

Testimony submitted by:  
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Senator Doyle, Representative Walker, and members of the Human Services Committee:

The Connecticut Association of School Based Health Centers wish to voice their opposition to the Governor's Bill 843, section 67, that requires prior authorization of all non-emergency dental services provided under the Department of Social Services' dental programs, and eliminates non-emergency dental care for adults. In this bills' current form, the consequences of requiring prior authorization for non-emergency preventive and restorative dental coverage will negatively impact the significant progress that has been made in increasing access to dental care – progress that the legislature wisely ensured by increasing reimbursement rates and reducing the administrative burden to dental providers enrolled in the HUSKY program.

For children in particular, early and regular preventive dental care reduces or eliminates the complex problems that result from untreated oral health issues. Children that receive dental hygiene services on a regular basis benefit from cleanings, x-rays, application of sealants, and fluoride treatments. These interventions are known to reduce dental decay, an infectious disease seen in 40% of 4 year olds. In school-based dental programs, it is not uncommon to see severe decay in kindergarten and first grade students, particularly those students that have HUSKY insurance and have had difficulty finding Medicaid providers in their communities. These children live with dental pain that impacts their ability to concentrate and succeed in school. School based dental programs are expanding to reach children in many more Connecticut communities; one of the key factors in the success of these prevention programs is easy access to care for children and their families. Preventive dental care is relatively inexpensive to provide, has a positive impact on overall health and well-being, identifies early dental disease, and is a service enjoyed by most children with private dental insurance as a matter of course. Untreated dental disease leads to much more costly treatment that involves missed days from school, parent time out of work to attend dental appointments, and potentially life-threatening infections that have claimed the lives of children.

Eliminating dental coverage for adults will directly affect children. We know that parents' use of dental services is a predictor of children's utilization of care. When parents incorporate dental prevention into their health care practice, they teach their children the value of oral hygiene and set an example for a lifetime of good oral health. When pregnant women have untreated dental disease, that dental infection is transmitted from the parent to the newborn and young child. Pregnant women that do not have dental insurance coverage are far less likely to seek care during pregnancy, increasing the transmission of caries from parent to child. In addition, dental disease is linked to poor birth outcomes including pre-term births, low birth weight babies, and other delivery complications. These poor birth outcomes require costly health care that extends beyond birth and into early childhood.

The elimination of non-emergency dental care for adults and the proposed prior authorization of services for all ages will lead to a dramatic increase in the use of hospital emergency departments for dental emergencies. The states' dental safety net providers will experience an increase in uninsured patients in sites that are already strained to meet increased demand for services. Prior authorization requirements will discourage the more than 100 dentists that have recently enrolled in the HUSKY plan with a promise of decreased administrative burden. These proposed changes defeat the General Assembly's recent efforts to ensure access to dental services for children and adults, and will have many drastic consequences that will cost more to the health care system in the long run.