Better Oral Health — and Better Overall Health — for Wisconsin

A Bipartisan Agenda for a Healthier Wisconsin: Reducing Barriers to Dental Care



Healthy Choices for Wisconsin:

- Update the Wisconsin Dental Practice Act to ensure more residents receive the care they need
- Encourage early prevention to stop dental problems before they start
- Develop incentives for new dentists to settle in underserved areas
- Better support Wisconsin's dental assistance programs
- Remove dental services from the Southeast Wisconsin Medicaid HMO program

Thousands of Wisconsin children and adults suffer from untreated dental problems. Studies show poor oral health may be linked to heart disease, stroke, diabetes, pre-term childbirth and oral cancer. Oral health is critical to overall health, and ensuring residents have proper dental care is important to our state economically and socially.

Dentists are doctors of oral health. They have the training and education to relieve pain and make people well — but they can't solve the state's dental crisis alone. The Wisconsin Dental Association's 2,900 members are committed to working with key policy leaders to find a solution. As part of that effort, the WDA has identified positive, viable "Healthy Choices" to remove barriers to dental care for Wisconsin residents.

Policymakers and dentists now have an opportunity to work together on these "Healthy Choices" to improve oral health — and overall health — in our state.

WDAHealthy Choices

Please contact WDA Government Services
Director Mara Brooks at (608) 250-3442 or
mbrooks@wda.org if you have questions or
would like to discuss working together to
make "Healthy Choices" for Wisconsin.

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Addressing Wisconsin's Oral Health Needs

A Bipartisan Agenda for a Healthier Wisconsin



The answer to ensuring all Wisconsinites have the dental care they need to be healthy isn't more dentists — in fact, a recent report shows Wisconsin will have enough dentists to meet residents' needs through 2020. There is, however, a major gap between the number of low-income people, including hard-working Wisconsin families with children, who need dental care and their ability to easily access that care. WDA proposes several "Healthy Choices" to help close that gap.

As new and returning policymakers embark on the 2011-2012 Legislative Session, we urge that these "Healthy Choices" become priorities for a healthier Wisconsin:



Update the Wisconsin Dental Practice Act to help more people obtain care.

Two basic changes to the Wisconsin Dental Practice Act will expand access to oral health care. Making the "Healthy Choice" to allow the delegation of more services to skilled dental assistants under the direction and supervision of a licensed dentist will expand the capacity of dental offices currently treating low-income and Medicaid patients. Permitting trained dental hygienists who work in conjunction with the state Division of Public Health or a private dentist to provide preventive services in more settings will expand services to Medicaid and low-income patients while maintaining a critical link to regular care.

■ Emphasize prevention to stop dental problems before they start.

Good personal oral health habits, such as daily brushing, flossing and eating a balanced diet, have a direct impact on dental health. Incorporating a public education plan into the Medicaid and BadgerCare programs will help Wisconsin's low-income individuals and families. It also will save state money that would otherwise be used to treat costly dental disease. It's a "Healthy Choice."

WDA Healthy Choices WISCONSIN DENTAL ASSOCIATION

 Encourage and provide incentives for new dentists to settle in underserved areas.

Wisconsin has enough dentists to serve the needs of its residents, but there are few incentives for new dentists to locate in rural and inner-city communities. Making the "Healthy Choice" to create and support innovative and meaningful student loan and grant programs would help attract more young dentists to Dental Health Professional Shortage Areas and put oral health care within reach of more Wisconsin families.

Adjust funding for Wisconsin's dental Medicaid,
 BadgerCare and BadgerCare Plus programs.

State funding for these programs is among the lowest in the nation, which creates a barrier to dental care for many people. Dentists donate millions of dollars in treatment and volunteer time to help, but current funding levels don't even cover supplies or other business costs. Adjusting state funding to market-based rates would be a "Healthy Choice" and help patients obtain care in Wisconsin.



The current structure is bureaucratic, adds no value and reduces available resources for actual care. Making the "Healthy Choice" to convert dental coverage to a fee-for-service system would allow taxpayer dollars to be spent more efficiently and enable more people to receive more care.



DENTISTS WANT TO HELP

Dentists spearheaded the efforts of 900-plus volunteers who came together in June 2010 for the second WDA and WDA Foundation Mission of Mercy. More than 2,000 adults and children received \$880,000 in free dental care over two days. However, charity events won't meet all the state's dental needs. "Healthy Choices" can help Wisconsin families get oral health care when and where they need it.

The Need for "Healthy Choices"

What Your Constituents Are Saying

"This morning, we walked the (Mission of Mercy) line at 4:45 am, and we had 325 patients in line. And as we walked the line they said, 'God bless you, thank you, you're angels.' It just shows that any community, people have a hard time getting access to care. A lot of these patients were promised care from the state, and the state has not come up to the plate to provide the care they promised for these poor people."

Dr. Gene Shoemaker, Waukesha
WDA President and 2010 Mission of Mercy State Chair

"Everyone should have dental care, whether they have insurance or not. There should be some kind of plan out there to help people. There's BadgerCare, but you have to go hundreds of miles away just to get a cleaning, or some kind of filling or something like that. I think there should be some kind of policy...for people to get helped like that."

Jim, Sheboygan

"After serving as a Medicaid provider for 20 years, I was forced to withdraw from the program when state funding failed to keep pace with the growing number of participants. I could not absorb the increasing financial loss as a small-business owner and I refuse to shift these costs onto my private-pay patients.

Dr. Mark Barrette, Beaver Dam

"I'm not looking to make a profit at all. What's happening is basically we're getting 30 cents on the dollar, and in most dentists' offices our overhead runs 65 percent. (Current funding levels) don't even cover a lab bill if we were to do dentures for a patient."

Dr. Julie Fox, Wausau

"I wanted my daughter to see a dentist, and we haven't been able to get her in to see one since birth because no one takes medical assistance or if they do, they don't accept new patients. She's had a cavity for a year and a half now and I can't get her in anywhere, so it's very frustrating. You don't like to see them suffer or be in pain."

Jan, Sheboygan

"(Mission of Mercy) is a wake-up call for anyone that doesn't understand the need that's around. There's a big, big need for care - for children in particular - in the state of Wisconsin and nationally. We're here at Mission of Mercy to do a little drop in the bucket for the big problem that exists. The government needs to help us."

Dr. Nicolet De Rose, Racine

"There's limited access for the underinsured and the non-insured all through the state. We need to get together with our local legislators, dentists and physicians to help with the health of this population. I feel they're being neglected. No child should have pain with a toothache. No child should have to be educated on how to take care of their teeth.

Dr. Susan Cable, Kenosha

"I've been a Medicaid provider my whole career, and I've seen the reimbursement rate drop from 80 percent to 38 percent, and you just can't make ends meet. When the state reimburses us for 38 cents on the dollar, and it costs us 65 or 68 cents to treat the patient, it's a money-losing proposition."

Dr. Conrad Nenn, Milwaukee