ARIANA KELLY Legislative District 16 Montgomery County

DEPUTY MAJORITY WHIP

Health and Government Operations Committee

Subcommittees

Chair, Health Occupations and Long Term Care

Insurance and Pharmaeuticals

House Chair, Joint Committee on Children, Youth, and Families



6 Bladen Street, Room 425 Annapolis, Maryland 21401 410-841-3642 · 301-858-3642 800-492-7122 Ext. 3642 Fax 410-841-3026 · 301-858-3026 Ariana.Kelly@house.state.md.us

The Maryland House of Delegates

## THE MARYLAND HOUSE OF DELEGATES Annapolis, Maryland 21401

## **Support HB 219: Dental Hygienists - Consultation Requirements - Health Care Practitioners February 1, 2022**

Good afternoon and thank you Chair Pendergrass and members of the committee for allowing me to present HB 219.

This bill seeks to build on legislation that passed the House in 2019 by Delegate Kipke, which allowed dental hygienists to provide services in nursing homes, assisted living programs, group homes, adult daycares, and physicians' offices. In addition to physician offices, this bill adds the offices of nurse practitioners, certified nurse midwives, and licensed certified midwives. Although there are a variety of ways this bill could help improve access to dental care, we believe that it could be particularly impactful during pregnancy. For example, a nurse or midwife-run birthing center could bring in a hygienist to provide their patients with preventative services.

Due to the physiological changes that occur during pregnancy, pregnant women are at increased risk for a variety of dental issues. The American College of Obstetricians and Gynecologists estimates that 40% of women experience some form of periodontal disease during their pregnancy. The risk of pregnancy-related dental issues is also higher for patients who are members of marginalized communities.

In addition to the physiological causes of pregnancy-related dental issues, many patients have difficulty accessing a dental provider while pregnant, which further increases their risk of dental issues. ACOG found that 56% of women do not see a dentist while pregnant and MDH reports that 15% of pregnant women *with a dentist* do not see their dentist. It is increasingly recommended that pregnancy care providers help coordinate dental care for their patients. If passed, this bill would help bridge the gap between pregnancy care and dental care.

In addition to maternal dental health, prenatal and postpartum dental care has significant impacts on children's dental health. Research shows that having a parent engaged with routine dental care increases the likelihood that a child receives routine dental care. By lowering the barriers to initiating dental care, this bill will help facilitate a permanent relationship between a pregnant patient and a community dentist, which will have lifelong positive impacts on the patient's health and the health of their child.

Finally, this bill maintains all of the provisions that the dentists agreed to in 2019. Dental hygienists will be required to be supervised by a dentist, services provided would be limited to basic preventative work such as dental hygiene instruction and the application of fluoride, unless other services are ordered by a dentist, the supervising dentist would also be required to examine the patient following an initial appointment and at least once every year thereafter.

I appreciate your attention to this request and encourage you to issue a favorable committee report on HB 219.