

MINUTES
SENATE HEALTH & WELFARE COMMITTEE

DATE: Wednesday, February 20, 2019

TIME: 3:00 P.M.

PLACE: Room WW54

MEMBERS PRESENT: Chairman Martin, Vice Chairman Souza, Senators Heider, Lee, Harris, Burtenshaw, Bayer, Jordan, and Nelson

ABSENT/ EXCUSED: None

NOTE: The sign-in sheet, testimonies and other related materials will be retained with the minutes in the committee's office until the end of the session and will then be located on file with the minutes in the Legislative Services Library.

CONVENED: **Chairman Martin** called to order the meeting of the Senate Health and Welfare Committee (Committee) at 3:00 p.m.

H 59 **Representative Monks** introduced **H 59**, to Revise an Age Requirement for Organ Donation, and requested a Do Pass recommendation. This bill introduces a technical correction to code references missed in 2018, when the age for donation consent was lowered to age 15 from age 16. Statute still requires parental consent. A parent available at the time of the minor's death has the option to revoke consent.

MOTION: **Senator Nelson** moved to send **H 59** to the floor with a do pass recommendation. **Vice Chairman Souza** seconded the motion. The motion carried by **voice vote**.

GUBERNATORIAL APPOINTMENT HEARING: **Chairman Martin** welcomed David Jeppesen, under consideration for gubernatorial appointment as the Director of the Department of Health and Welfare (Department). **Director Jeppesen** stated that he is a fifth generation Idahoan who left the state for higher education, then worked overseas, and is happy to have returned home. He believes in the Department's strategic goals and believes Idaho has a leadership role in the United States for providing access to affordable health care. He emphasized the need to give people a hand when they need a hand, and to become as self-sufficient as possible; to break the cycle of poverty; and to be part of the solution to create a healthier, safer, and more self-sufficient Idaho.

DISCUSSION: **Senator Jordan** asked Director Jeppesen to speak to his internal management goals. **Director Jeppesen** outlined his goals to move away from the reactive management model, create transparency and collaboration, to reduce red-tape, and to partner instead of "police". **Chairman Martin** and **Vice Chairman Souza** complimented him on his achievements in such a short period of time in his new capacity as Director.

GUBERNATORIAL APPOINTMENT HEARING **Chairman Martin** welcomed John Tippetts, under consideration for gubernatorial re-appointment as the Director of the Department of Environmental Quality. **Director Tippetts** outlined his strategic plan and process improvements. He spoke to attaining National Pollutant Discharge Elimination System (NPDES) primacy for municipalities and plans to phase in industry by 2021. He identified challenges facing his department: losing long-term staff to retirement and managing Environmental Protection Agency (EPA) submittal actions. **Chairman Martin** expressed his appreciation for Director Tippetts' successful efforts to help Idaho achieve primacy.

S 1129

Tyrel Stevenson, Attorney and Legislative Director, Coeur d'Alene Tribe, presented **S 1129**, to provide for Dental Health Aide Therapists (DHATs), and requested a Do Pass recommendation. This bill represents significant rework of **S 1062** that was held by the sponsor prior to committee action and Mr. Stevenson believes it is a good compromise. **Mr. Stevenson** outlined the changes to the bill as follows: page 3 restricts the scope of practice for dental therapy to tribal reservations with the exception of tribal boundary border communities; page 6 requires that a dental therapist graduate from an American Dental Association (ADA) accredited program; page 12 sets a limit to the number of dental therapists under the supervision of one dentist to three DHATs.

DISCUSSION:

Vice Chairman Souza welcomed the work that went into this compromise and asked for assistance in finding language in the bill that addresses the scope of practice. **Mr. Stevenson** referred her to page 2, line 12, that states the Board of Dentistry will enter into negotiated rulemaking to establish the scope of practice. **Senator Harris** inquired where in Idaho DHATs might practice besides Plummer. **Mr. Stevenson** replied they would practice within the tribal boundaries for each of the five tribal areas and their boundary communities. Discussion ensued regarding the complicated overlap between the Indian Health Service (IHS) and the Public Health Service (PHS). The IHS sets up clinics working with commissioned officers from the PHS. Tribes can contract for services with federal agencies. Practitioners must hire staff working for the IHS, or directly contracted by the tribe. **Senator Harris** inquired where accredited programs are located. **Mr. Stevenson** stated that there is currently only one program in the United States, in Alaska. That program has applied for, and is awaiting, accreditation.

