

2025 Issue Briefs **Summary Points**

Increasing Medicaid Dental Funding: A Vital Investment for Texans

- Texas has not increased reimbursement rates for Medicaid dental since 2007.
- Reimbursement rates have remained the same for 18 years despite the rising costs of providing dental care.
- A strong network of Medicaid dentists is needed to maintain good oral health for children and special needs patients, and to prevent avoidable increased program costs for the state.
- Adjust Medicaid dental program funding to reflect the increase in Consumer Price Index and inflation, using today's dollars, to fund the \$250 million annually (General Revenue) appropriated by the legislature in 2007.
- As a secondary priority, allocate \$44 million annually (General Revenue) to target increases for 30 important Medicaid dental codes.

Dental Insurance Reform: Protecting Patients and Dentists – Support SB 1090

- In the dental insurance industry, two common practices—**bundling** and **downcoding**—are used by insurance companies to control claim payments.
- These practices impose financial burdens on patients and dentists, devalue the professional expertise of dentists, and create unnecessary complications in the claims process. Bundling and downcoding are fundamentally unfair to patients and dentists.
- Limit the use of bundling and downcoding practices by state-regulated dental insurers.
- Prevent insurers from changing a dentist's submitted procedure codes unless the carrier determines through a professional review of the supporting clinical information submitted with the procedure codes that the original coding was incorrect.

Texas Dental Students and Schools: Incentivizing Dentists to Rural and Underserved Areas, Investing in Dental Education: Building Texas' Oral Health Workforce

Dental Education Loan Repayment Program Funding

- The DELRP provides a dental school loan repayment incentive to dentists in return for their practice in underserved areas throughout the state.
- History proves the program works and increases access to care by increasing the number of dentists in areas of need.
- Texas needs only 376 existing dentists practicing in underserved areas to meet 100% of the need.
- Reinstating funding to this successful and valuable program means that more dentists will
 connect with more patients, increasing access to oral health care for more Texans.
- TDA supports reinstating DELRP funding for 400 dentists to earn up to \$200,000 over four years in loan repayment assistance.

• The legislature continues to fund similar loan repayment programs for other professions, including physicians, nurses, and teachers.

Dental School Funding

- Texas dental schools provide critically needed oral health care to underserved populations.
- Texas dental schools train future clinicians for important roles in Texas' oral health workforce, improving the oral health of individuals and communities throughout the state.
- The state provides much of the funding to the dental schools.
- Supports the funding methodology request in the Dental Clinical Education Support budget rider to enhance the effectiveness of clinical training and operations at Texas dental schools. This rider ensures that all four dental schools in Texas are appropriated \$3,000,000 from the General Revenue fund yearly for clinic operations.
- Increase funding to reduce tuition costs, enabling dental graduates to enter the workforce with less financial burden and greater focus on serving communities in need.

Enhancing High-Quality Care Options for Texas Patients: Expanding Neuromodulator Administration – Support SB 1117

- Under current law, all dentists can administer neuromodulators like Botox for therapeutic purposes, and all dentists receive extensive training in injection techniques and safety protocols as part of their dental education.
- However, today only oral and maxillofacial surgeons can administer neuromodulators for purely aesthetic purposes.
- Texans deserve access to highly trained and qualified professionals, including dentists, who
 possess the education and expertise to safely administer neuromodulators for aesthetic
 purposes.
- Support legislation authorizing Texas-licensed dentists to administer neuromodulators like Botox for aesthetic purposes.

Access to Oral Health Care: Strengthening Public Health Programs – Support HB 1776 State Dental Director

- There is no statutory requirement that the dental director for the OHIP at DSHS be a Texaslicensed dentist.
- Mandating in law that the program be led by a dentist ensures that it is directed by a person
 with the most appropriate level of education and training that the position demands.
- Support HB 1776 by Representative Briscoe Cain, which mandates that OHIP at DSHS be directed by a Texas-licensed dentist.

Oral Health Improvement Program Funding

- Failure to treat dental disease has serious economic and medical consequences.
- The OHIP at the DSHS encourages Texans to improve and maintain good oral health.
- The OHIP works with various partners across the state to identify the oral health needs of Texans and the resources to meet those needs.
- Adequate funding helps ensure that the OHIP has the resources necessary to collect, analyze, and disseminate essential oral health data, develop and implement comprehensive oral health education campaigns, and possibly expand the direct delivery of dental services for uninsured children, pregnant women, and other at-risk populations.

Preserving Quality Dental Care: Preserving Dentists' Independent, Professional Judgement, Preserving Standard of Care for All Texas Patients

- Texas must ensure that citizens have access to high-quality dental care delivered by Texaslicensed dentists.
- Only dentists have the training and experience required to make appropriate clinical dental treatment decisions.
- Oppose any licensure compact that does not ensure that a dentist practicing dentistry in Texas
 on Texans is licensed by the Texas State Board of Dental Examiners. Texas does not face barriers
 in licensing dentists and dental hygienists. Existing licensing processes already address
 workforce needs without compromising safety or standards.
- The following principles, which are codified in statute—coupled with strong, effective laws and regulations of dentists and dentistry—protect Texas dental patients:
 - 1. **Dental Ownership**: Dental practices in Texas must be owned by licensed dentists.
 - 2. **Clinical Leadership**: Dentists are the heads of the dental team and must retain full authority over clinical decisions.
 - Accountability and Autonomy: Dentists must make all clinical care decisions free from improper influence by non-dentists, as they are ultimately accountable for patient outcomes.
- The TDA is committed to working with state and community leaders to identify and advance solutions that meaningfully address barriers to oral health care for Texans.
- Dentists, as the head of the dental team, are properly educated and trained to provide comprehensive care to patients.
- Every Texan—regardless of where they live or their socio-economic status—deserves to be treated by a dentist.