

Vinod Miriyala

Public Health and Pediatric Dentist

Proponent Testimony, HB33

House Finance Subcommittee on Health & Human Services

March 16,2023

Good morning, Chair Carruthers, Ranking Member Liston, and members of the House Finance Subcommittee on Health & Human Services, thank you for this opportunity to submit written/ present this testimony supporting elements in HB33 related to oral health.

My name is Dr. Vinod Miriyala. I am Pediatric Dentist and work in a private practice and a community health center in the Dayton area. I also teach at a dental residency program. As part of my job, I provide care to the underserved children who are insured by Ohio Medicaid.

I cancelled my day at the hospital where I provide care to children and special needs most of whom are Medicaid patients, to provide this testimony today because I feel it is important to stand before you and present my case on behalf of my patients and the community at large including the providers who treat Medicaid patients and others who have the passion to provide care but cannot due to the low reimbursement rates.

I started practicing dentistry in Ohio part time in 1999 and have been practicing full time since 2009. I say this because in my 20 plus years of practice, the children that I treated in 1999 have become grown adults and now are bringing their children to me for dental care. My practice used to be 90% Medicaid and now that number is closer to 30% Medicaid even though the demand for my services and the patient population needing my care has grown exponentially. It has grown increasingly hard to serve the Medicaid patient population and in the last few years it has become nearly impossible because the cost of providing oral health care has increased. The staff salaries have increased and the material costs have increased over the past 20 years since the last Medicaid fee increase. Today we are not able to attract dentists and staff to work in a practice which heavily has Medicaid population. Our patient population has high needs due to various reasons and oral health is not their priority.

With high oral health needs comes more complicated treatments and that in turn leads to care that is more extensive and expensive. Our staff needs the right training to treat high needs patients weather they are children, adults, special needs patients or complex medically compromised patients.

I treat patients who travel from 2 to 2.5 hours away since they do not have dentists who provide care to Medicaid population in their communities. In addition to that they do not have dental specialists like a Pediatric Dentists, Oral Surgeons or Endodontists. Many dentists have limited or stopped serving Medicaid patients of all ages. I need complex specialty treatments from other dental specialists and I am not able to find one who would accept Medicaid in our area. Our nearest safety net specialty clinics are at The Ohio State University who do accept Medicaid patients with an 1 year waiting list for treatment. Emergencies like dental accidents, infections and pain do not wait for an year to be treated....they end up in the emergency room where they are given antibiotics and pain medications and sent back to safety net clinics or the very small number of dental providers who accept Medicaid.

As a Medicaid provider, I am tired of working in an environment where I actually lose money when I treat a patient compared to providing care to privately insured and self-pay patients. Everything costs more in the last 20 years but Medicaid reimbursement has stayed the same.

This made me look for alternatives to sustain our practices and referring patients to safety net clinics like FQHC's, dental schools or dental residency hospital programs which either do not have the specialists (like FQHC's) or a long waiting list (dental school programs).

Even FQHC (Community health centers) will benefit by increasing the Medicaid reimbursement rate due to the reimbursement system present in Ohio but more importantly the stress they themselves go through to serve this population will be reduced when more community dentists accept Medicaid patients.

As mentioned earlier I am treating fewer Medicaid patients to compensate for low Medicaid reimbursements and accepting more privately insured patients. My heart and soul aches when I have to refuse care to treat the needy children and adults who cannot help themselves due to social determinants of life and in many cases not the fault of their own. The burden on the very few Medicaid providers is increasing more and more.

I do regularly consider moving out of state to practice dentistry....not far off....Kentucky, Indiana, Michigan, Illinois and West Virginia. Each of these states had higher Medicaid reimbursement rates even before COVID had hit everyone but they increased it more in the last one year to effectively solve the same issue that we in Ohio are dealing with.

I appreciate that a modest 15% increase in Dental Medicaid reimbursements is being considered in the 2024-25 budget but personally and professionally this proposed increase is not going to make a difference in my decision to treat Medicaid patients whether they are children, adults or special need patients. More needs to be done.

There are many barriers to care for the Medicaid population and the one that is a major barrier in oral health is finding a dental provider who accepts and treats Medicaid population. Increasing the Medicaid reimbursement rates in general will increase the acceptance by dental providers to accept more cases and decrease the burden on the very few of us and provide timely oral health care. This would decrease emergency room visits, medication visits, expensive care and increase better health outcomes.

I humbly request the committee to consider increasing the rates to at least 75% of market rates (UCR)/private insurance rates to make an actual difference for patients and providers at this time. This increase has been long time in waiting and for many of us would be a lifeline in our dental practices who have a high number of Medicaid patients.

Thank you for your time and giving me an opportunity to testify.

Vinod Miriyala DDS
Pediatric and Public Health Dentist