

TESTIMONY TO THE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE

HB0970: Maryland Medical Assistance Program- Hospitals- Dental Services

POSITION: Support

BY: Nancy Soreng, President

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The League of Women Voters Maryland supports House **Bill 970**: **Maryland Medical Assistance Program- Hospitals- Dental Services**, which would require that Maryland acute care hospitals provide Operating Room time for the dental procedures some disabled adults and children need to undergo within that setting.

The League believes that health care is a human right, and that all Marylanders need access to affordable, equitable, quality health care- including oral health care.

Per the Nation Council on Disability: "Research shows that dental health is the predicate for general health, and general health is the predicate for positive employment, education, and community living outcome, yet adults with Intellectual and Developmental Disabilities (I/DD) experience poorer oral health and significant barriers to obtaining oral health, relative to adults without I/DD."

It is important to address the barriers to obtaining preventative and restorative oral health care for disabled individuals. Untreated gum disease can lead to heart problems. Chronic dental pain can impact behavior, as well as school or job performance. Untreated tooth decay can worsen to the point where an individual might need emergency hospital treatment for a bacterial infection that had spread to their jaw or brain. While 12-year-old Deamonte Driver did not have a developmental disability, his inability to access dental care that would have treated his decayed tooth ultimately led to his death in 2007. Accessible, equitable dental care saves lives.

There is a lack of dental care providers experienced in and willing to provide appropriate care for individuals with I/DD, because they are unfamiliar with their needs. And care for disabled individuals cannot always be appropriately done in a dental office. Proper equipment might not be available to accommodate their needs, and the individual might not be able to tolerate the unfamiliar, uncomfortable, and often painful procedure itself.

¹ https://ncd.gov/publications/2022/medicaid-oral-health-coverage-adults-IDD

Some individuals may have the medical stability to be able to get dental care in an office setting if they are able to get proper sedation. But that is difficult and expensive to arrange, because in addition to the dentist doing the care, a dental anesthesiologist may also need to be present to administer the sedation. Not every dental office is equipped for this, not all providers accept Medicaid reimbursement, and not every patient is stable enough to undergo deep sedation in a setting where emergency hospital care for an unexpected problem is not immediately available.

Sometimes the safest, and only, appropriate setting for this type of care is in a hospital Operating Room. This is a controlled setting where general anesthesia can be administered safely, especially for long procedures, and where medical back-up is immediately available if needed.

But unfortunately, per the Pediatric Oral Health Research and Policy Center:² "Financial pressures have forced hospitals to prioritize surgical services based on profitability and necessity. Medical surgery procedures are better reimbursed than dental, and displace dental cases from scheduling in many hospitals."

By mandating the allocation of hospital Operating Room time and resources to serve the needs of individuals with intellectual and developmental disabilities, this legislation will enable them to access the safe, effective dental care to which they are entitled.

For that reason, the League and its 1,500+ members urge a favorable report on House Bill 970.

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² https://www.aapd.org/globalassets/media/advocacy/ord.pdf