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Bob Bethell Joint Committee on HCBS and KanCare Oversight Committee August 11, 2026

Chairman Carpenter and members of the Committee,

Thank you for the opportunity to share this testimony with the Committee. My name is Brooks Robertson, and I am the Executive Director of Oral Health Kansas, Inc. We are the statewide advocacy organization dedicated to promoting the importance of lifelong oral health by shaping policy and educating the public.

Thank you

We continue to hear from providers who are encouraged by the rate increase and are now taking another look at Medicaid. We also hear from providers who have been enrolled in Medicaid and now say it is more feasible for them to consider staying in Medicaid. This is the whole point of the increase: to strengthen and grow the Medicaid dental provider network. Since our last update, we have seen encouraging signs that the Legislature's investment is making a difference. Provider participation is beginning to improve, and the loss of Medicaid providers has slowed. While the provider network remains insufficient, today's update demonstrates how your investment is producing meaningful progress while underscoring the need to continue strengthening the Medicaid dental provider network.

Legislature's 2026 Investment

As you know, this year the Legislature invested \$2 million SGF in a Medicaid dental rate increase. This is part of a series of investments the Legislature has made in the Medicaid dental program over the last several years. Ensuring an adequate and sustainable Medicaid dental provider network is the final piece of the puzzle to provide essential, timely, and ultimately cost-saving, oral healthcare to Medicaid members in Kansas. Your investment in rates is integral to make this vision a reality. Thank you for your support.

An Update on the Kansas Medicaid Dental Reimbursement Rates

Following the rate increase in 2025, Oral Health Kansas and the Kansas Dental Association conducted a survey to gather Kansas dental providers' input on the best way to allocate the appropriated funds. Although reimbursement increases could not be implemented across all service codes, direct provider input led to intentional allocation of the funds to maximize the impact for dental offices and patients. Dental examinations (50% increase) and preventive care (35% increase) were prioritized; however, the funds appropriated did not allow for meaningful increases for most treatment services.

Building on their commitment to listening to the needs of Kansas dentists, the state Medicaid staff asked us to repeat the survey to gather feedback on how to allocate the

2026 funding. The survey concluded this past May, with 97 Kansas dental providers/dental office team members participating. We are grateful to the Division of Health Care Finance for again valuing providers' perspectives and we look forward to the results informing the allocation process when the rate increase goes into effect in Fall 2026.

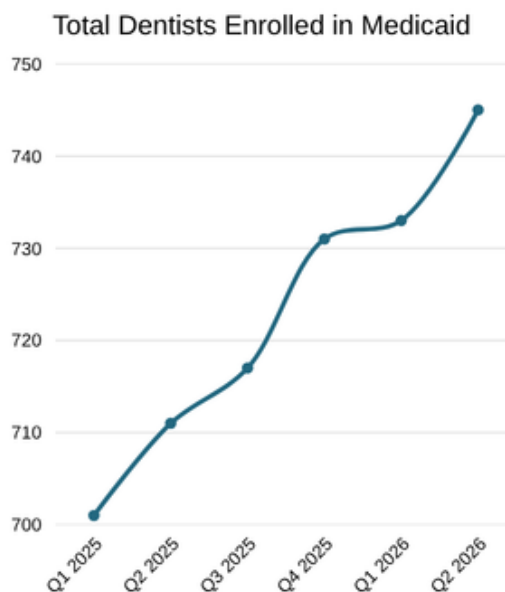
However, what is clear, is that whilst the appropriated funds will again allow certain dental services to see a rate increase, the significantly low baseline rates and limited ability to meaningfully impact all dental codes mean that Kansas Medicaid dental rates for most services will still fall significantly behind neighboring states, and even further behind commercial insurance and rates set by dentists:

- The Medicaid rates for many dental services in neighboring states of Colorado and Missouri are as much as twice as high as Kansas.
- Even for exam services which saw a 50% rate increase in 2025, Kansas Medicaid rates are, on average, only 65% of the reimbursement rate provided for the same exam services in Missouri.
- Overall, Kansas Medicaid rates in 2025 were only 44% of the average fee-for-service rates set by dental offices.

What Does the Kansas Medicaid Dental Provider Network Look Like Now?

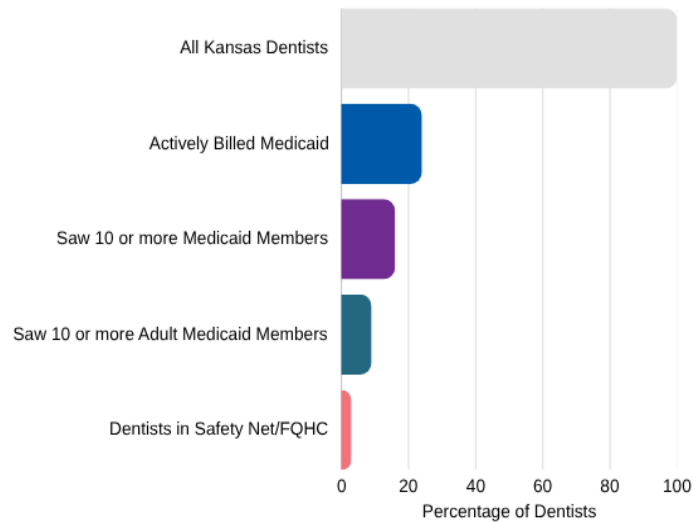
Since we last talked with you, we received new data about the dental provider network. Per the latest available data from the Kansas Dental Board (2024), there are 1,637 dentists with active licenses in Kansas practice locations. Of this, only 20% (n=314) actively billed for any Medicaid dental services in Q2 (April-June) of 2026, and even fewer, 15%, billed for 10 or more unique Medicaid members.

