

Testimony Opposing LD 1615: "An Act to Expand Access to Oral Health Care by Creating a New Path for Obtaining a License to Practice Dentistry"

Senator Bailey, Representative Mathieson, and members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services:

My name is Michael Dowling, DMD, and I am a board-certified pediatric dentist with nearly 15 years of experience practicing in Yarmouth, Maine. Approximately half of the children I serve are covered by MaineCare, our state's Medicaid program. I chair the Maine Dental Associations Council on Government Relations and am a Past President of the Maine Society of Pediatric Dentistry

I am writing in strong opposition to LD 1615.

While I fully support expanding access to dental care—especially for underserved communities—this bill proposes a deeply flawed and potentially dangerous approach. LD 1615 would allow individuals to obtain a dental license in Maine without demonstrating that their education is equivalent to a U.S.-accredited dental degree. This undermines the high standards that exist to ensure patient safety and quality of care. Let me be clear, Maine already has a well-functioning system through which dentists trained in foreign countries can obtain licensure in the State of Maine so long as they can show their degree is equivalent to a US based dental school.

The Risks of Inadequate Dental Training

Dentistry is not merely about fixing teeth—it is a healthcare profession that requires a comprehensive understanding of human biology, pharmacology, pathology, surgical procedures, radiology, and emergency medical care. Lowering licensure standards opens the door to providers who may not be adequately trained to deliver safe, competent care.

Research underscores these concerns:

- A study in the *Journal of the American Dental Association* found wide variability in the quality and depth of dental education across countries, reinforcing the need for standardized training to protect patients. (JADA, 2014;145(2):110–114)
- The World Health Organization has also reported significant global inconsistencies in dental training, warning that lack of harmonization can lead to substandard care and greater public health risks.

Potential consequences of inadequate training include:

- Misdiagnosis or delayed recognition of serious oral diseases like oral cancer.
- Poorly executed treatments leading to infection, irreversible damage, or unnecessary tooth loss.

- Inability to safely manage pediatric patients or respond effectively to medical emergencies such as allergic reactions or complications from sedation.

This is especially concerning in pediatric dentistry, where treating children requires not just clinical skill but specialized training in child development and behavior management. Inexperienced or inadequately trained providers can inadvertently traumatize young patients or overlook critical signs of systemic disease.

Further, data from the *National Practitioner Data Bank* (NPDB) suggests that providers educated outside the U.S. without completing standardized domestic training are more likely to have malpractice or disciplinary actions reported. This highlights the importance of maintaining rigorous licensure standards to ensure public safety.

A Two-Tiered Standard of Care

Perhaps most troubling is the ethical dilemma this bill creates. Maine already allows internationally trained dentists to obtain licensure if they can prove their education is equivalent. LD 1615 would bypass that safeguard, allowing individuals with substandard credentials to treat patients—disproportionately those on MaineCare or with limited options.

In practice, this creates a two-tiered system: one standard of care for privately insured or affluent patients, and a lower standard for low-income individuals. That is not equity. That is not access. That is a disservice to the very communities we aim to help.

Positive Steps Already Underway

It's important to acknowledge that meaningful work is already being done to improve access to dental care in Maine. This legislative session, the Maine Dental Association, the Maine Dental Hygienists' Association, and others—working closely with members of this very Committee—have introduced thoughtful, collaborative legislation aimed at expanding access without compromising patient safety or professional standards. These efforts reflect a commitment to sustainable, high-quality care that serves all Mainers fairly and responsibly.

Conclusion

I urge this committee to reject LD 1615. Let us pursue more thoughtful, effective solutions to expand dental access—such as investing in loan forgiveness, increasing MaineCare reimbursement rates, scholarships, or tax credits. But we must never compromise the safety and trust our patients place in us as healthcare providers.

Thank you for your time and commitment to protecting the oral health of all Mainers.

Sincerely,
Michael Dowling, DMD
Board-Certified Pediatric Dentist
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