

ACY_FAV_SB511

Uploaded by: Bevan Dangel, Jennifer

Position: FAV

EQUITY FOR ALL KIDS



To: Finance Committee
From: Jennifer Bevan-Dangel, Executive Director
Re: SB511, Task Force on Oral Health in Maryland
Date: February 18, 2020
Position: Support

SB 511 would establish a task force that would bring together representatives from all the relevant state agencies, as well as a diverse group of expert stakeholders and advocates. It, therefore, offers an opportunity to reach a consensus on a multi-faceted set of proposals and strategies that would have the potential to expand the capacity of the oral health care delivery system for underserved low-income and vulnerable populations.

Oral health is a critical component of overall health. While Maryland has made much progress in the last decade to improve the oral health status of its residents, access problems remain for poor and vulnerable populations. Not surprisingly, the lack of access to dental care disproportionately impacts low-income women and children who rely on Medicaid to pay for their oral health care. For children, poor dental health can lead to lifelong medical problems and inhibit their ability to learn or attend school.

This winter ACY, with support of the Johns Hopkins Bloomberg School of Public Health Department of Health Policy and Management, released a report, "**Access to Dental Care in Maryland: An Assessment of Challenges and Solutions.**" This report would be a considerable benefit to the task force. It both identifies the challenges and the extent to which low-income Maryland residents face barriers in access to dental care, and also includes a literature review to explore policies and programs implemented by other states to expand the capacity of the oral health care delivery system and weigh the risks and benefits of adopting similar policy levers in Maryland. The report can be found at bit.ly/2P0VxO3.

The report concludes that there is no silver bullet to fix access to dental care across Maryland. Instead, there needs to be a multi-faceted approach to address the disparities and remove barriers to oral health services for low-income Marylanders. This multi-faceted approach could include a review of the Medicaid reimbursement rates to dentists, loan support, dental residency and externship programs, public education programs to improve oral health literacy and expanding the use and scope of dental therapists.

ACY supports continued efforts to reduce barriers to access dental care in Maryland and would be honored to serve on the task force analyzing this important issue.

1 North Charles Street Suite 2400 | Baltimore, MD 21201 | www.acy.org | 410-547-9200 |

Advocates for Children and Youth builds a strong Maryland by advancing policies and programs to ensure children and families of every race, ethnicity, and place of birth achieve their full potential.

MDHA_FAV_SB511

Uploaded by: Burgee, Suzanne

Position: FAV



The Honorable Delores Kelley
Chair, Senate Finance Committee
Miller Senate Office Building, 3 West
11 Bladen Street
Annapolis, MD 21401

February 18, 2020

TESTIMONY IN SUPPORT OF SENATE BILL 511 – TASK FORCE ON ORAL HEALTH IN MARYLAND

Dear Chair Kelley:

The Maryland Dental Hygienists Association (MDHA) is an organization seeking to improve the public's total health by advancing the art and science of dental hygiene, including ensuring access to quality oral health care, increasing awareness of the cost-effective benefits of preventative dental services, promoting the highest standards of dental hygiene education, licensure, practice and research, and representing and promoting the interests of dental hygienists in Maryland. In keeping with that mission, MDHA takes this opportunity to voice its general support for Senate Bill 511 and the establishment of a Task Force on Oral Health in Maryland.

SB511 will establish the Task Force on Oral Health in Maryland to examine a variety of issues impacting access to dental services in the State, with a focus on residents affected by poverty, disabilities, and aging. MDHA applauds the effort to closely examine, identify and address potential barriers to dental care in Maryland and looks forward to working with the other representatives on the Task Force to achieve those objectives.

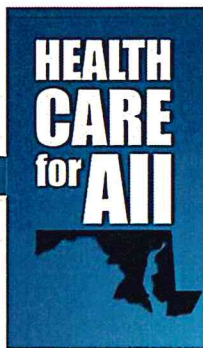
In particular, MDHA is excited to work within the Task Force to evaluate the benefits of mid-level providers and assess dental therapy programs and educational opportunities in other states. MDHA believes mid-level providers are an effective workforce model that can be used in public health settings to better meet the needs of underserved populations in Maryland, as described in SB511. However, the mid-level provider model can also be used in private practice settings to provide preventative and simple restorative dental services to patients. A robust dental therapy program in Maryland can be an effective tool in providing increased access to care in both public health settings and in private practices, where a dental therapist, working as a member of a larger dental team, may free dentists up to focus on more complex patients. While MDHA generally supports the objectives of the Task Force laid out in SB511 and agrees that mid-level providers would be essential to expanding dental services to underserved populations, it is important that the language in the legislation not serve to unintentionally and preemptively limit the scope of practice of a prospective dental health practitioner to solely serving those populations.

