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Committee: Senate Finance Committee

Bill Number: SB 923 - Maryland Medical Assistance Program - Eligibility and Disenrollment

Hearing Date: March 10, 2021

Position: Support with Amendment

The Maryland Dental Action Coalition (MDAC) strongly supports *Senate Bill 923 – Maryland Medical Assistance Program -Eligibility and Disenrollment*. The bill extends Medicaid postpartum coverage from up to 60 days to 1 year after pregnancy. MDAC requests an amendment to ensure that the term “health coverage” is inclusive of dental coverage.

Maternal health outcomes can be greatly improved ensuring access to care for at least a year beyond pregnancy. However, our States efforts to reduce maternal morbidity and mortality among the most at-risk communities are hampered by limitations on Medicaid postpartum coverage. With coverage lasting only up to 60 days beyond pregnancy, we are missing opportunities to ensure at-risk women can get the care they need. The need for extended coverage is evidenced by the number of maternal deaths up to a year after pregnancy. Twelve percent of maternal mortality incidents occur in the 43 to 365 days after pregnancy.ⁱ

Postpartum coverage should be inclusive of dental care because it would improve the health of new mom as well as the child. We ask that there be a clarification in the proposed legislation to make it clear that the bill is inclusive of dental coverage for the following reasons:

- **Dental is Already Included in Maryland Medicaid’s Postpartum Coverage:** Beginning this spring, the Maryland Medicaid Program will begin including dental coverage in its postpartum program. Governor Hogan funded postpartum dental coverage at the request of Senator Guzzone and Delegate McKay during the 2020 session. If postpartum coverage is extended beyond the 60-day period by this legislation, it should be consistent with current plans to cover dental services.
- **Protecting Maternal Health:** Dental coverage is important to improve health outcomes of women during the postpartum period. Poor oral health is linked to cardiovascular disease, diabetes, pneumonia, and strokes.ⁱⁱ

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- **Protecting Children’s Health:** Dental coverage for women in the postpartum period helps improve health outcomes for their children:
 - **Reduced Risk of Dental Caries:** Mothers may transmit the infection that causes tooth decay to their infants.ⁱⁱⁱ Dental coverage would improve both the health of the new mom and baby. Children are more likely to have dental caries if their caregivers, including mothers, have poor dental health.^{iv, v, vi} Early childhood caries (ECC) can begin soon after infants begin getting teeth, and it has serious long-term implications for the child. Children with early childhood caries are at a higher risk of developing lesions on both baby and adult teeth. Infants are 32 times more at risk for early childhood caries if they are from low-income families, have a diet high in sugar, and have mothers with low-income levels^{vii}. Poor oral health can lead to a lifetime of somatic health issues.
 - **Increased Access to Dental Homes for Children:** The American Academy of Pediatric Dentists recommends that children see a dentist and have a dental home by 12-months of age. However, only 1.5% have had a dental visit by age one, compared to 89% of children who have had a physician visit in that time period.^{viii} Clearly more infants need to have dental homes. One key strategy is to increase the number of postpartum women who have their own dental homes, leading to the establishment of a family dental home. However, this may be a challenge when new mothers lack dental coverage, including those under a Medicaid program. Consumers report that insurance coverage is the most important factor in accessing dental care.^{ix}
- **Dental Coverage is Consistent with Federal Legislation:** On February 24th, 2021, Senators Durbin and Duckworth announced they would be reintroducing the *Mother and Offspring Mortality and Morbidity Awareness Act* (MOMMA). Representative Robin Kelly is expected to reintroduce the companion bill. Since the bill passed the House last year, we can anticipate a significant push for the bill this upcoming year. The bill addresses the extension of Medicaid postpartum coverage for up to one year. The bill’s proposed postpartum coverage is inclusive of dental.

To ensure dental coverage is included under this bill, we ask for the following amendment:

On page 2 in line 22, insert “, DENTAL,” after “medical”

We urge the committee to move forward in this legislation. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

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ⁱ Petersen EE, Davis NL, Goodman D, et al. *Vital Signs: Pregnancy-Related Deaths, United States, 2011–2015, and Strategies for Prevention, 13 States, 2013–2017*. MMWR Morb Mortal Wkly Rep 2019;68:423–429. DOI: <http://dx.doi.org/10.15585/mmwr.mm6818e1>

ⁱⁱ https://www.ada.org/~media/ADA/Publications/Files/patient_61.ashx

ⁱⁱⁱ Damle, S G et al. “Transmission of mutans streptococci in mother-child pairs.” *The Indian journal of medical research* vol. 144,2 (2016): 264-270. doi:10.4103/0971-5916.195042

^{iv} Smith RE, Badner VN, Morse DE, Freeman K (2002). Maternal risk indicators for childhood carriers in an inner city population. *Community Dental Oral Epidemiology* 30:176-181.

^v Bedos C, Brodeur JM, Arpin S, Nicolau B (2005). Dental caries experience: a two-generational study.

^{vi} Reisine S, Tellez M., Willem J. Sogn W, Ismail (2008) Relationship between caregiver’s and child’s caries prevalence among disadvantaged African Americans. *Community Dent Oral Epidemiology* 36:191-200

^{vii} American Academy of Pediatric Dentistry, Council on Clinical Affairs. *Perinatal and Infant Oral Health Care*. 2016.

^{viii} Ibid

^{ix} 2019 Consumer Survey of Barriers to and Facilitators of Access to Oral Health Services. Oral Health Workforce Research Center.

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