

Testimony to House Human Services Committee, May 6, 2015

Madam Chair and Members of the Committee,

My name is Peter Youngbaer, and I'm testifying today as the Executive Director of the People's Health & Wellness Clinic (PHWC), located in Barre. We have served the greater central Vermont community for 21 years now, and I'm in my tenth as ED. PHWC is one of Vermont's 10 free clinic programs, and a member of the Vermont Coalition of Clinics for the Uninsured (VCCU). Both PHWC and the VCCU are in favor of S. 20, relating to Dental Therapists.

As the Executive Director of a clinic for the uninsured and underinsured, now in my tenth year, I can tell you that access to oral health is the single largest problem facing our patients. Last year, 44% of our patients had not seen a dentist in more than five years, or never. Let me tell you what it's like.

For preventive work, the only option is self-pay, often beyond the reach of our patients without insurance. For those with Medicaid, it's virtually impossible to find a dentist willing to take a new patient. At our clinic, we helped hundreds of people sign up for Medicaid through Vermont Health Connect, but the dental benefit is a benefit on paper only, if no one will see you. Further, the health plans on Vermont Health Connect have no oral health benefit for adults. General Assistance Emergency Vouchers are available for those completely financially destitute and in such pain that an extraction is needed, but only two providers in central Vermont accept them. That leaves the hospital emergency room as the only alternative for care, where they may receive an antibiotic or painkiller, but no treatment for the underlying issues. To allow this suffering to continue unaddressed is unacceptable.

Almost two years ago, in July, we began a dental referral program with a small group of central Vermont dentists. This came about after a year and a half of planning, studying various models, and

outreach to area dentists. We had dentists, hygienists, the Health Department, and our own board and staff on the planning committee. Patients eligible for referral must have no insurance, and are screened for income eligibility. Our Oral Health Case Manager, a registered dental hygienist (RDH), matches the patient with a participating dentist, who has agreed to treat the patient for free, one at a time. This is a very limited service, as match ups aren't always available. We needed to do far more.

Dentists will tell you that most of what they see can be prevented. That's why, in November, at the People's Health & Wellness Clinic, we began a new hygiene and oral health education service for our patients. It's been only one day a week, but thanks to a new annual donation from Central Vermont Medical Center, part of the University of Vermont Health Network, who recognized the crying need for adult oral health care in its 2013 Community Health Needs Assessment, we are currently recruiting another hygienist to add a second day a week. We're currently booked out into July. Still, this is really only a drop in the bucket, but we hope this will head off the need for more involved and expensive treatment later on for at least some people.

While hygiene services are an excellent upstream preventive program, the demand for comprehensive oral health is simply overwhelming. It has been for years, and is destined to remain so unless there is additional provider capacity brought to the system. In fact, I asked my Administrative Assistant to track for two weeks (April 18-30) patient inquiries for oral health that we could not meet – we had 18 calls that we had to turn away, a rate of 288 per year.

The primary goal of S. 20 is to increase access by creating a mid-level, highly-trained member of the dental practice team. The newly-licensed Dental Therapists will practice under the general supervision of a dentist. It's important to appreciate the distinction between general supervision and direct supervision, which requires a dentist to be present on site. Under general supervision, in addition to be able to work at a dentist's practice, it enables the Dental Therapist to practice off-site - such as in our Clinic, schools, or other public health settings, thus creating far more opportunities to serve the public, while not restricting the time of dentists, whose time is already in short supply.

This is not a new model for Vermont. It's the model we use for our hygiene program, where the hygienist works under the general supervision of a dentist who is not on site. This enables our hygienist to see patients all day long, greatly increasing the number of people able to be served. Of course, she is only doing hygiene and oral health education, but also assessing patients for referral to dentists for

more involved care, if one is available. We have a great dentist, and he's agreed to be the supervisor for our second hygienist, as well. By the way, our sister clinic in Addison County, the Open Door Clinic, just last week began a similar service. This is being provided at the Bristol federally qualified health center, who is opening their facility for use by Open Door. The director of that FQHC dental program, by the way, is Dr. Patrick Rowe, a dentist who is the former State Oral Health Director for the Vermont Department of Health, and has testified in favor of S. 20 as an excellent economic model for his FQHC clinic. This is a model that works, that we already have in place in Vermont, and we're glad to see it in S. 20, as it will provide the greatest access to underserved people.

We urge you to support S. 20 and hope that you pass the bill this year. It will take a couple of years for dental therapists to start graduating from the program, so waiting another year only delays the time that Vermonters will benefit from the increased access to care. The bill is a rare opportunity to provide increase access to much-needed health care, without a big increase in cost. Indeed, the only money involved are modest licensing fees in the bill to support the regulatory functions in the Office of Professional Regulation. The bill is also a workforce development bill for Vermonters, something sorely needed in today's economy.

A generation ago, we faced a similar shortage of primary care doctors in the medical field. The addition of physician assistants and nurse practitioners, or Advanced Practice Registered Nurses, has been a god send in filling that void. Adding dental therapists – essentially advanced practice dental hygienists - to the oral health team would be the single largest step Vermont could take to providing a future of access to quality oral health care for all Vermonters. Thank you.

Peter Youngbaer

Executive Director, People's Health & Wellness Clinic