MDHA takes this opportunity to thank Senator Kelley for her leadership on this important issue, and will continue to work with her and the members of the Senate Finance Committee to develop and implement effective dental policy in Maryland. MDHA urges the Committee's favorable consideration of Senate Bill 511.

MDCHI_FAV_SB511

Uploaded by: Davis, Anna

Position: FAV



MARYLAND CITIZENS' HEALTH INITIATIVE

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SUPPORT

SENATE BILL 511 - TASK FORCE ON ORAL HEALTH IN MARYLAND

Finance Committee

February 18, 2020

Oral health is a **critical** component of overall health. While Maryland has made much progress in the last decade to improve the oral health status of its residents, access problems remain for poor and vulnerable populations. Not surprisingly, the lack of access to dental care disproportionately impacts low-income women and children who rely on Medicaid to pay for their oral health care. For children, poor dental health can lead to lifelong medical problems and inhibit their ability to learn or attend school. Untreated tooth decay and gum disease can also lead to mouth pain, tooth loss, heart disease, diabetes, and dementia.

The Maryland Citizens' Health Initiative, Inc. supports the creation of a Task Force to study access to oral health care in Maryland, including:

- an analysis of current access to dental services in the state;
- identifying those areas of the state where residents encounter barriers to receiving oral health care services;
- analyzing what those barriers are and the impact of such barriers on the population;
- assessing a range of policy options and solutions to eliminate or reduce the barriers and to make recommendations for increasing access to dental services in the state.

The proposed task force brings together representatives from all of the relevant state agencies, as well as a diverse group of expert stakeholders and advocates. The task force will provide an opportunity to reach a consensus on a multi-faceted set of proposals and strategies that will have the potential to expand the capacity of the oral health care delivery system for underserved low-income and vulnerable populations.

The Maryland Citizens' Health Initiative, Inc. urges the committee to issue a favorable report on SB 511.

For more information, please contact: Anna Davis, JD, MPH, Board Member and Health Policy Consultant at 443.415.1146 or by email at adavislaw@aol.com.

MSDA_FAV_SB511

Uploaded by: Doherty, Fran

Position: FAV



The Maryland State Dental Association Supports SB 511 - Task Force on Oral Health in Maryland

More than 30 years ago Maryland eliminated its Adult Dental Medicaid Program. Since then the medical research has proven that oral health is essential to our overall health. Sadly, during the period following the elimination of adult dental Medicaid, our pediatric dental Medicaid program also fell short of meeting the needs of its eligible recipients. Then over 10 years ago, Maryland tragically had a young man die because of an infection that started in a tooth. There were many factors that contributed to this tragic loss ranging from insufficient participating dentists to a lack of understanding of the health issues surrounding a lack of dental care etc. Since that time Maryland and Maryland dental professionals, advocates for children and the poor, and the establishment and work of the Maryland Dental Action Coalition (MDAC) have made great strides in improving the landscape of dental health in Maryland. Unfortunately, that landscape is woefully short of being adequate.

Following the enactment of the Federal CHIP legislation and subsequently the Affordable Care Act coverage of the pediatric Medicaid population and, more importantly, the percentage of children actually seeing a dentist, has increased tremendously in Maryland. Maryland is a leader in the country in the number of dentists participating and the number of dental encounters received by this pediatric population. Also, through considerable effort, particularly by the Maryland State Dental Association and the Maryland Foundation of Dentistry, important improvements have been made in adult dental care with a program that diverts patients with dental infection and pain from emergency departments to dental offices for more effective and less expensive care. The establishment of the Adult Medicaid Project expects to open the door to some much needed dental care for approximately 35,000 Marylanders. The Missions of Mercy (MOMs) projects are, through volunteer dental personnel, delivering millions of dollars of dental care to thousands of people. Also, donated dental services through the Maryland Foundation of Dentistry has for years provided free dental care to the physically and cognitively challenged citizens of Maryland.

