

**Legislative Testimony  
Human Services Committee  
HB5616 AAC Licensure Of Advanced Dental Hygiene Practitioners  
Tuesday March 1<sup>st</sup>, 2011  
Kevin McLaughlin D.M.D.**

Senator Musto, Representative Tercyak and members of the Human Services committee, my name is Kevin McLaughlin. I am an oral surgeon practicing in Norwalk since 1990. I thank you for the opportunity to present this written testimony to you in opposition to HB 5616.

I understand the purpose of this bill is to help serve the underprivileged populations. This sounds like a noble cause yet it is questionable if it is needed and it is no doubt an expensive solution as well as model that has inherently goes against a system of checks and balances that makes the health care system function.

- 1) There is a premise that there is lack of dental access for underprivileged populations. According to Dr. Donna Balaski who is in charge of the Connecticut Dental Health Partnership, all of her department's data shows that there is currently plenty of access to seek care in the Medicaid dental system. Her department designed an implemented a study to look into this very question. The results showed that 93% of attempts to obtain a non-emergency dental appointment resulted in an office appointment. 88% of scheduled appointments were within 4 weeks. The average wait was 11.2 days. 78% of those offices called were able to get the patient in within 2 weeks. This data may be obtained from :

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Department of Social Services  
25 Sigourney Street  
Hartford, CT 06106  
Phone (860) 424 - 5342  
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- 2) Yet **if** there was an access problem then there are less costly models. The ADHP model requires a minimum of two post-graduation years after college. The cost of other models whether advanced dental therapist or expanded function dental assistants are significantly less.
- 3) Finally, there is another aspect that makes ADHP different then other mid-level practitioners in any other profession. ADHP proposes to have complete independence from the profession of dentistry (no checks and balances). Nurse practitioners in medicine minimally have general supervision with a practicing physician. ADHP proposes hygienists to practice not hygiene but dentistry without any supervision from a dentist. To me that makes no sense. Imagine a group of people making laws for the state of Connecticut independent of the State Legislature. I know this analogy you would not allow but we actually are considering it for the oral health of our state.

In closing, I would like to thank the members of the Human Services committee for allowing me to submit this testimony. If you should have any questions, you can call me at my office.

Sincerely,

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