



Senate Fiscal Agency
P.O. Box 30036
Lansing, Michigan 48909-7536



Telephone: (517) 373-5383
Fax: (517) 373-1986

Senate Bill 280 (Substitute S-1 as passed by the Senate)
Sponsor: Senator Sam Singh
Committee: Health Policy

Date Completed: 6-28-23

CONTENT

The bill would amend the Public Health Code to require a parent, guardian, or person in loco parentis of a child to provide for a dental oral assessment for the child before the child's first time in kindergarten or first grade. The assessment could be performed by a dentist or dental hygienist selected by the parent, guardian, or person in loco parentis or by the entity selected by the Department of Health and Human Services (DHHS) to provide assessments through the dental oral assessment program already established by the Code. The bill also would delete the January 1, 2024, sunset on the dental oral assessment program.

In 2020, Public Act 261 amended the Code to require the DHHS to establish the dental oral assessment program for children. The program provides assessments to children in the State whose parents do not have a dentist conduct a dental oral assessment within six months of the child's first time in kindergarten or first grade. The DHHS maintains the program by contracting with a government entity or person selected by the DHHS. The Code *allows* a parent, guardian, or person in loco parentis applying to have a child registered for the first time in kindergarten or first grade to have a dentist or dental hygienist perform an oral assessment or have the program's selected entity perform an assessment on the child. Under the bill, a dental oral assessment would be required as described below.

Beginning in the 2023-2024 school year, a parent, guardian, or person in loco parentis who applied to have a child registered for the first time in kindergarten or first grade in a school in Michigan would have to comply with the following:

- Have a dentist or dental hygienist conduct a dental oral assessment on the child not earlier than six months before the date of the child's registration with the school and obtain from the dentist or dental hygienist a written statement certifying that the child had received the dental oral assessment.
- If the parent, guardian, or person in loco parentis of the child did not meet the requirements described above, they would have to ensure that the government entity or person selected by the DHHS conducted a dental oral assessment on the child.

Under the Code, when the result of an assessment indicates that a child requires follow-up care, the dentist, hygienist, governmental entity, or person conducting the assessment must present to the individual bringing the child a written statement indicating that follow-up treatments is *encouraged*. The bill would require the written statement distributed by a dentist, hygienist, governmental entity, or person conducting the assessment to indicate that follow-up treatment was *required*.

Beginning in the 2023-2024 school year, a parent, guardian, or person in loco parentis who applied to have a child registered for the first time in kindergarten or first grade in a school in Michigan would have to present to school officials, at the time of registration but not later than the first day of school, one of the following: 1) a statement of religious exemption to the

bill's requirement; 2) the statement from a dental professional described above; or 3) a written statement indicating that the parent, guardian, or person in loco parentis would provide for the child's dental oral assessment by the DHHS's program.

A child could not be excluded from school attendance if the parent, guardian, or person in loco parentis of the child did not present a statement described above to school officials on or before the first day of school.

In addition, current law requires a school district that enters into a contract with a government entity or person who administers dental oral assessments to the school district's students to report the following information to the DHHS:

- The name of the government entity or person that conducts the dental oral assessments.
- Each date the government entity or person is scheduled to provide the dental oral assessments.
- The total number of dental oral assessments that are scheduled.

The bill would delete these reporting requirements.

In addition, the bill would delete the program's sunset of January 1, 2024.

MCL 333.9316

BRIEF RATIONALE

According to testimony, poor dental health in children is responsible for a significant chunk of annual missed classroom time. Reportedly, 60,000 children entering kindergarten every year do not have preventative dental care. Some people believe that a preventative strategy is the most effective way to combat poor dental health. Accordingly, it has been suggested that children be required to undergo a dental health oral assessment before kindergarten or first grade.

Legislative Analyst: Alex Krabill

FISCAL IMPACT

The bill would have a negative fiscal impact on the DHHS and on local units of government, although operation of the dental screening clinics is subject to appropriation from the Legislature. The Department estimates an annual cost of \$4.5 million to cover approximately 112,000 children across all 45 local health departments. The magnitude of the cost would depend on the number of children that are not already participating in the dental oral health assessment described in the Code that would participate upon enactment of the bill. Currently participation in the dental oral health assessment program is optional, although the bill does not include any penalties for parents that do not have a dental oral assessment performed before their child enters school.

Similar to the funding for the vision and hearing clinics, funding for local costs stemming from operation of the dental clinics is appropriated to the DHHS, and then distributed to the government entity or person with which the DHHS has contracted. Some of the costs of the expanded dental screening program could be offset, depending on the extent that children receiving dental screenings had insurance coverage (either through Healthy Kids Dental or private insurance). Local units of government could face increased costs if the DHHS contracted with local public health departments to operate the dental screening clinics and

the costs to operate the program exceeded the funding provided by the State, or cost offsets resulting from reimbursements from other insurance coverage.

Beginning in FY 2021-22 the DHHS budget has included ongoing funding of \$3.26 million Gross, which consists of \$1.5 million from the State School Aid Fund for the local services costs for school children, \$1.5 million of private authorization for private matching contributions from Delta Dental for services, and \$260,000 GF/GP to support 1.5 State positions for administering the program and to support the existing dental oral assessment program. The \$1.5 million in private funding from Delta Dental was carried forward from FY 2021-22 and will be fully spent in FY 2022-23. There will be a difference of \$2.74 million between the Department's estimated cost and already appropriated funding. Neither the Executive, Senate, or House included additional funding to support an expansion of the dental oral assessment program in its' proposed FY 2023-24 DHHS budget.

Fiscal Analyst: Ellyn Ackerman

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.