However, despite these efforts there has been an ever worsening increase among individuals of all socio-economic backgrounds failing to obtain even routine dental care. Even with the hard work of organized dentistry, MDAC, and health care advocate organizations many Marylanders are still not receiving adequate dental treatment. There are many reasons cited as contributing to this lack of care. Cost, fear, inconvenient locations, hours of operation of dental facilities, a lack of understanding of the importance of dental health, no original teeth, no perceived need, language etc. It's hard to ignore this problem when you consider that 15 Maryland adults died of dental cellulitis

in our hospitals between 2013 and 2016. Many Marylanders suffer and often die from a lack of early detection of oral cancer. These late detected diseases dramatically and disproportionately increase the cost of health care.

Now, it's time to support legislation that will help us get to the bottom of why people may fall through the cracks and do not receive oral health care. SB 511 will create a task force that is directed to perform an extensive study of the barriers to dental care. The task force will be composed of members of the oral health community, and will be chaired by the Dean of the University of Maryland School of Dentistry and an official from the Department of Health. It is charged to conduct a comprehensive two-year study: to identify people not receiving dental care; the barriers to their receiving care; to analyze the impact of the barriers; to identify solutions to those barriers; and to report recommendations to the General Assembly in a final report by Dec. 1, 2021. This Task Force will be comprised of representatives of organizations, coalitions and agencies across the State, and will be able to consider and benefit from the existing oral health plans and other work products of participating organizations such as MDAC, the Maryland Office of Oral Health and the numerous Maryland dental societies and Associations.

If we understand the access to care issues facing our fellow citizens - such as lack of child care, high costs, little or no coverage, language, transportation - we can hopefully address these issues in a way that will increase and improve treatment of dental disease and not merely treat the symptoms with pain killers and opiates. Getting people into regular care with a dentist can help keep people out of the emergency room, keep people healthy, while helping to control our fiscal costs. It is time to analyze and get an understanding of the issues preventing so many from receiving dental care, and to develop comprehensive recommendations that will address unmet dental health needs.

The Maryland State Dental Association Respectfully Requests That SB 511 be Given a Favorable Report.

**Submitted:
February 18, 2020**

MACHC_Pam Kasemeyer_FAV_SB0511

Uploaded by: Kasemeyer, Pam

Position: FAV

MID-ATLANTIC ASSOCIATION OF COMMUNITY HEALTH CENTERS

Serving Maryland and Delaware



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TO: The Honorable Delores G. Kelley, Chair
Members, Senate Finance Committee

FROM: Pamela Metz Kasemeyer
Danna L. Kauffman
Richard A. Tabuteau

DATE: February 18, 2020

RE: **SUPPORT** – Senate Bill 511 – *Task Force on Oral Health in Maryland*

The Mid-Atlantic Association of Community Health Centers (MACHC) is the federally designated Primary Care Association for Delaware and Maryland Health Centers. Its members consist of community, migrant and homeless health centers, local non-profit and community-owned healthcare programs, including all of Maryland's federally qualified health centers (FQHCs). MACHC's members provide health care services to the medically underserved and uninsured. MACHC is built on helping our members in the delivery of accessible, affordable, cost effective, and quality primary health care to those in need. MACHC **supports** Senate Bill 511.

MACHC has long been an advocate for ensuring access and coverage for dental services. Access to oral health care services is a critical component of the range of essential services necessary to comprehensively address the health care needs of the individuals served by health centers. MACHC believes the proposed Task Force provides an excellent opportunity to comprehensively evaluate oral health in the State, including access to care and other systemic limitations to receiving dental services. Such a comprehensive, multi-disciplinary review should result in meaningful recommendations to address current oral health challenges. A favorable report is requested.

For more information call:

Pamela Metz Kasemeyer
Danna L. Kauffman
Richard A. Tabuteau
410-244-7000

SenKelley_FAV_SB511

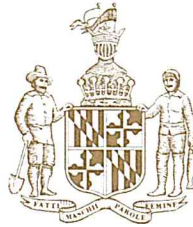
Uploaded by: Senator Kelley, Senator Kelley

Position: FAV

SENATOR DELORES G. KELLEY
Legislative District 10
Baltimore County

—
Chair
Finance Committee

—
Executive Nominations Committee
Rules Committee
Legislative Policy Committee



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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

TESTIMONY OF SENATOR DELORES G. KELLEY

REGARDING SENATE BILL 511-TASK FORCE ON ORAL HEALTH IN MARYLAND

BEFORE THE SENATE FINANCE COMMITTEE

ON TUESDAY, FEBRUARY 18, 2020

Mr. Vice-chair and Members:

