

Testimony for SB100.Senate Finance Committee.2.3.2

Uploaded by: Davis, Anna

Position: FAV



MARYLAND CITIZENS' HEALTH INITIATIVE

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SUPPORT

SENATE BILL 100- TASK FORCE ON ORAL HEALTH IN MARYLAND

Senate Finance Committee

February 3, 2021

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 population health;
- 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 SB100.

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.

PDF Written Testimony in Support of SB 100.pdf

Uploaded by: Doring, Charles

Position: FAV

Written Testimony in Support of SB 100

Madam Chair, and members of the Senate Finance Committee, thank you for the opportunity to provide written today in support of SB 100. My name is Charles Doring and I a general dentist in Rockville Maryland. Along with providing dental care in an office setting, I also provide portable dentistry and I am on the medical staff of several nursing homes in Montgomery County. I am also the Legislative Affairs Committee Chair for the Maryland State Dental Association, recently named to the Provider Advisory Committee of the Maryland Health Smiles (Medicaid), and I am also a member of the Deans Faculty at our dental school, the University of Maryland School of Dentistry (UMSOD).

One of the core values in the ADA's Principles of Ethics is that of beneficence, or "doing good". I, like many of my colleagues participate in community outreach programs such as Mission of Mercy, Maryland Foundation of Dentistry, and Maryland's Medicaid dental program, the Maryland Health Smiles. Despite the many forms of outreach, there are still communities of Marylanders that go without dental care for a wide variety of reasons. SB 100 calls for many parties of interest to study the particular barriers to dental care and make recommendations back to this legislative body. Goal, to give every Marylander the ability of a "dental home". A "home" that speaks that individual's language, flexibility in access, and has the ability to participate in a Medicaid program that offers the preventive care the patient requires to maintain oral health without restrictions. The issues of access to dental care are multi layered, intertwined, and complex. They can not be teased out and studied individually.

To give an example of the complexity of the issues, let's look from the prospective of the dental student and the recent dental school graduate.

According to the ADA Health Policy Institute, US dental school enrollment is surging with over 25,000 predoctoral student enrolled in 2018-19, the highest enrollment ever! In 2000, the US had 54 dental schools, today 67. In order to accommodate diversity in the general population, dental schools are training a wider diversity of students. At UMSOD, 24% of dental students come from an Under Represented Minority with 13% African American. 52% of UMSOD students are female. That's the good news.

According to the University of Maryland Baltimore (UMB), 2019 dental students graduated with average debt close to a quarter million dollars. That is the highest debt of all UMB Professional schools and 31% higher than the debt of medical students.

The staggering debt of our young dentists clearly effects their practice choice and location. The tendency is to migrate to where the population of patients are that can best afford and avail themselves to receive dental care. According to April 2020 data from the US Health Resources & Services Administration, 59 million Americans live in dental health professional shortage areas. Collectively, we need to come up with strategies that provide long term incentives to have dental team members work in an equilibrium where everyone has availability to and understands the importance of quality dental care. This task force will look at this and may other methods to achieve our goal.

For these reasons, I ask for a favorable report on SB 100.

SB0100 - FAV_MACHC_TF Oral Health in MD.pdf

Uploaded by: Kasemeyer, Pam

Position: FAV

MID-ATLANTIC ASSOCIATION OF COMMUNITY HEALTH CENTERS

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

FROM: Pamela Metz Kasemeyer
Danna L. Kauffman

DATE: January 20, 2021

RE: **SUPPORT** – Senate Bill 100 – *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 100.

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
410-244-7000

SB0100_FAV_MACHC_TF Oral Health in MD.pdf

Uploaded by: Kasemeyer, Pam

Position: FAV



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

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman

DATE: February 3, 2021

RE: **SUPPORT** – Senate Bill 100 – *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 Community Health Centers. As the backbone of the primary care safety net, Federally Qualified Health Centers (FQHCs) are united by a shared mission to ensure access to high-quality health care to all individuals, regardless of ability to pay. FQHCs are non-profit organizations providing comprehensive primary care to the medically underserved and uninsured. MACHC supports its members in the delivery of accessible, affordable, cost effective, and quality primary health care to those most in need. To this end, MACHC **supports** Senate Bill 100.

