



Two Cents for Tooth Sense™ Coalition Talking Points

The U.S. Surgeon General recognizes oral health as an integral part of a person's total health, with the dentist being the primary dental health care provider.

- An important purpose of dentistry is to fight dental diseases, the vast majority of which are infectious, irreversible and destructive. These diseases can only be diagnosed and successfully treated with proper intervention of a licensed dentist and qualified dental staff.
- Oral health care for all patients in Wisconsin should adhere to the same standard of care, beginning with a qualified diagnosis by a licensed dentist.

The American Academy of Pediatrics (physicians) says 20 percent of all health care funds spent on children should be directed at improving and maintaining oral health.

- In Wisconsin, state and federal governments spend *less than one percent*, or \$38 million, of a \$4.4 billion annual Medicaid/BadgerCare (MA) budget, on oral health programs for children *and* adults.
- Four out of five states spend a higher percentage of MA dollars on dental care for children and adults than Wisconsin, according to the American Dental Association (ADA).
- Dentists donate more charitable care than federal and state governments combined provide.

The WDA proposes ALL dental offices be fairly reimbursed for the care they provide to MA patients.

- Ninety-five percent of Wisconsin's practicing dentists are small business owners who do not impose a "hidden tax" on private-pay patients by cost-shifting losses incurred through participation in an inadequately-funded state dental MA program.
- MA patients experience a lack of access, because dentists either limit their participation or choose to drop their certification and provide free care without the MA paperwork hassles.
- Dental access improves in states where fair market rates are implemented. The WDA supports increasing dental MA reimbursements to the 75th percentile of the most recent ADA fee survey for this region.
- One out of every two WDA practicing dentists recently answered a questionnaire about dental MA program participation. Nearly 80 percent of respondents said they would begin seeing MA patients or would see new MA patients if rates were raised to the 75th percentile. Just the 50 percent of dentists who responded to the survey would see approximately 111,400 new MA patients. Currently, 140,000 patients receive dental services annually under the fee-for-service MA program.

If the existing state budget cannot support fair dental MA reimbursement, the WDA proposes the state establish a dental MA trust fund by implementing a fee on distributors, manufacturers and wholesale dealers of soda – two dollars per gallon of soft drink syrup and 21 cents per gallon of bottled soft drinks or soft drinks produced from powder. Estimated impact would be less than two cents per 12-ounce can of soda – Two Cents for Tooth Sense™ (Tooth Cents™).

- Studies show excessive consumption of soda negatively impacts a person's oral health, so there is a legitimate argument for using soda-fee revenue to improve MA dental care access.
- Tooth Cents™ would generate enough funds to increase state reimbursement for dental services to the 75th percentile.
- The WDA proposes trust fund revenue not spent on improving the dental MA program be spent on oral health education projects affiliated with Marquette University School of Dentistry (MUSoD) and public health groups.
- The WDA encourages the state to keep any Tooth Cents™ revenue not spent during a fiscal year in the dental MA trust fund and make it available the next year for maintaining fair reimbursement rates and supporting oral health education projects.

The WDA believes the dental MA program would further be improved by contracting with a separate administrator to operate the program like a private-sector dental insurance plan and by educating patients about the importance of keeping scheduled dental appointments and making good personal oral health choices.