TESTIMONY:

Dr. Rachel Hogan, Doctor of Dental Surgery (DDS), spoke in favor of the bill. Dr. Hogan practices in Northwest Washington and employs a DHAT that was trained in Alaska. She has been in practice for 17 years and travelled to Alaska to observe and assess their program. She stated she was once a skeptic, but is now an advocate for DHATs. The addition of a DHAT makes for a more robust dental team, decreases patient wait times, increases patient load, and brings a component of cultural competency and access.

Rochelle Ferry, DHAT, graduated from the program in New Zealand and spoke in favor of the bill. Ms. Ferry grew up in rural Alaska where women had a cultural habit of smiling with their hands over their mouths to hide dental decay. There is a much higher rate of decay on reservations. At age 16, Ms. Ferry had her two front teeth knocked out and that injury motivated her to pursue training and improve care. DHATs relieve workload on the dentist for routine care by performing fluoride applications, x-rays, and simple fillings, thus allowing the dentist to spend time on crowns and other more complicated procedures. Ms. Ferry was a DHAT for a village reporting to a dentist who made periodic trips to the village as needed. **Senator Jordan** inquired how Ms. Ferry's presence in the village increased dental health awareness. **Ms. Ferry** described home visits to elders accompanied by a registered nurse where she encountered a lot of fear and was able to persuade elders to come into the dental clinic for care.

Dr. Taylor Wilkens, DDS, Dental Director, Plummer Marimn Tribal Clinic, spoke in favor of the bill. He veled to Alaska to assess their DHAT program and was very impressed by what he found, stating it is similar to his own dental school experience. **Dr. Wilkens** reported that the dental therapy student working in the Plummer clinic is well-connected to the community. Dental therapists allow upper-end scope of practice for dental hygienists and dentists.

Michael McGrane spoke in opposition to the bill, on behalf of the Idaho Dental Hygienists Association. Mr. McGrane discussed differences in education levels for a hygienist versus a DHAT, suggesting that hygienist academic requirements are more rigorous. **Vice Chairman Souza** queried if Mr. McGrane would support this new position in the future with additional education requirements. **Mr. McGrane** answered in the affirmative, noting a national trend for this emerging practice. **Chairman Martin** inquired if having the practice limited to reservations provided any comfort level. **Mr. McGrane** replied it does not, adding that he feels that it sets a bad precedent: if a practice is acceptable for a tribal population, it should be applied to everyone.

Dr. Steve Bruce, Doctor of Medicine in Dentistry (DMD), Legislative Liaison, spoke in opposition to the bill on behalf of the Idaho State Dental Association (ISDA). The ISDA opposes creation of a new mid-level practitioner, stating the current workforce model works well and the new level poses a risk to quality of care. Dentists receive 8 to 12 years of post-secondary training. The ISDA supports the changes made to this new bill, while still opposing creation of a new position. The ISDA respects tribes as sovereign, and is therefore neutral.

Michele Watkins, Dental Hygienist, Wood River, American Dental Hygienists Association (ADHA) member, spoke in opposition to the bill. The ADHA was not included in negotiations and had requested to be. **Ms. Watkins** stated that hygienists are the true mid-level dental practitioners and they want to see the same level of care for all Idahoans regardless of tribal affiliation.

Suzanne Jameson, a twenty-year practicing hygienist and member, Idaho Dental Hygienists Association, spoke in opposition to the bill. **Ms. Johnson** listed complex medical conditions that hygienists encounter and noted that the hygienist academic curriculum includes head and neck anatomy coursework. She went on to report that half of the population suffers periodontal disease and the hygienist practice model focuses on prevention, not extraction. The standard of care should be equal for all Idahoans.

Dr. Wayne Spector, DMD, testified in opposition to this bill. **Dr. Spector** stated he graduated from dental school in 1976 and headed to Canada where he observed that decay was rampant and the focus was on restoration, not prevention. He expressed a desire to see all Idahoans treated at the same level of care, including Medicaid recipients. He recommended putting more funding into prevention and to increase hygienist training instead of creating a new mid-level position. **Chairman Martin** inquired if hygienists were widely available. **Dr. Spector** replied that it depended on location.

