



University of Connecticut Health Center  
*School of Dental Medicine*

TESTIMONY

Appropriations Committee

February 18, 2009

Office of the Dean

H. B. No. 6365 AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2011, AND MAKING APPROPRIATIONS THEREFOR.

Distinguished members of the Appropriations Committee, my name is Monty MacNeil, Dean, School of Dental Medicine, University of Connecticut. Thank you for the opportunity to provide written testimony regarding H. B. No. 6365 AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2011, AND MAKING APPROPRIATIONS THEREFOR.

I am asking that you oppose the provision of the Governor's proposed budget that eliminates coverage or reimbursement for routine dental care for those individuals covered by Medicaid or SAGA in the Department of Social Services Budget. The proposal effectively limits services covered to emergency dental care. This will have a significant detrimental effect on the educational programs at the University Of Connecticut School Of Dental Medicine (SODM). It will diminish our ability to train a culturally competent dental workforce, negatively impact the teaching and training time we require of our students (and future dentists) and it will adversely impact the overall health of the neediest citizens of Connecticut.

As many of you know, the SODM is the largest, single provider of oral health care services to Medicaid and SAGA recipients in the State. We see patients from every zip code in the State of Connecticut. In FY'08, we provided 94,400 patient visits at our dental clinics in Farmington and Hartford, of which 62,519 (66.2%) were for Medicaid/SAGA recipients. 9,335 visits in FY08 were adult emergency visits, which represents approximately ten percent of our overall patient care activity. The UConn Health Center (UHC) sees the greatest number of dental emergency patients in the State. If the proposed reduction in Medicaid services were to be enacted, it will undeniably result in an exponential increase in the number of emergency visits related to dental disease. An average dental visit in the dental clinics costs \$106 while an emergency visit costs an average of \$176; a shift in care delivery from comprehensive dental care focused on preventive strategies is significantly less cost effective than emergency, episodic care. The estimated impact of this proposed cut is a \$3 million loss to the dental clinics at the UHC, adding to its estimated FY 09 deficit.

The SODM provides dental care to underserved populations beyond its own facilities throughout the State. Since 1999, the School has partnered with community clinics to expand access to care; we are currently working with fourteen (14) safety net providers in Hartford, New Britain, Middletown, Norwalk, East Hartford, Manchester, Waterbury, Norwich, New Haven, Willimantic, Putnam, Derby, Bridgeport, and Torrington. With this community outreach effort, we have been able to provide an additional 32,000 patient visits to residents who otherwise would not receive dental care. If this proposal is implemented, it goes without saying that all patient care activities at these sites may be in jeopardy. Our focus on community based training has resulted in meaningful changes in the dental workforce; specifically, data shows that there

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has been a measurable increase in the number of our graduates who have chosen to practice in community settings, serving traditionally underserved populations, as a result of their educational program at UConn. These gains will likely be lost as we would need to refocus the training programs and limit extramural care in the absence of reimbursement.

In order to provide the best possible clinical training for dental students and residents, it is essential that the SODM be able to expose students to a broad patient population with a full spectrum of oral and system diseases. We are exceptionally concerned that changes in Medicaid coverage for adults will create an environment in which patients will no longer seek care until emergency situations arise, significantly decreasing the patient base critical for our teaching missions. Although management of emergencies is a component of our training programs, it cannot become the predominant mode in our clinical setting. This will compromise the quality of the educational experience and may adversely impact the dental care workforce in the State.

As the states only public academic medical center, the SODM will continue to support its public service mission, and we will continue to provide the citizens of the State of Connecticut with the finest possible dental care while training future generations of qualified dental practitioners. However, the proposed budget has ramifications beyond compromising the health of thousands of citizens – it will adversely affect our ability to provide students with the best possible clinical training, negatively impact the career choices of our graduates, increase the operational costs at the UHC, and will ultimately cost the State far more.

I strongly urge you to reject this proposal and fully restore funding and reimbursement for routine and preventative dental services for individuals on Medicaid and SAGA. Thank you for your attention.