March 31, 2023

Minnesota Safety Net Oral Health Alliance

The Honorable Sen. Melissa Wiklund, Chair Senate Health & Human Services Committee 95 University Avenue W. St. Paul, MN 55155

Dear Chair Wiklund and Committee Members:

We, the undersigned dental providers, make up the Minnesota Safety Net Oral Health Alliance (the "Oral Health Alliance"), a coalition of safety net dental providers who provide oral health care to underserved communities across the state. We are writing you today to offer our support for three currently included in the omnibus health finance bill (S.F. 2995).

Clinical Dental Education Innovation Grants: The Oral Health Alliance is very supportive of the language which would dedicate roughly \$1.2 million per year towards grants to educational institutions and clinical training sites that are working to expand access to dental care. The Oral Health Alliance is very supportive of any support for the development of the next generation of dental professionals.

Rebasing the Medical Assistance Rate Schedule: The Oral Health Alliance strongly supports the language in S.F. 2995 that would bring the underlying fee schedule into the 21st Century by using 2022 claims data to support a more accurate understanding of the cost-of-service delivery going forward. The proposal also calls for subsequent rebasing of the rate schedule every three years to support a more economically responsive approach to dental reimbursement.

Restoring MA Coverage for Adult Dental Services: The Oral Health Alliance believes strongly that access to quality dental care is fundamental to public health and supports the language in S.F. 2995 that restores a full adult dental benefit set for individuals on Medical Assistance.

As S.F. 2995 moves through the committee process, the Oral Health Alliance respectfully requests that the committee consider funding the Critical Access Dental ("CAD") Infrastructure Program contained in S.F. 1008 (Boldon). That program would support the construction of new clinics, the expansion or renovation of existing clinics, or the acquisition of dental equipment (including that used for mobile and/or tele-dentistry). CAD providers are uniquely suited to serve the communities enrolled in MA. Without additional service delivery equipment and space, CAD providers lack the resources to meet the 2024 target of 55%. This lack of oral care delivery infrastructure is acute. Please see our white paper attached and current service levels by county.

The Minnesota Oral Health Alliance looks forward to continuing to work with Sen. Wiklund and the members of this committee the legislative session progresses. Please do not hesitate to reach out if we can be of any assistance.

Sincerely,

The Minnesota Safety Net Oral Health Alliance