

Date: February 14, 2017

To: House Committee on Health and Human Services

From: John T. Fales, Jr., D.D.S., M.S., President, Kansas Dental Association and practicing pediatric dentist in Olathe, Kansas

RE: **Opposition to HB 2139 – Dental Therapists**

Chairman Hawkins and members of the committee, I am John Fales and I am a pediatric dentist with a practice in Olathe, Kansas. I am currently the President of the Kansas Dental Association and President of the Kansas Association of Pediatric Dentists and I am here representing those organizations and myself. I have practiced dentistry in Kansas since 1982 and have specialized in pediatric dentistry since 1989. I have been an active Medicaid provider since 1982 and I am here today because I am **strongly opposed to House Bill 2139.**

House Bill 2139 is being promoted as the fix for access to dental care issues in Kansas. I respectfully disagree that a dental therapist is needed here. It is my belief that the access to dental care in Kansas is much more complicated than just adding a new provider. Kansas has dentists available to provide services for all who want those services.

My biggest concern with the creation of a non-dentist provider who would be performing irreversible dental care is the damage that can be done on so many levels to the children of Kansas. We need to be honest about who these new providers would be seeing. Currently, and into the foreseeable future, in Kansas, there is no adult Medicaid benefit for anything but

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watching their child have this performed and the supervising dentist is eight hours away across the state. Managing a situation like this requires training, education and experience that a dental therapist will not have. Simple procedures are only simple with the ability to look back after it is completed. Many apparently simple procedures become incredibly complex.

Children who are at the greatest risk for dental cavities are the children that these non-dentist providers would be seeing. They are the children who statistically speaking are the most medically fragile, have the highest decay rates and present with the most difficult situations to manage for the dentist. Is a minimally trained non-dentist the answer to their dental needs? I do not think so.

It is my opinion that a non-dentist provider of restorative dental care is not the answer for Kansas. The state of Minnesota created a dental therapy program eight years ago that is failing to place a majority of non-dentist providers in rural areas as it was advertised to accomplish. Today, there are 55 practicing dental therapists in Minnesota, of that number, only 7 practice in certified under-served areas. To contrast, in Kansas the KDA has in place a scholarship program funded with private dollars, the Kansas Initiative for New Dentists (KIND) program has successfully located 5 dentists in under-served communities in Kansas and there are 4 more students soon to graduate who will go to 4 more communities. These are not apprentice dentists, but fully licensed and qualified dentists willing to live and practice in these communities.

In closing, I would leave you with two thoughts that guide my way every day. The first, “do what is best for the children.” The second, “always do the right thing, as your character is measured by what you do when no one is watching.” We are being watched. Let’s do the right thing and not make House Bill 2139 a law in Kansas.

Thank you for your time and consideration.

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