

Legislative Testimony
Insurance and Real Estate Committee
HB 5249 An Act Concerning Dental Insurance Coverage for Children, Stepchildren, and
Other Dependent Children
HB 5253 An Act Concerning Dental and Vision Insurance Coverage for Children,
Stepchildren, and Other Dependent Children
SB 369 An Act Concerning Dental and Vision Insurance Coverage for Children,
Stepchildren and Other Dependent Children
Thursday, February 14, 2019

Dear Senator Lesser, Representative Scanlon, and Members of the Insurance and Real Estate Committee,

My name is Dr. Jonathan Knapp. I currently serve as the Co-Chair of the Connecticut State Dental Association's Legislative Council. I am also a Past Chair of the American Dental Association's Council on Dental Practice. I also serve as the Chair of The Subcommittee on Information Exchange for the ANSI accredited ADA Standards Committee on Dental Informatics, and I sit on the Electronic Claims Content Committee, which addresses issues with electronic dental claims submission. I have been practicing dentistry in Bethel, Connecticut for 27 years and I am a very active Medicaid provider. I have been involved in The Connecticut Mission of Mercy free dental clinic and on its oversight board since its inception. I am writing in support of proposed HB 5249, HB 5253, and SB 369. These bills would allow children, stepchildren and other dependent children to retain dental insurance coverage under their parents' insurance policies until they attain the age of twenty-six or obtain substitute coverage through an employer.

This measure would go a long way in supporting young adults who might not otherwise return to, or stay in our state upon graduation from colleges and universities. I have seen the results of some bad habits that may be picked up while attending college. Poor and irregular diets do happen when students are away from home and under pressure from rigorous course requirements. This can lead to increased numbers of cavities and gum problems, which would be more readily addressed, and at an earlier, less severe stage, when coverage is in place until the age of 26.

These young people are more frequently in a position where they must start with lower paying jobs, often with no additional benefits covering their oral health care. Even routine care may be impossible to afford without coverage at these lower income levels and wisdom tooth removal, which is quite common in this age range, may become an unbearable expense. By the time they are in jobs with health and dental benefits, the problems have become more serious and more costly to address. As the old saying goes: "An ounce of prevention is worth a pound of cure"

I would also like to raise the concept of dental coverage and ERISA notification as a consumer rights issue. Most patients walking into my dental office have very little knowledge regarding how their dental coverage works. They don't know how much of the cost they will be required by their insurance carriers to pay out of their own pockets. Requirements differ between ERISA

based, employer funded plans, which are not subject to CT state laws regarding non-covered services and assignment of benefits laws, and more traditional insurance company risk based plans, which are subject to these state requirements. Having clear labeling on an patients dental insurance card would provide for much more transparency. This would be helpful because consumers would have information in advance, in order to better understand their dental coverage vs. their out of pocket expenses. It would also help dentists and our office staff members better explain the costs when patients have questions.

I urge you to extend dental coverage on family plans to young people up to age 26 and support HB 5249, HB 5253 and SB 369. Additionally, I would ask that you seriously consider adding legislative language to provide for the inclusion of information on dental insurance cards informing patients as to whether or not they are covered by an ERISA plan.

Respectfully Submitted,

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