

EMBARGOED MATERIAL

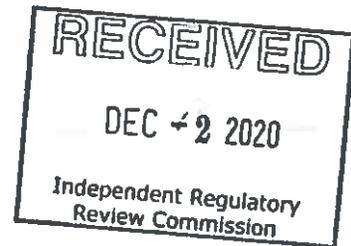
Kathy Cooper

From: Stephen Hoffman
Sent: Wednesday, December 2, 2020 8:20 AM
To: Kathy Cooper
Subject: FW: IRRC #3228

From: IRRC
Sent: Wednesday, December 2, 2020 8:13 AM
To: Laura Campbell <lcampbell@irrc.state.pa.us>; Corinne Brandt <cbrandt@irrc.state.pa.us>
Cc: Fiona Cormack <fcormack@irrc.state.pa.us>
Subject: FW: IRRC #3228

#3228 – Embargoed Material

From: Kathryn Falcone [<mailto:kjfalcone9@gmail.com>]
Sent: Tuesday, December 1, 2020 9:52 PM
To: IRRC <irrc@irrc.state.pa.us>
Subject: IRRC #3228



CAUTION: ****EXTERNAL SENDER**** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Chairman Bedwick,
Please support the regulation to expand the practice sites for the Public Health Dental Hygiene Practitioner. This will help increase access to care and provide educational opportunities on the benefits of oral health and oral health care. All individuals should have a "dental home." Increasing access will help promote oral health care.

Thank you for your support of this regulation.

Kathryn Jean Falcone, RDH, PHDHP



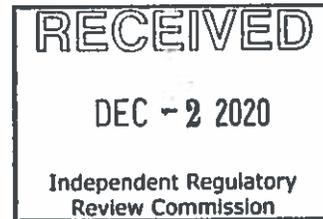
It's
Wholecare.

EMBARGOED MATERIAL

3228

December 1, 2020

The Honorable George D. Bedwick, Chairman
Independent Regulatory Review Commission
14th Floor, Harrisstown 2
333 Market Street
Harrisburg, PA 17101



Dear Chairman Bedwick:

Gateway Health Plan, a Managed Care Organization that manages the healthcare of over 300,000 Medicaid recipients, is pleased to convey its support for the final regulation 16A-4633, Expansion of Practice Sites for the Public Health Dental Hygiene Practitioner, and to suggest broadening the expansion of acceptable practice settings under proposed 49 Pa. Code § 33.205b(c) to include all medical facilities that accept Medicaid, regardless of their geographic location.

Gateway Health recognizes the overwhelming difficulties with access to care that our Members face on a daily basis. Although our dental providers work diligently to care for our Members, we simply do not have enough Medicaid dental providers delivering services, especially in a number of undeserved and rural areas throughout the state. The lack of reliable transportation, arranging child care for siblings, waitlists for dental appointments, and limitations on the number of siblings scheduled at one time are all barriers impacting our Medicaid population. External factors such as food shortages, lack of education regarding the importance of oral health care, and difficulty accessing financial, educational, and employment opportunities, commonly known as Social Determinants of Health (SDoH), also remain major barriers to adequate care.

All of these factors contribute to our Members' difficulty in scheduling or attending their dental appointments. Gateway Health continues to dedicate many of our resources and services to our Members to help assist with SDoH, but increasing the number of dental professionals available to serve this vulnerable population and securing appropriate, reliable locations to meet our Members remains difficult.

The expansion of practice sites to include additional facilities can do just that. Children will see a medical provider 10 times on average by the age of two, but only six percent of Medicaid-enrolled children under age three used any dental care (Centers for Disease Control, National Health Interview Survey, 2016). Allowing PHDHPs to provide educational and preventive dental services in more locations, within their scope of practice, may dramatically improve the number of children on Medicaid that we can reach for potentially life-saving oral health interventions.

EMBARGOED MATERIAL

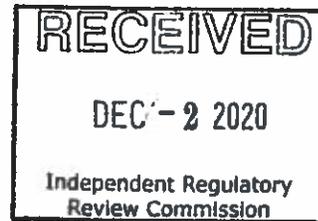
Independent Regulatory Commission of Pennsylvania

Date: November 29, 2020

REFERENCE IRRC #3228

Email to irrc@state.pa.us

#3228



Dear IRRC Board of Reviewers:

My name is Lillian Caperila and currently reside in Schwenksville, Montgomery County in Pennsylvania. I have held an active license as a registered dental hygienist in our state since 1980. I am a past President of the Pennsylvania Dental Hygienists' Association and former Chairperson of PDHA Governmental Relations Council. I continue to serve on the Governmental Relations Council of the PA Dental Hygienists' Association and believe strongly in the commitment, expertise and qualifications of the PHDHP (Public Health Dental Hygiene Practitioner) licensed to deliver preventive services to the underserved population of our state.

The number of PHDHPs has grown to reach more than 850 across 63 of the 67 counties of Pennsylvania. These practitioners work in a variety of capacities, some in the public health setting as PHDHPs and others providing traditional dental hygiene services, utilizing only their RDH licensure. For those working truly independently, some PHDHPs have chosen to open mobile preventive practices to serve patients in need at facilities like nursing homes and assisted living centers. The services are provided fee-for-service, and the PHDHP is responsible for serving as clinician and business owner.

The State Board of Dentistry adopted an exposure draft on September 15, 2017 that would allow PHDHPs to practice in additional practice settings.

The State Board of Dentistry is considering adopting an exposure draft which would add the following practice settings to those currently delineated in the regulations:

1. **Medical Offices**
2. **Child Care Centers**
3. **Home settings under the direction of hospice facilities/organizations This exposure draft does not expand the scope of practice, nor does it change the required annual dentist referral.**

The justification of my support in favor of expanding these settings are even more important during this unprecedented year of a public health crisis. If PHDHP's are permitted to deliver preventive oral health services (example: oral cancer screening, nutritional counseling, fluoride varnish services) in the setting of a medical practice who guide the overall health of expectant mothers, young children who are not patients of a traditional practice setting and medically-complex seniors, their overall care is critical to their general health and longevity.

Many medical practices and professionals examine their patients for very specific conditions that are directly correlated to a patient's poor oral hygiene. There has never been an oral health practitioner available or allowed to join the team in these expansion settings mentioned above. With rising healthcare costs and decreased access to care, the passing of a law to expand these sites to permit the PHDHP to perform valuable preventive services would indeed improve the overall quality of life and

higher costs related to reaching these children, senior adults and terminally-ill patients requiring hospice care.

If consideration much be made to ensure that the PHDHP is educated in specific categories of the patients in this expanded site, this can be determined with the State Board of Dentistry and PA Oral Health Coalition.

I hope this commission will give serious consideration in passing this bill for the improvement of dental and general health under the qualified and licensed auspice of a registered Public Health Dental Hygiene Practitioner.

Thank you very much for consideration of this letter during decision making process of the bill.

Lillian Jessie Caperila, RDH, BSDH, M.Ed.

191 Goshen Road, Schwenksville, PA 19473

Email: Lcaperila@me.com

Phone: 610-213-1201