Dr. Mark Lambert, DMD, spoke against the bill, stating that Medicaid reimbursement, not access to care, is at issue. He expressed surprise that the ISDA position on this issue is neutral. He went on to state that comparing Alaska to Idaho was an "apples-to-oranges" comparison and expressed his opinion that negotiated rulemaking should be conducted before this bill becomes law.

Chantel Eastman, representing the Nez Perce Tribe, testified in support of the bill. **Ms. Eastman** reported that it is difficult to maintain two dentists in the community, as they are drawn away to more affluent opportunities. There is currently only one dentist serving 4,900 patients. DHATs offer a positive impact to the tribal community by bringing qualified professionals who are connected to the community, and with potential for longevity in service. Further, DHATs reduce workload on the dentist in a practice, allowing the dentist to focus on more complex needs.

Dr. Kevin Bauer, DDS, testified in opposition to the bill and gave a history of the advent of DHATs. The position began in 1910 in New Zealand in an effort to ready military recruits for duty. In his opinion, it is a third world, socialized medicine model. Most who enter this career path leave after 2 years to pursue hygienist accreditation. In Idaho, a dental hygiene degree is still needed.

DISCUSSION:

Senator Heider reminded Dr. Bauer that the purpose of this bill was to provide more care to tribal populations and asked if he did not see this as a step forward for those under-served areas. **Dr. Bauer** responded that, if implemented, it is not likely to succeed. According to Dr. Bauer, Minnesota created a dental therapy program that has attracted few students. He went on to report that there is no shortage of hygienists and even the state of Arizona requires the hygienist education model.

Mr. Stevenson reported that this bill uses the Arizona language that Michigan also used and just adopted. This is a Commission on Dental Accreditation (CODA) accredited program. A hygienist interested in the program would have a head-start in the curriculum. **Senator Burtenshaw** expressed confusion over statements made that there was ISDA collaboration, and that they are neutral, yet do not support it. **Chairman Martin** clarified that the association is neutral, but some members oppose it; as does the Board of Dentistry.

Senator Nelson had a question for Dr. Hogan, regarding her testimony that DHATs allow for dentists and hygienists to work at the highest levels for their scope of practice. **Dr. Hogan** explained that DHATs perform simple procedures like exams and cleaning, freeing up time for those other providers.

Senator Bayer asked for confirmation of the ratio of patients to dentists for the Marimn Clinic. **Mr. Stevenson** reiterated that there are 4,900 patients to one dentist. **Senator Lee** commented that some of her constituents were surprised to see this legislation. **Mr. Stevenson** responded that the plan was to promulgate a rule, but the Attorney General's Office informed him that legislation was necessary. **Senator Bayer** recapped her understanding of the matter: dentists do not welcome Medicaid patients; Medicaid expansion could increase Medicaid patients; there are 4,900 patients under the care of one dentist at the Marimn Clinic; and this new provider level could provide relief to tribal populations.

Senator Harris cautioned against adding a new position to an industry that did not ask for it. **Senator Jordan** acknowledged that this is an opportunity to provide care where this is none; a small step, but progress. She also explained that negotiated rulemaking can follow the bill. **Senator Heider**, noting that none of us have to live on a reservation, stated that this bill allows the DHAT position to be tried where the need exists. **Vice Chairman Souza** thanked Mr. Stevenson and Elisabeth Criner for their collaborative effort and stated that there is an immediate need for this support. It is a good opportunity for the tribal population to receive care within their own culture where there have been trust issues. She assured dentists who testified and expressed concern over statewide implementation that this initiative is limited to tribal lands.

MOTION:

Senator Nelson moved to send **S 1129** to the floor with a do pass recommendation. **Senator Bayer** seconded the motion.

**ROLL CALL
VOTE:**

Chairman Martin called for a roll call vote. **Chairman Martin, Vice Chairman Souza, Senator Heider, Lee, Harris, Burtenshaw, Bayer, Jordan, and Nelson** voted aye. **Senator Harris** voted nay. The motion carried.

ADJOURNED:

There being no further business at this time, **Chairman Martin** adjourned the meeting at 5:00 p.m.

Senator Martin
Chair

Margaret Major
Secretary