Dental Hygiene Student Letter in Support of ADHP / Opposing SB No. 993

March 12, 2013

Dear Senator Gerratana, Representative Johnson
and Members of the Public Health Committee;

I, Nicole Paolino from Middlebury am currently a dental hygiene student set to graduate in May 2013. I would like to address two bills.

I am opposing the current Raised SB No. 993 "An Act Concerning Dental Assistants And Expanded Function Dental Auxiliary" **in its present form and wish to have it amended to add the ADHP, mid-level provider and edited to correct the language related to EFDA.**

As written, SB. No. 993, this will:

- Negatively impact both current and future dental hygienists to work in Connecticut.
    - If I am unable to find viable employment as a registered dental hygienist, this will affect my and my family's ability to live in the State of Connecticut.
    - ADHP will be a way to create a new position for existing registered dental hygienists who choose to pursue this role.
    - During my public health experiences at The University of Bridgeport, I have personally experienced situations in which access to dental care is limited and oral health care needs are left unmet.
- Not effectively address access to care issues in the State of Connecticut.
    - SB No. 993 will expand the duties of a Dental Auxiliary only under the "Direct Supervision" of a Licensed Dentist.
    - This type of supervision will not effectively address access to care issues, which are primarily focused in public health settings, where a dentist is not always present.
    - Please amend SB No. 993 to include the ADHP mid-level provider, as stated in the 2012 HB 5541to be adopted for this 2013 legislative session. Following the 2012 legislative session where HB 5541 ended in a tie vote, I am outraged that this issue was not included for this bill or legislative session; it deserves to be brought to the floor for a vote during this year.

Supporting the creation of the hygiene-based mid-level provider, ADHP can help save Medicaid money. This is achievable because a dental hygiene mid-level provider can provide clients with full preventive care in addition to minimally invasive restorative treatment in a public health setting. By intervening in the early stages of the disease process, oral healthcare expenses are minimized. One of the misunderstood goals of ADHP is that we want to practice independently from a dentist when in all actuality, we as ADHP'S would work collaboratively to form a relationship with the dentist who would provide the advanced restorative care. This is integrated health care and is the way of the future. The public health programs using dental hygienists and mid level providers are proven to be sustainable. Volumes of evidence-based literature ranging from 1958 to present day exist in support of an ADHP. Refer to the following links for additional information regarding the support of ADHP:
http://www.rdhmag.com/articles/print/volume-18/issue-11/columns/periodontics/the-forsyth-experiment-proved-hygienists-were-good-at-restorative-work-too-good.html

I request that you, as my legislator, ensure that ADHP be presented, adopted AND put forward as a bill for a vote this 2013 legislation session.

Thank you for your time,
Respectfully,
Nicole Paolino, SDH