It has been almost 13 years since Maryland tragically lost one of its youngest citizens to a bacterial infection that started in a tooth. Since the death of this young Marylander we have been on a quest to make sure that the same thing doesn't happen again. The good news is that in Maryland we've made some of the most dramatic and positive changes in the country. Maryland children are seeing dentists at higher rates than ever. In fact, Maryland has one of the highest percentages of children seeing a dentist in the country. According to the 2017 Annual Oral Health Legislative Report, less than 1 percent of children who were

enrolled in our children's Medicaid program had to be seen in an emergency room for a dental issue. This means better care for the patients and fiscal savings for the state.

The progress our State made is due, in large part, to the commitment we made to increase Medicaid reimbursement rates for dental services for children and to ensure that every Maryland child enrolled in the Healthy Smiles program has a dental home the minute they receive their enrollment card. While there has been substantial progress in ensuring that our youngest have good oral health care, we need to find ways to increase the dental health of our children and we need to give an equal amount of attention to boost the oral health of our vulnerable adult populations.

In 2018 the Maryland General Assembly took a step in the right direction by passing a pilot program to provide adult dental Medicaid benefits to certain adults. Now, it's time to support legislation that will help us get to the bottom of why people may fall through the cracks and not receive oral health care. It's hard

not to ignore this problem when you consider that 15 Maryland adults died of dental cellulitis in our hospitals between 2013 and 2016.

SB 511 will create a task force that would perform an extensive study of the barriers to dental care. The task force is to be composed of members of the oral health community, led by the Dean of the University of Maryland School of Dentistry and the Deputy Secretary of Public Health Services. It is to be a comprehensive two-year study to identify the people not receiving dental care and what the barriers are that prevent them from receiving dental care. It is to analyze the impact of the barriers, to identify solutions to those barriers, and to report recommendations to General Assembly in a final report by Dec. 1, 2021.

If we understand the access to care issues facing our fellow citizens, issues such as lack of child care, costs, transportation, language and cultural factors we can better treat the dental diseases facing these populations, and not merely the symptoms of the disease with pain killers and opiates. Getting people into regular care with a dentist can help keep people out of the emergency room, keep people

healthy, and keep our fiscal house in line. The type of thorough analyses under SB 511 is absolutely critical to help us understand the barriers to care so we can ensure that all Marylanders receive the best care dentistry can provide.

In light of all of these considerations, I urge your strong support of SB 511.

Maryland Catholic Conference_FAV_SB511

Uploaded by: Wallerstedt, Anne

Position: FAV



ARCHDIOCESE OF BALTIMORE † ARCHDIOCESE OF WASHINGTON † DIOCESE OF WILMINGTON

February 18, 2020

**SB 511
Task Force on Oral Health in Maryland**

Senate Finance Committee

Position: Support

The Maryland Catholic Conference (“Conference”) represents the public-policy interests of the three Roman Catholic (arch)dioceses serving Maryland: the Archdiocese of Baltimore, the Archdiocese of Washington, and the Diocese of Wilmington.

Senate Bill 511 creates a Task Force to study current access to dental services throughout the state, with a focus on poor, disabled, and aging populations, identify where in Maryland there is a lack of or disparate availability of oral health care services, identify barriers to accessing oral health care services, find options to eliminate those barriers, and make recommendations to increase access to oral health care overall.

The Catholic Church has a strong interest in ensuring access to quality, affordable, and life-giving health care for all. As such, the Conference supports expanding access to health care options for those who need it, as every person has a basic right to adequate health care arising from the Church’s teaching on the sanctity and dignity of human life.

Senate Bill 511 aims to achieve this lofty goal in Maryland. Dental care is an important part of an individual’s overall physical health, and providing it for those who are less likely to be able to afford it is central to maintaining a person’s wellbeing and advancing their health. It also closes a crucial gap for those who are unable to afford dental services, most often the vulnerable and poverty-stricken in our communities. Providing even limited dental coverage will not only improve overall health, but also open doors by way of job opportunities and other societal benefits.

The Conference appreciates your consideration and, for these reasons, urges you to support Senate Bill 511.

