Testimony in Opposition to LD 1615

Submitted by Adam Saltz, DMD, MS, MPH

Chairpersons and Members of the Committee:

My name is Adam Saltz. I am a board-certified periodontist practicing in South Portland, Maine. I currently serve as President of the Maine Dental Association and Vice Chair-Elect to the American Dental Association's New Dentist Committee. I appreciate the opportunity to submit this testimony in strong opposition to LD 1615.

While the stated intent of LD 1615 is commendable—seeking to increase access to oral health services—the approach taken by this bill is fundamentally flawed. It suggests the adoption of a two-tiered dental system in our state. Those who can access care from fully licensed dentists, trained in CODA-accredited institutions and tested through national standardized exams. And those, challenged by socioeconomic or geographic barriers, to be seen by "adjunct dentists", who have not met those same standards. That is not equity. That is disparity by design.

The bill assumes that general supervision and written agreements are sufficient safeguards, but anyone who has practiced dentistry understands the complexity of treatment decisions, sometimes made in the moment. Patients present with occult conditions and complex medical histories that require advanced judgment and a strong interdisciplinary and/or interprofessional team. The structure proposed in LD 1615 does not ensure that the supervising dentist will be physically present or directly involved in patient care. It is deeply concerning to consider that "adjunct dentists", with limited training in U.S. clinical protocols, could be managing patients semi-independently, particularly when unforeseen emergencies arise.

Furthermore, this proposal bypasses long-standing and carefully developed licensure requirements that exist to protect the public. Currently, all dentists seeking licensure in Maine must complete an accredited doctoral program and pass rigorous written and clinical examinations. This standard exists for a reason. It ensures that those entrusted with patients' oral health are fully prepared to diagnose and treat a wide array of conditions at a high level of competence. Allowing individuals to transition to full licensure after just three years of adjunct practice, without meeting these educational or clinical benchmarks, undermines the very integrity of our profession.

We all want to increase access to care. But there are more effective and responsible ways to achieve this. We should continue to support programs that incentivize dentists to work in underserved and rural communities, expand loan repayment opportunities, and invest in community health centers and school-based clinics. These strategies address access while preserving quality and public trust.

I urge you to consider what this bill truly represents. It is not a pathway to equity. It is a shortcut that introduces risk, erodes standards, and sends a troubling message to both patients and practitioners: that some care is good enough for some people. I respectfully ask this Committee to reject LD 1615 and instead work with the dental community to develop solutions that genuinely serve all Mainers with excellence and fairness.

Thank you for your time and for your commitment to protecting the oral health of our communities.

Respectfully,

Adam Saltz, DMD, MS, MPH

President, Maine Dental Association