From 2021 to 2024, the Medicaid dental provider network suffered a 20% loss in the net number of dentists enrolled in the system. However, because of your investments and the supports put in place by Oral Health Kansas' Medicaid Dental Facilitator program, we are seeing this rate of attrition slow, and in some respects, begin to reverse. Last year, there was an 8% increase in enrolled dental providers, a net gain of 30 providers, with the greatest gains (66.7%) coming after the rate increase was implemented in July 2025. From January-June 2026, there has been a further net gain of 14 providers, with most gains occurring after the funds for a further rate increase were signed into the budget.



We often hear that FQHCs and Community Health Center settings should provide dental care for people with Medicaid coverage. The new data continues to demonstrate that while FQHC dentists are a critical part of the Medicaid system, there are simply not enough of them to meet Kansans' needs. In Q2 of 2026, only 1.9% of Kansas dentists (n=31 dentists), billed Medicaid in an FQHC/Community Care setting. We need to continue to make Medicaid feasible for private practice dentists to grow the provider network.

Narrowing Pool of Kansas Dentists Serving Medicaid Patients- 2025 Data



Medicaid Dental Provider Distribution

This time last year, we reported that a third of Kansas counties have no Medicaid dental provider. While access gaps remain and we still have a long way to go to create a dental provider network accessible to KanCare members statewide, 2025 marked some progress, with 3 counties moving from having no billing Medicaid providers to at least one provider participating in the program. The distribution of Medicaid dental providers continues to disproportionately impact rural communities, primarily in Western Kansas. The data reflects lived experience, with a community care clinic in NW Kansas reporting wait times as long as 3-months for routine care. There are simply too few dentists to care for the Medicaid population in this region.

In summary, the Kansas Medicaid dental provider network remains insufficient to provide essential and timely dental care to Medicaid members; however, your investment is slowing the rate of attrition, and we are beginning to see positive change. While the recent net gain in the number of Medicaid-enrolled dental providers is an encouraging development, it is not yet sufficient to restore the provider network to a level that is adequate and sustainable. However, these gains, along with the experience of Missouri, demonstrate that increasing Medicaid dental reimbursement rates can have a meaningful impact on provider participation.

What did the Dental Provider Rate Prioritization Survey tell us?

As you have previously heard, 4 out of 5 dentists nationally say low Medicaid rates are their top barrier to joining the Medicaid network. Our recent survey results clearly show that this reflects the views of Kansas dentists. Although providers commented that the new rate increases were “helpful”, they overwhelmingly expressed the importance of continuing to make meaningful investments in Medicaid dental rates. Of the responses to the question “Please provide any suggestions about ways to encourage more dental offices to be Medicaid providers”, the overwhelming majority directly spoke to reimbursement rate increases and reimbursement rate parity with surrounding states and commercial insurance:

"As a Medicaid dentist that accepts Medicaid in both Kansas and Missouri in the Kansas City area, I have seen many fellow dentists move from the Kansas side to the Missouri side...If the Kansas Medicaid program truly wants to raise the number of dentists accepting KS Medicaid on the Kansas side then they need to raise their rates similarly to what MO has done."

"Unless Medicaid rates come close to 90th percentile [of the] commercial insurance rate, we do not stand a chance."

"Until reimbursement rates improve and policies become more practical for providers, access to dental care for Medicaid patients will continue to decline. The issue is not a lack of willing providers—it is a system that fails to adequately support them."

"Keep allocating funds to raise the fees for Medicaid. They have been too low for over 20 years."

These provider responses must also be placed within the context of an economically challenging time for the US dental economy. Dental office overhead costs, including dental supplies and materials, and pay for dental office staff, are increasing faster than overall inflation. At the same time, reimbursement rates are not keeping pace with inflation or the increasing costs of delivering care. Nationally, 30% of dentists indicated they are planning to leave at least one insurance network in 2026. The Kansas Medicaid dental network cannot incur such a loss when access to care is already limited. The impact of low Medicaid reimbursement rates on dental offices as Kansas small businesses and local employers were underscored by Kansas dental providers in the survey:

"Current Kansas Medicaid reimbursement rates continue to fall significantly below commercial insurance rates and often below the actual cost of providing care... Recruitment and retention of providers and clinical staff are becoming increasingly difficult with current reimbursement structures."

"It takes time to do good dentistry. There is no way to produce enough income to keep the doors open at Medicaid rates."

"The cost of doing dentistry and paying wages to employees increases every year. Medicaid rates cause dentists to actually lose money."

"Until reimbursements increase across the board, it's hard for me to see many dentists becoming Medicaid providers. Our profit margins have shrunk too much in the past several years to be able to afford it."

Next Steps

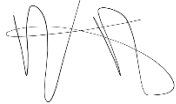
As discussed, we look forward to the results of the survey informing the allocation of the funds appropriated during the 2026 legislative session for a further Medicaid dental rate increase. The rate increase is due to go into effect this coming Fall.

The data team at the Division of Health Care Finance is continuing to provide us with new dental provider data quarterly and Medicaid dental utilization data annually. This allows us to track how the Medicaid provider network is changing over time. We will share updates with the Committee as we continue to learn more.

We at Oral Health Kansas, and our partners across the state, are more prepared than ever to support dental offices to become successful Medicaid providers. Our [Medicaid Dental Facilitator program](#), [educational resources](#), and [provider guidance](#) are available at no cost to all Kansas dental providers. With your commitment to support dental providers, small businesses, and the health of Kansans, together we can continue to take strides toward a sustainable, health promoting, and cost saving Medicaid dental program.

Thank you for the opportunity to provide this testimony. I am happy to answer any questions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Brooks Robertson', with a stylized, cursive script.

Brooks Robertson
Executive Director
brobertson@oralhealthkansas.org