MDDDC_FAV_SB511

Uploaded by: Walmsley, Keith

Position: FAV



MARYLAND DEVELOPMENTAL DISABILITIES COALITION

Dedicated to the rights and quality of life for people with developmental disabilities in Maryland

Finance Committee

February 18, 2020

SB 511: Task Force on Oral Health in Maryland

Position: Support



8601 Robert Fulton Dr
Suite 140
Columbia, MD 21046

The Maryland Developmental Disabilities Coalition (DD Coalition) is comprised of five statewide organizations that are committed to improving the opportunities and outcomes for Marylanders with intellectual and developmental disabilities (IDD). As such, the DD Coalition supports SB 511.



1500 Union Avenue
Suite 2000
Baltimore, MD 21211

A lack of comprehensive oral health services is of great concern to individuals with developmental disabilities and their families. Access to health care, including oral health care is a basic need.

WHY is this legislation important?

- Many people with significant disabilities have Medicaid as their health insurance, which only covers basic cleaning two times per year and simple extractions.
- Many people with significant disabilities rely on Supplemental Security Income (SSI) as their main or sole source of income.
- People with disabilities are unemployed at a much higher rate than the general population, resulting in much lower income and fewer employee benefits. According to the U.S. Dept. Of Labor, 18.7% of people with disabilities are working compared to 65.7% of people without disabilities.



8835 Columbia 100 Pky
Suite P
Columbia, MD 21044

WHAT does this legislation do?

This bill establishes the Task Force on Oral Health in Maryland. The task force must:

- Analyze current access to dental services in the State, with a focus on residents affected by poverty, disabilities, or aging.
- Identify areas of the State where a significant number of residents are not receiving oral health care services, distinguishing between pediatric and adult populations.
- Identify barriers to receiving dental services in areas in need and analyze the specific impact of such barriers.
- Assess options to eliminate such barriers, including the feasibility of establishing a program for dental therapy in the State.
- Make recommendations to increase access to dental services in the State.



**Maryland Developmental
Disabilities Council**

217 E Redwood Street
Suite 1300
Baltimore, MD 21202

There aren't enough dentists willing to accept Medicaid to meet demand, and often dentists and dental hygienists lack sufficient training to provide their services to people with significant support needs; this means that people with disabilities may have difficulty locating dentists.

The DD Coalition supports SB 511 because this task force is a critical step towards removing some of the barriers to oral health care for people with developmental disabilities.



7000 Tudsbury Road
Windsor Mill, MD
21244

Contact: Keith Walmsley, Director of Public Policy Initiatives, MD DDC
kwalmsley@md-council.org

MRHA_FAV_SB511

Uploaded by: Wilson, Lara

Position: FAV



Statement of Maryland Rural Health Association

To the Finance Committee

February 18, 2020

Senate Bill 511: Task Force on Oral Health in Maryland

POSITION: SUPPORT

Chair Kelley, Vice Chair Feldman, Senators Beidle, Benson, Hayes, Klausmeier, Kramer, Pinsky, Reilly, West and Young, and members of the Finance Committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of Senate Bill 511: Task Force on Oral Health in Maryland.

This legislation would establish the Task Force on Oral Health in Maryland; providing for the composition, chair, and staffing of the Task Force; prohibiting a member of the Task Force from receiving certain compensation, but authorizing the reimbursement of certain expenses; requiring the Task Force to study and make recommendations regarding certain matters; requiring the Task Force to submit interim and final reports to the Governor and certain committees of the General Assembly on or before certain dates; providing for the termination of this Act; and generally relating to the Task Force on Oral Health in Maryland

MRHA's mission is to educate and advocate for the optimal health and wellness of rural communities and their residents. Membership is comprised of health departments, hospitals, community health centers, health professionals, and community members in rural Maryland.

Rural Maryland represents almost 80 percent of Maryland's land area and 25% of its population. Of Maryland's 24 jurisdictions, 18 are considered rural by the state, and with a population of over 1.6 million they differ greatly from the urban areas in the state.

The 2018 Maryland Rural Health Plan (www.MDRuralHealthPlan.org), an extensive assessment of Maryland's rural health needs, identified the need for increased access to dental care, as a recurring theme. Specifically, there are several barriers to oral health in rural communities: poverty and the ability to pay; lack of insurance or type of insurance; transportation limitations; lack of understanding the importance of dental health; lack of dental services; and lack of dentist accepting patients on state insurance. The combination of these barriers has resulted in poor dental health outcomes for Maryland's rural communities. The rural jurisdictions of Allegany, Caroline, Charles, Dorchester, Garrett, Queen Anne's, Somerset, Talbot, Washington, Wicomico, and Worcester all contain a Dental Health Professional Shortage Area.

