

Hi, my name is Kelly Taulbee and I am the Director of Communications and Development at Kentucky Voices for Health. Since we don't often frequent this committee, please know that KVH is a statewide nonpartisan, nonprofit coalition of consumer health advocates. We aim to identify and address the root causes of poor health outcomes through policy advocacy. I am also here before you today as a rate payer in a rural county, a lifelong Kentucky consumer, and a mom of two small children with a third on the way, so I do take this work very seriously.

Kentucky consumers deserve and have a right to clean air and water to support good health. Regardless of socioeconomic status, every single one of us in this room is ultimately at the mercy of our local water districts when it comes to the safe delivery of fluoridated water. I have two statements to read on behalf of Kentucky consumers unable to attend in person today. The first is from Tracy Pulley, the Fulton County Independent Schools FRYSC Director. She states:

I am in my twentieth year of serving the children and families of the Fulton Independent School District as FRYSC (Family Resource / Youth Services Center) coordinator.

Two weeks ago, a seven-year-old student went to the school nurse with tooth pain. He had an abscess on an upper tooth. Luckily, the Kare Mobile dental van was parked in Fulton for its monthly one-day visit, so the boy and I met his mom at the health department. The Kare dentist told us she would stay late to work him in, because they were fully booked.

Last year, one of our high school students had several teeth pulled because they were too decayed to save. He needs dentures but we haven't been able to find an option yet.

Our county has no dentist. We're located on the Tennessee/Missouri state lines, so families with Kentucky medical cards must drive a minimum of 25 miles to the closest dentist. That dentist, located in Mayfield, used to take more Medicaid patients, but currently the waiting list is too long to accept anyone.

The closest regional clinic, UK Dentistry West in Benton, is an hour away. You must arrive before 6:30 a.m. for their urgent care clinic days for a chance - not a guarantee - to be seen. Root canals are not offered. Call the clinic and you will hear this message:

"We encourage you to call to verify that our urgent care clinics are as stated on the day you intend to come due to unexpected illnesses that could produce provider shortages."

The dental health situation here is not good, and that's WITH fluoridated water. Many studies show that fluoridated water improves dental health for all, and its greatest positive impact is on children. Please do not take fluoride out of our public water system.

Again, that is from Tracy Pulley out of Fulton County. The second statement I have for you is on behalf of Todd Bandrowsky of Bowling Green/Warren County, KY. He states:

"Keeping our local water systems fluoridated is essential, and more importantly, the safety of the people who use it is a simple right. My maternal and paternal grandparents and great-grandparents were refugees from Eastern Europe during World War 1 and World War 2, and because of those oppressive regimes, a distrust of government. My great-grandfather lived in terror of the reach of Stalin, even in rural Pennsylvania. I'm not a person who was raised with a deep trust in government. But, I also know from a healthy science background that fluoride is incredibly useful at preventing dental decay.

As a child, we moved often, and as a result, I sometimes had access to fluoridated water. As an adult, I moved towards more rural areas and our water source was non-fluoridated well water. My oral health declined, with escalated tooth decay, cavities, extractions, fallen teeth and broken teeth. Extractions and surgery that I cannot afford are my future. My teeth have caused chronic pain that I have often not been able to treat, and I don't wish this reality on any other Kentuckians, especially children. I don't want people to face the thousands of dollars to get decent teeth. I don't want my kids or your beautiful children to grow up with teeth like mine. If you can find one, and then afford one, local dentists and providers will tell you the overwhelming benefits of fluoride. Fluoride is in our toothpaste, because it's safe, and because it works. It has protected the teeth of Kentuckians through their municipal water for years, because it is safe. To prematurely place such a harmful decision on the backs of our local officials would be devastating, chaotic, and in no way would it actually address the needs of our children and that of hardworking Kentuckians like myself."

The federal judge in California has made clear that it is the federal EPA's responsibility to investigate and provide additional information, including findings to support the exact level of fluoride necessary. I am grateful to know that Kentucky's closely monitored fluoride levels are well below that of California's. Until we are at a point in this country where we have enough medical evidence to support such a move as allowing local districts to "opt out" of maintaining fluoridated water, no level of government can truly make responsible decisions without additional research from the federal EPA, especially those on a local level and with the most direct impact on safe water delivery to families. I cannot emphasize enough the prematurity of this conversation.

In contrast though, and what we do have enough medical evidence to support is the overwhelming evidence for how fluoride prevents tooth decay and cavities. What we do have enough medical evidence to support is how access to all forms of healthcare but especially oral healthcare is still an insurmountable burden that many Kentuckians face. What we do have enough medical evidence to support is how for our lowest income hardworking families, finding a dental provider is nearly impossible most days.

It costs roughly \$0.50 per person/year to maintain fluoridated water. However, the KY Department of Medicaid Services estimated last year that for every 10% of the population that loses fluoride, it will cost just under \$20M annually in Medicaid spending on treatment alone. And that is a figure that does not necessarily speak to the volumes of lifelong need like you heard referenced in Mr. Bandrowsky's statement how ongoing oral healthcare costs and burdens can quickly balloon into becoming.

We know many Kentuckians who share strong opinions about access to dental care and the importance of fluoride in our local water systems. And while I know there will be no vote of any sort today, we wanted to be sure there was a presence reflective of all Kentuckians available to the committee. I appreciate your time and plan to email these consumer statements to members of the committee soon.