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MD Catholic Conference _FAV_SB0100.pdf

Uploaded by: Kraska, MJ

Position: FAV



ARCHDIOCESE OF BALTIMORE † ARCHDIOCESE OF WASHINGTON † DIOCESE OF WILMINGTON

February 3, 2021

**SB 100
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 100 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 100 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 100.

MD Catholic Conference_FAV_SB0100.pdf

Uploaded by: Kraska, MJ

Position: FAV



ARCHDIOCESE OF BALTIMORE † ARCHDIOCESE OF WASHINGTON † DIOCESE OF WILMINGTON

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The Conference appreciates your consideration and, for these reasons, urges you to support Senate Bill 100.

MRHA SB100 - Task Force on Oral Health in Maryland

Uploaded by: Orosz, Samantha

Position: FAV



Statement of Maryland Rural Health Association

To the Finance Committee

February 3, 2021

Senate Bill 100 Task Force on Oral Health in Maryland

POSITION: SUPPORT

Chair Kelley, Vice Chair Feldman, and members of the Finance Committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of Senate Bill 100 Task Force on Oral Health in Maryland.

MRHA supports this legislation that establishes the creation of this task force that would analyze current access to dental services in the State, with a focus on residents affected by poverty, disabilities, or aging; identify barriers to accessing dental services; identify areas of the State where a significant number of residents are not receiving oral health care services, among other key activities.

Rural Marylanders across the state suffer from lack of accessible and quality oral health and dental services. This legislation would provide data driven solutions to increasing dental services to underserved rural communities and would allow funding programs to consider these solutions for implementation. Diverse and data driven solutions are desperately needed in rural Maryland to provide equitable oral health and dental services.

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 counties, 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.

And while Maryland is one of the richest states, there is great disparity in how wealth is distributed. The greatest portion of wealth resides around the Baltimore/Washington Region; while further away from the I-95 corridor, differences in the social and economic environment are very apparent.

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

2 - FIN - SB 100 – Task Force on Oral Health in Ma

Uploaded by: Bennardi, Maryland Department of Health /Office of Governmen

Position: INFO



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

February 3, 2021

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

RE: SB 100 – Task Force on Oral Health in Maryland - Letter of Information

Dear Chair Kelley and Committee Members:

The Department of Health (MDH) is submitting this letter of information on SB 100 – Task Force on Oral Health in Maryland.

SB 100 establishes a task force to (1) analyze the current access to dental services for all residents of the State; (2) identify areas of the State where a significant number of residents are not receiving oral health care services, distinguishing between pediatric and adult populations; (3) identify barriers to receiving dental services in these areas; (4) analyze the impact of these barriers; (5) assess the options to eliminate the barriers; and (6) make recommendations regarding methods to increase access to dental services in the State. An interim report is due on May 1, 2022 and a final report is due December 1, 2022. The Deputy Secretary for Health Care Financing and the Dean of the University of Maryland School of Dentistry would co-chair the task force. The bill requires MDH and the Department of Legislative Services to provide staff for the task force.

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. 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. In 2017, MDAC submitted a report to the legislature on the annual cost of emergency room visits for individuals who have chronic dental conditions and who are uninsured or covered by Medicaid, Medicare or commercial insurance.

MDAC has expressed its interest in evaluating the Medicaid limited adult dental pilot that was launched in June 2019.

I hope this information is useful. If you would like to discuss this further, please contact Assistant Secretary for Health Policy Webster Ye at (410) 260-3190 or webster.ye@maryland.gov or Deputy Director of Governmental Affairs Heather Shek at the same number or heather.shek@maryland.gov.

Sincerely,



Webster Ye
Assistant Secretary, Health Policy