MHRA believes this legislation is important to support our rural communities and we thank you for your consideration.

Lara Wilson, Executive Director, larawilson@mdruralhealth.org, 410-693-6988

MMCOA_FWA_SB511

Uploaded by: Briemann, Jennifer

Position: FWA



**MMCOA
Board of Directors**

Senate Bill 511 – Task Force on Oral Health in Maryland

President

Eric R. Wagner
Executive Vice President
MedStar Family Choice,
Inc.

SUPPORT WITH AMENDMENT

**Senate Finance Committee
February 18, 2020**

Vice President/

Secretary

Vincent M. Ancona
President
Amerigroup Maryland,
Inc.

Thank you for the opportunity to submit this testimony in support of Senate Bill 511- Task Force on Oral Health in Maryland. We respectfully ask for an amendment to the bill to include managed care organization representation on the Task Force.

Treasurer

Edward Kumian
CEO
Priority Partners MCO,
Inc.

The Maryland Managed Care Organization Association's (MMCOA) nine member Medicaid MCOs that serve over 1.2 million Marylanders through the Medicaid HealthChoice program are committed to identifying ways to improve quality and access to care for all Medicaid participants.

Angelo D. Edge
CEO
Aetna Better Health

MMCOA supports the establishment of a Task Force on Oral Health in Maryland and its goals to identify areas lacking in dental services, identify and analyze barriers to receiving services, assess options to eliminate barriers, and make recommendations on methods to increase access to dental services.

Jai Seunarine
CEO
Jai Medical Systems

Among the benefits provided to our members is adult dental care which is provided at the choice of the MCO because of its importance to the overall health of the member. Given our role in providing that care and given the experience and knowledge that MCOs have in the health challenges facing those we serve, we respectfully ask that Senate Bill 511 be amended to include a representative of MMCOA serve as a member of the Oral Health Task Force.

Wayne D. Wilson
*VP, Gov't Programs &
External Relations*
Kaiser Permanente - Mid-
Atlantic States

We would welcome our involvement in this worthwhile initiative and look forward to the collaborative opportunities and improvements that involvement would bring.

Cynthia M. Demarest
CEO
Maryland Physicians Care

Charles Milligan
Interim President & CEO
UnitedHealthcare
of the Mid-Atlantic, Inc.

Please contact Jennifer Briemann, Executive Director of MMCOA, with any questions regarding this testimony at jbriemann@marylandmco.org.

Mark Puente
President
Univ. of MD Health Plans

MDH_INFO_SB511

Uploaded by: Ye, Webster

Position: INFO



DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

February 18, 2020

The Honorable Delores G. Kelley, Chair
Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, MD 21401-1991

RE: Letter of Information – SB 511 – Task Force on Oral Health in Maryland

Dear Chair Kelley and Committee Members:

The Department of Health (MDH) submits this letter of information on SB 511 – Task Force on Oral Health in Maryland.

The committee should be aware that the work of the proposed task force would be duplicative of efforts undertaken by MDH and the Maryland Dental Action Coalition (MDAC). The Medical Assistance Program, in conjunction with the Office of Oral Health, submits an annual oral health access report (originally required by SB 598 – Ch. 113 of the Acts of 1998) under Health-General Article, §13-2504(b). The report includes information on Medicaid dental utilization and expenditures, as well as information on the actions taken by the Department and Office of Oral Health to increase access to dental services and overall oral health in the State.

The Office of Oral Health (OOH) was established in 1996 to address a myriad of dental or oral diseases affecting the State's neediest children and adults. The mission of OOH is to improve the oral health of Maryland residents through a variety of public oral health initiatives and interventions. MDAC's mission is to develop and maintain a statewide partnership of individuals and organizations working together to improve the health of all Marylanders through increased oral health promotion, disease prevention, education, advocacy and access to oral health care. In 2018, the organization published a five-year strategic plan to improve access, oral health literacy, and oral disease prevention in the State. Additionally, in 2016, the Hilltop Institute prepared a report for MDAC assessing the potential cost to expand dental services available through the Medicaid Program. I hope this information is useful. If you would like to discuss this further, please contact Director of Governmental Affairs Webster Ye at (410) 260-3190 or webster.ye@maryland.gov.

Sincerely,

Robert R. Neall
Secretary