

**Written Testimony in Opposition to LD 1615**  
**Submitted by Shanna Gagnon, DMD**  
**General Dentist, Farmingdale, Maine**

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

My name is Dr. Shanna Gagnon, and I am a general dentist practicing in Farmingdale, Maine. I have served this community for the past 21 years, and I am the Immediate Past President of the Maine Dental Association. I am writing to strongly oppose LD 1615, which proposes an alternative path to dental licensure as a solution to Maine's dental access crisis.

While I acknowledge the real and pressing need to improve access to dental care, particularly in rural parts of our state, I strongly believe that LD 1615 is not the answer. In fact, I am deeply concerned that it will only serve to complicate and exacerbate the challenges we currently face.

At the onset of the COVID-19 pandemic, I hired a new associate dentist who had just graduated from the University of New England. Like many of their peers, this new graduate entered the workforce having lost a significant portion of clinical and didactic education due to pandemic-related restrictions. The dental profession at large recognized these deficiencies and called on experienced practitioners like myself to help fill in the gaps through mentorship and extended training. These recent graduates were not at fault—they were victims of extraordinary circumstances—but the ripple effects of their abbreviated training are still evident in today's clinical landscape. As a result, I have focused a great deal of time educating my associate with my own clinical experience, and also by providing her with membership to a highly respected study club to further her education.

Why is this relevant to LD 1615? Because this bill proposes to grant licensure to individuals who may be even *less* prepared than those who graduated during the pandemic. And we are already seeing how difficult it is for new dentists to meet the demands of comprehensive dental care, especially in areas like central and northern Maine where access to specialists is extremely limited or nonexistent.

In these underserved areas, general dentists are routinely required to go beyond the typical scope of their initial training. They must manage complex surgical extractions, perform molar root canals, and sometimes provide orthodontic services—procedures that demand a high level of clinical competence and experience. These skills are not adequately covered in four years of CODA-accredited dental school, even under normal circumstances. The idea that we would license even less qualified providers to perform such services is not just misguided—it is dangerous and would create a two-tiered style of dental care in our state.

LD 1615 risks lowering the standards of care for the very communities it purports to help. Maine's dental access problem is not due to a lack of training shortcuts—it stems from broader systemic issues such as provider retention, student debt, reimbursement models, and geographic distribution of care. Watering down the requirements to become a dentist will not fix these problems; it will merely create new ones, potentially compromising patient safety and eroding public trust in our profession.

I urge this committee to reject LD 1615 and instead focus on sustainable solutions that support the training, recruitment, and retention of fully qualified dental professionals in all areas of Maine. This

includes investing in loan repayment programs, creating tax incentives to our new graduates with astronomical debt loads, increasing Medicaid reimbursement rates, and expanding support for rural dental practices that mentor and train new graduates to meet the needs of their communities.

Thank you for your time and your service to the people of Maine.

Respectfully submitted,

**Dr. Shanna Gagnon, DMD**

General Dentist

Farmingdale, Maine