

- SUBJECT:** Creating a dental health program for nursing-home residents
- COMMITTEE:** Human Services — committee substitute recommended
- VOTE:** 7 ayes — Naishtat, Chavez, J. Davis, Ehrhardt, Noriega, Raymond, Villarreal
0 nays
2 absent — Telford, Wohlgemuth
- WITNESSES:** For — Bruce Bower, Texas Senior Advocacy Coalition; Alison Dieter, Texas Gray Panthers; Farnam Farzam, Texas Dental Association; Alan Hardy, American Association of Retired Persons; Robin Hayes, Texas Health Care Association; John Willis, Texas Department of Aging;
Registered but did not testify: Teresa Aguirre, Texas Association of Homes and Services for the Aging; Beth Ferris, Texas Advocates for Nursing Home Residents; Leslie Fernandez, National Association of Social Workers; Clay Jenkins, Brown Dental Health; Ramon Noches; Lawrence Oliver, Mobile Dental Care; Hannah Riddering, Texas National Organization for Women; Linda Rushing, Texas Conference of Catholic Health Facilities; Lee Spillar, Citizens Commission on Human Rights; Norma Wood, American Association of Retired Persons

Against — None
- BACKGROUND:** Medicaid is the state-federal health benefit program for low-income, elderly and disabled people. Medicaid benefits include institutional long-term care services, such as those provided to residents of nursing homes, personal care facilities, and intermediate care facilities for the mentally retarded (ICF/MR).

Medicaid provides dental services only in acute cases. However, if a person has income and pays for a portion of his or her nursing-home bill up front, that person can be reimbursed for dental services and other noncovered health services. In such cases, Medicaid reimburses the nursing home, which, in turn, reduces the resident's bill to offset the cost of the services. Residents who do not have income and do not pay a portion of their nursing-home bills cannot participate in this reimbursement.

DIGEST: CSHB 479 would create a dental health program for nursing-home residents. It would direct the Texas Department of Human Services (DHS) to provide annual dental services to nursing-home residents that would include an examination by a licensed dentist as well as cleaning and X-rays, if practical in view of the resident's health. This program would be subject to availability of funds.

The Health and Human Services Commission (HHSC), in cooperation with DHS and the Texas Department of Health, would have to develop a fee schedule for the services and to study the costs and benefits of the program. Not later than December 1, 2002, the HHSC commissioner would have to report its findings to the governor, lieutenant governor, House speaker, and officers of the related standing committees of the Senate and House.

The agencies would have to seek any necessary federal waivers or authorizations needed to implement the bill's provisions. Implementation could be delayed until the federal waivers or authorization was granted.

The bill would take effect September 1, 2001.

SUPPORTERS SAY: CSHB 479 would improve the overall health of nursing-home residents. Oral health is a significant contributor to overall health and well-being. Not only does regular dental care prevent diseases such as gum disease, but it also contributes to nutrition and quality of life.

Dental services are not new for most Medicaid recipients. CSHB 479 simply would provide a different payment method that would increase access to these services. Because poor elderly people often cannot afford the up-front cost of dental care, they usually go without. Also, people without income have no way of participating the reimbursement system. Because Medicaid would pay for these services for people with some income, the state should make them accessible to all nursing-home residents.

All Medicaid residents of nursing homes should receive dental care, whether or not they have teeth. Dental care addresses the health of the entire mouth. An annual checkup would serve as a screening for other mouth diseases such as mouth cancer, thrush, and infection. The cleaning portion of the checkup would be provided only to people for whom it was appropriate.

OPPONENTS
SAY:

Nursing-home residents who are on Medicaid do not need mandatory annual checkups by a dentist to ensure oral health. These people have access to physicians and nurses whom they can alert if they are experiencing any problems. It would be more convenient for residents and less expensive for the state to provide dental services at will, rather than in the form of a mandatory checkup.

In effect, CSHB 479 would increase Medicaid services by providing dental care to people who otherwise would not have sought it. In an environment of rising costs and utilization, the state should be cautious about requiring people to use Medicaid services.

NOTES:

The committee substitute added the provision that would make the program subject to availability of funds.

The bill's fiscal note estimates that a dental health program for nursing-home residents would cost the state about \$10.1 million in general revenue in fiscal 2002-03 and a similar amount the following biennium. An item in Article 11 of the House-approved version of SB 1 by Ellis, the general appropriations bill for fiscal 2002-03, would appropriate this amount to DHS for dental services for nursing-home residents.

The companion bill, SB 34 by Zaffirini, passed the Senate by a voice vote on April 13 and reported favorably, without amendment, by the House Human Services Committee on April 23, making it eligible to be considered in lieu of HB 479.