understand you are particularly interested in changing the benefit for dentures so that an adult Medicaid beneficiary would be able to use the funds available for two years to pay for dentures. This makes sense for both the client and the provider.

Older persons in need of dentures often have accompanying nutrition problems. These nutrition problems can cause other health issues and create an overall deterioration in health status. For those who need them, dentures are essential to quality health care. Two-year funding for dentures should be considered sensible prevention with the long term possibility of saving Medicaid funds that would not need to be spent on more serious health care problems resulting from poor oral health status.

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)



November 6, 2009

Senator Johnny Ellis  
Senate Majority Leader  
Alaska State Legislature  
716 W. 4th Ave  
Anchorage, AK 99501  
Fax: (907) 269-017

Dear Senator Ellis;

I am writing on behalf of the Alaska Public Health Association (ALPHA) to extend our support for and thank you for introducing a Bill that will allow Alaska's adult Medicaid recipients to receive a set of dentures within one fiscal year. This Act will meet the needs of patients and dental providers by providing two-years worth of dental benefits for dentures in a single year.

The ALPHA represents over 150 health professionals in Alaska; the primary mission of ALPHA is the enhancement of the public's health. In fulfilling our mission, we support systems that support patient-oriented health service delivery. ALPHA believes that the "Act providing for a two-year funding cycle for medical assistance coverage for dentures" establishes a system enabling patients to receive patient-oriented care.

Thank you for consulting ALPHA in developing this Bill. Please feel free to contact me if you have further questions.

Sincerely,

Karol Fink, MS, RD  
ALPHA Health Policy Chair  
[Karolfink@yahoo.com](mailto:Karolfink@yahoo.com)  
907.227.8178



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February 10, 2010

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 411  
Juneau, AK 99801-1182

RE: HB 265 (Gardner, Peterson, Gara)—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 265, to establish a two-year funding cycle in Medicaid for a very specific limited purpose. The bill is authored by Representatives Berta Gardner, Pete Peterson, and Les Gara.

HB 265 basically changes the benefit for dentures so that an adult Medicaid beneficiary would be able to use the funds available for two years to pay for dentures. This makes sense for both the client and the provider.

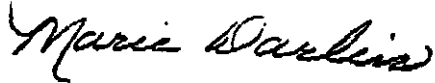
Older persons in need of dentures often have accompanying nutrition problems. These nutrition problems can cause other health issues and create an overall deterioration in health status. For those who need them, dentures are essential to quality health care. Two-year funding for dentures should be considered sensible prevention with the long term possibility of saving Medicaid funds that would not need to be spent on more serious health care problems resulting from poor oral health status.

AARP recommends an "AYE" vote on HB 265.

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: Vice-Chair Representative Tammie Wilson  
Representative Bob Lynn  
Representative Paul Seaton  
Representative Sharon Cissna  
Representative Lindsey Holmes  
Representative Berta Gardner  
Representative Pete Peterson  
Representative Les Gara



# ALASKA NATIVE MEDICAL CENTER



Dr. Thomas J. Kovaleski DDS  
Dental Director  
Southcentral Foundation  
Anchorage, Alaska

To whom it may concern:

As Director of the Southcentral Foundation (SCF) Dental Program I am writing in support of HB265 (Medicaid Coverage for Dentures). This bill would address a flaw in the current system and allow Alaska's adult Medicaid recipients to receive a set of dentures within one fiscal year. This is a practical solution to a situation that has been difficult for patients and providers. SCF provides denture services for Medicaid recipients in our clinics at the Alaska Native Medical Center and the Fireweed Clinic in Anchorage. I thank you for your efforts on behalf of the adult Medicaid recipients.

Sincerely,

Dr. Thomas J Kovaleski DDS.

Senate & House HSS Committees

Senators and Representatives,

RE: SB199 & HB265 "An Act providing for a two-year funding cycle for medical assistance coverage for dentures."  
I have an opportunity to travel way south to visit family that I haven't seen for a long time and will not be in contact to send a message when these bill(s) are heard. Please accept my advance testimony for this important legislation.

I had occasion to visit my dentist here in Fairbanks today and asked him what he thought of this legislation. This is a very experienced former military dentist who has seen everything. He, like so many of our local medical providers, is retirement age but sticking around to help his patients.

Dr. James A. Cerney DDS  
4001 Geist Rd. Suite 5B  
Fairbanks AK 99709  
Ph: (907) 479-3326

Dr. Cerney's response to my question about this legislation was that it has been his experience that dentures fit better when both upper and lower plates are made at the same time, approximately anyway. He told me that he is willing to speak with any legislators that may want to contact him.

