

Testimony in Support of House Bill 5249, House Bill 5253, and Senate Bill 369

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Ambika Sharma, DMD/MPH student at the University of Connecticut

Senator Lesser, Representative Scanlon, Senator Kelly, Representative Pavalock-D'Amato, and distinguished members of the Insurance and Real Estate Committee,

My name is Ambika Sharma and I am in my fifth and final year of the DMD/ MPH program at the University of Connecticut. I am a registered voter in Farmington Connecticut. I am testifying in support of House Bill 5249, House Bill 5253, and Senate Bill 369. Thank you for this opportunity to share my thoughts.

I would like to start by sharing a story of a friend of mine. We can call him Matt. Matt graduated with an engineering degree from the University of Connecticut, Storrs in 2014. Following graduation Matt moved to New Haven where he pursued a start-up with several other peers. During this time working on the start-up Matt did not have dental insurance. In the past year Matt started a more stable, engineering job at Pratt and Whitney in Connecticut where he now receives comprehensive medical and dental insurance.

Matt is now my patient. He expressed to me on his first visit that he has been in pain and discomfort for several years now- he complained of some teeth breaking but always noted it was too expensive to seek dental care without insurance. He was routinely taking Tylenol and ibuprofen before bed to be able to sleep through this pain. When I first looked at his radiographs and took a glance in his mouth I was dismayed and deeply saddened. This was a peer of mine, an intelligent hard worker and a generally health individual. Matt needed 3 teeth extracted, 2 root canals, 2 core-build ups, 2 crowns and 5 fillings. He is now considering implants to replace the teeth that he has lost.

6 month dental visits serve a crucial purpose: to prevent dental diseases and also to hinder their progression. Preventive and first line treatment is significantly cheaper than prosthetic dentistry, root canals and implant placement. By neglecting his dental care for the past 6 years, Matt needs much, much more extensive dental care.

If Matt had gone for cleanings every 6 months, every cavity that had led to a broken down tooth needing an extraction or a root canal, would have been treated conservatively. As a 27 year old he did not have to lose 3 of his teeth. Matt did not have to be in this position. As a white, educated male, he is in one of the lowest risk demographics for dental diseases. His situation is simply a symbol of a deeply flawed system.

Oral health is medical health. Dental diseases are strongly correlated with chronic inflammatory conditions like diabetes and heart disease. Dentists are often the first line for the diagnosis of life threatening diseases, to name a few: cancer, autoimmune disorders and uncontrolled diabetes. If it is important enough to have medical insurance tied to parents until the age of 26, to not include dental insurance is just negligence. There is no excuse for that.

I would also like to touch on an important concept I learned through my dental and public health education. Preventive public health measures have increased life expectancy and decreased the

incidence of disease far more than any advancement in modern medicine. By investing in preventive dental care in the age group of 19-26 year olds, the cost of avoidable emergency room visits will drop, the cost of expensive dental work will also decrease in the long run.

This age group is often one that slips through the cracks with dental care. Not only is it generally a low risk group, but usually they are one that is just starting to adapt to adult life and responsibilities. By denying them of their parent's dental insurance we are sending a message that dental health is not as important as medical health. I believe the state of Connecticut is one of the most progressive. The current status of dental insurance coverage for 19-26 years olds goes against the character and values of this state. I implore you to consider this bill strongly.