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**Committee:** Senate Finance Committee

**Bill Number:** Senate Bill 988 – Dental Hygienists in Schools and School-Based Health Centers/the Maryland Collaborative to Improve Children’s Oral Health through School-Based Programs

**Hearing Date:** February 25, 2025

**Position:** Support

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The Maryland Dental Action Coalition strongly supports *Senate Bill 988* - Dental Hygienists in Schools and School-Based Health Centers/the Maryland Collaborative to Improve Children’s Oral Health through School-Based Programs. The bill establishes an interdisciplinary collaborative to consider how school-based dental programs can address the decline in access to children’s oral health services.

**Access to dental services for children has decreased in Maryland, reversing years of progress.**

After the death of Deamonte Driver in 2007 of a tooth abscess, the Maryland Department of Health established the Maryland Dental Action Committee to develop an action plan. Driver, a student in Prince George’s County, had pediatric dental coverage through Maryland Medicaid. His death tragically demonstrated that coverage does not equal access.

Maryland stakeholders worked diligently to implement the Maryland Dental Action Committee’s action plan. The Committee later became a stand-alone nonprofit organization, the Maryland Dental Action Coalition.

The action plan worked. According to Maryland Department of Health’s Annual Oral Health Legislative Reports, the percentage of children with Medicaid who accessed preventative dental services increased from about 50% in 2008 to 64% in 2015. Progress plateaued during the 2016-

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2019 period with about 63-64% of children receiving preventative dental services under Medicaid. The numbers plummeted during COVID and have yet to rebound at just 56% of children obtaining preventive dental services in Medicaid in 2023 (see attached chart).

***The declining numbers of children accessing dental services is concerning. Maryland needs to examine public health strategies to address this issue. SB 988 is a critical next step in addressing the oral health needs of children.***

**The bill launches a renewed public health approach to closing gaps for children to dental care.**

The bill supports children and Maryland families. Children are already in school. By building stronger school-based dental programs, Maryland can:

- ✓ Improve the oral health of children through basic preventative care; and
- ✓ Build bridges to permanent dental homes for families.

The bill creates an interprofessional workgroup to bring together dental hygienists, dentists, school nurses, and educational professionals to design evidenced-based public health programs. Potential approaches include:

- Expanding the utilization of dental hygienists providing preventative services. Existing law allows dental hygienists meeting certain conditions, such as having a collaborative written agreement with a dentist, to provide these services. However, there are many barriers to implementation, including the lack of direct Medicaid reimbursement to dental hygienists;
- Exploring whether school nurses can play a role in applying fluoride varnishes under guidelines developed by Departments of Health and Education; and
- Developing practical strategies to provide linkages to permanent dental homes.

**Conclusion**

The Maryland Dental Action Coalition urges a favorable report on SB 988. We are alarmed at the declining access to dental services for children. The Maryland Collaborative to Improve Children's Oral Health Through School-Based Programs can provide an important part of the roadmap to safeguard the oral health of Maryland's children. If we can provide any additional information, please contact Robyn Elliott at [relliott@policypartners.net](mailto:relliott@policypartners.net).

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# Percentage of Children Receiving Dental Services by Type of Service Children Ages 4-20, Enrolled for at least 320 days

## Attachment to Maryland Dental Action Coalition’s Testimony on SB 988/HB 1143 - the Maryland Collaborative to Improve Children's Oral Health Through School-Based Programs

### Percentage of Children Aged 4 through 20 Years Enrolled in Medicaid for at Least 320 Days Receiving Dental Services, by Type of Service

Calendar Year	Diagnostic	Preventative	Restorative
2007	48.6%	45.2%	16.4%
2008	53.1%	50.1%	21.3%
2009	55.5%	52.3%	21.8%
2010	61.9%	58.2%	25.0%
2011	64.5%	60.8%	25.1%
2012	66.0%	62.5%	24.3%
2013	66.8%	63.2%	24.4%
2014	66.2%	62.6%	23.2%
2015	67.6%	64.0%	24.0%
2016	67.0%	63.4%	23.3%
2017	66.5%	62.9%	23.2%
2018	67.4%	63.6%	22.9%
2019	67.75%	63.8%	23.0%
2020	51.9%	48.2%	16.0%
2021	58.3%	55.0%	19.0%
2022	58.9%	55.5%	19.0%
2023	69.8%	56.5%	18.9%

Source: Maryland Department of Health’s Annual Oral Health Report

<https://health.maryland.gov/phpa/oralhealth/Pages/Annual-Legislative-Reports.aspx>