He has some days or part days that he may be out of the office, but has an answering service. Since he is willing to have me call after hours if I have a problem I know he would take your call anytime if at all possible. I believe he has been involved in issues through the state dental society, but I don't know who head's that organization to tell you.

I know how touchy dental issues are with me, only it is crowns instead of plates. I suspect there are those who have no other way to get dentures that have an experience of having to have repeat visits to the dentist because of fit problems with the current 1 plate/yr. set-up. I say "no other way" because I don't know anyone who would want the feeling of having to grovel to get one plate at a time and keeping the plate in a box someplace for a year as they wait for the time to pass before work can begin on the second plate.

I wonder if people choose the bottoms or the tops the first year now? I wonder how they make that decision? It is a curious situation that better efforts were not made to avoid this in the beginning.

Please do your best, and remember that the income has to be quite low, and the need quite great for anyone to jump through the hoops to get dentures through Medicaid.

Sincerely,

Doris Robbins  
1281 Overhill Dr.  
Fairbanks AK 99709  
(907) 374-0597

Dear Representative Gardner,

I am writing this brief note to to urge you to support HB265 Medicaid Coverage for Dentures. As a practicing dentist with SEARHC in Juneau, AK, I see on a day to day basis the struggle many of our Alaskan Natives have with their dental care. For many of these patients, Medicaid funds are their only hope for dental care. In many cases, a patient that requires two dental appliances ( upper and lower complete dentures ), does not have enough funding to allow the patient to receive both denture plates in the same fiscal year under the current guidelines. This leaves many edentulous patients without one of their denture plates, making eating difficult for patients who in many cases are elderly.

Currently, SEARHC is looking into the possibility of fabricating dentures on site at smaller villages such as Hoonah and Angoon in Southeast Alaska. Many elderly patients find it difficult or impossible to come to Juneau for denture treatment, this bill would make this program economically feasible.

This is an important bill that would help many people in Alaska. I therefore hope that you will give your approval to this worthy legislation.

Mitch Wilkinson DDS, MS



## **Alaska Dental Society**

9170 Jewel Lake Road, Suite 203  
Anchorage, Alaska 99502-5390  
(907) 563-3003 • FAX: 563-3009  
info@akdental.org

# **SB199/HB265 Medicaid Adult Dental Coverage**

The Alaska Dental Society urges passage of SB199/HB265.

SB199 and its companion bill HB265 remedy an unintended consequence of the adult dental supplemental Medicaid coverage. Currently, under the maximum allowable benefit, a Medicaid recipient may receive either an upper or lower denture. Unfortunately many Medicaid recipients need dentures for both the upper and lower jaws or dental arches. SB199/HB265 would allow a Medicaid recipient to combine two years worth of coverage so they could receive a full denture of both upper and lower dentures at the same time.

SB199/HB265 provides a benefit for everyone involved – the patient, the doctor and the Medicaid program:

- Medicaid recipients benefit from receiving both dentures at once, restoring their appearance, their ability to talk and chew, and most importantly their dignity.
- Providers benefit as they are no longer placed in the uncomfortable position of deciding which arch is in the worst condition. They can also work in a more efficient fashion constructing both sets of dentures simultaneously.
- The state benefits economically. The cost for both dentures, which would normally be borne over 2 years are now in one year but Medicaid recipients would still be limited to the same benefit total for 2 years. Denture patients frequently have to use travel benefits to reach a provider and for dentures this can be especially costly as dentures require multiple appointments. Providing both dentures at the same time would reduce the states travel expenses in half. Removing diseased and abscessed teeth would also save on costly ER and oral surgery visits.



February 8, 2010

Representative Gardner  
Alaska State Legislature

Dear Representative Gardner;

I am writing on behalf of the Alaska Public Health Association (ALPHA) to extend our support for and thank you for introducing a Bill that will allow Alaska's adult Medicaid recipients to receive dentures. This Act will meet the needs of patients and dental providers by providing two-years worth of dental benefits for dentures in a single year.

The ALPHA represents over 200 health professionals in Alaska; the primary mission of ALPHA is the enhancement of the public's health. In fulfilling our mission, we support systems that support patient-oriented health service delivery. ALPHA believes that the "Act providing for a two-year funding cycle for medical assistance coverage for dentures" helps establish a patient-oriented care system.

Please feel free to contact me if you have further questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Karol Fink". The signature is fluid and cursive, written in a dark ink.

Karol Fink, MS, RD  
ALPHA Health Policy Chair  
[Karolfink@yahoo.com](mailto:Karolfink@yahoo.com)  
907.227.8178