

Editorials

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Readers Write

DENTAL CARE

Important for all, but not accessible to all

Gail Rosenblum's March 31 column suggested that a handful of dental therapist graduates will turn the tide on the vulnerable adults and children who do not get adequate dental care. I wish it were that simple.

Access to dental care is a complex problem for families who are economically disadvantaged, have disabilities, live in remote areas, face cultural and language barriers, or have difficulties navigating government programs. Just as the barriers to dental care are complex, so must the solutions be multifaceted. The workforce is just one piece of the puzzle.

Despite the growing body of research confirming that a healthy mouth is tied to overall health, the state refuses to fund programs to deliver adequate care. The population I am concerned with has absolutely

no means of earning income. These are people with serious brain injuries, Alzheimer's, dementia, developmental disabilities, cerebral palsy and severe mental illness. These are our children and our parents.

The Minnesota Dental Association has two bills to reduce barriers to dental care services for the state's low-income and vulnerable populations. One will ensure that the most vulnerable population will have dental benefits, at minimum, equal to those currently provided to children. In addition, we must have reasonable reimbursement rates to at least cover the overhead costs of providing care to public-program patients.

Minnesota dentists care and are doing an amazing amount of work while trying to educate lawmakers on needed policy changes. In February alone, they donated a record \$2.5 million of free care to Minnesota children in need. They'll continue to work toward meaningful solutions to the complex barriers to dental care. The answer rests with all of us deciding how we choose to treat and care for our most vulnerable.

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The writer is president of the Minnesota Dental Association.