

Testimony before the Insurance and Real Estate Committee

H.B. 5627 AN ACT EXTENDING THE PERIOD A CHILD, STEPCHILD OR OTHER DEPENDENT CHILD MAY RETAIN DENTAL INSURANCE COVERAGE UNDER A PARENT'S HEALTH INSURANCE POLICY

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Good afternoon Honorable Senator Lessor, Honorable Representative Scanlon and members of the Insurance and Real Estate Committee.

My name is Brianna Munoz and I am a registered voter in the Town of Farmington. I am here today in my role as a dentist, national spokesperson for the American Academy of Pediatric Dentistry, and Legislative Representative for the Connecticut Society of Pediatric Dentists.

I would like to testify in support of HB H.B.5627 AN ACT EXTENDING THE PERIOD A CHILD, STEPCHILD OR OTHER DEPENDENT CHILD MAY RETAIN DENTAL INSURANCE COVERAGE UNDER A PARENT'S HEALTH INSURANCE POLICY.

By increasing the number of Americans age 19-26 with dental insurance, there will be a concomitant decrease in the utilization of dental emergency services with significant cost savings in the long term.

As a dental resident, I was responsible for taking call in the Emergency Room (ER) at Connecticut Children's Medical Center. Throughout my 11 week rotation as first call, I treated over 70 patients in the ER after hours. From localized pain to diffuse facial swelling, a wide array of dental emergencies presented to the hospital each day. However, not every hospital in Connecticut has the luxury of employing dental staff. So how do ER physicians manage dental emergencies?

Without the skills or armamentarium to eradicate the cause of dental pain, hospital staff members are oftentimes limited to writing prescriptions for antibiotics or pain medication.¹ Not only does this leave the source of infection untreated, but public health officials must also consider the potential for antibiotic resistance and opioid dependence. We are in the midst of an opioid epidemic. With respect to patients receiving opioid prescriptions to control dental pain, an estimated 37.9% of patients have reported nonmedical use of the medication while 6.5% have engaged in drug diversion.²

Nationwide, there is one dental-related ER visit every 15 seconds costing the health system \$1.6 billion annually. Yet 80% of these visits are considered preventable.¹ By allowing children to be covered until age 26 under their parent's health insurance policy, this bill will increase the utilization of preventive services, improve the accessibility of care, decrease ER visits, and save money for the health system.

For these reasons, I urge you to extend dental coverage on family plans to young people up to age 26. Dental coverage should mirror medical coverage. The mouth is the gateway to the rest of the body, and it is time that this notion is reflected by health policy.

Thank you for your time and for supporting young people in Connecticut.

Brianna Muñoz

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References:

(1) American Dental Association. From Emergency Room to the Dental Chair.
<https://www.ada.org/en/public-programs/action-for-dental-health/er-referral>.

(2) Indian Health Service Division of Oral Health & Indian Health Service National Committee on Heroin, Opioid and Pain Efforts. Recommendations for Management of Acute Dental Pain.
<https://webcache.googleusercontent.com/search?q=cache:H79I1Q0bx4kJ:https://www.ihs.gov/doh/documents/Recommendations%2520for%2520Acute%2520Dental%2520Pain%2520Management.pdf+%&cd=1&hl=en&ct=clnk&gl=us>.