

Teresa Alley
Jonesport
LD 1746

Testimony of Teresa Alley, Oral Health Coordinator, Washington County Children's Program for LD 1746: An Act to Reduce Dental Disease and Ensure Access to Essential Preventive Dental Care Among Maine Children
Before the Appropriations and Financial Affairs Committee and the Health and Human Services Committee
Public Hearing: May 6, 2025

Senator Ingwersen, Representative Meyer, and members of the Health and Human Services Committee, my name is Teresa Alley, I am a dental hygienist, and I reside in Jonesport. I am in favor of LD 1746 due to the positive impacts it will have for Maine's children.

Since 1999, I have administered the CDC School Oral Health Program in Washington County and have served almost 1000 students each year enrolled at Washington County elementary schools. In my vast experience, children living in Washington County are experiencing the greatest barrier to oral health services than ever before. The community health centers, who serve the largest number of individuals enrolled in MaineCare, regularly don't have dental providers to care for our residents. Several of the health centers are experiencing a nine-month waiting period to see a dental provider. Personally, I know too many children who go to bed each night with tooth aches.

It is common for children to tell me they are unable to go to the dentist and that their parents know they are in pain. Recently one such child said "Mom will take me to the dentist after we have our roof fixed." Frequently children report they do not have their own toothbrush or toothpaste. Only the lucky child can access restorative care when our school-based preventive measures are not enough to help children who suffer from unsightly, painful decayed teeth. Dental disease affects the child's ability to speak, their self-esteem, and ability to concentrate and learn while in school.

I continue to observe the positive impacts the school-based oral health program has for our County. Families in our County have come to depend on our services, and we are often the only dental provider who will care for them the strength of our program is that we serve children within the school, meaning parents do not have to take time off work or figure out transportation to ensure children get care. By supporting comprehensive mobile dental care in coordination with the CDC School Oral Health Program the decay rates for children throughout the State will also reduce.

With the use of silver diamine fluoride (a cavity stopping treatment) and other preventive measures, the decay rate for children in our program reduced from 35% to as low as 23%. By empowering primary care providers to also apply silver diamine fluoride during well child visits, the number of children with dental disease will be reduced, especially since children are more likely to be able to get in to see a primary care doctor than a dentist.

We rely deeply on the support we receive from the Maine Oral Health Program of the Maine CDC. Upon my arrival in the public health sector in 1999, the Maine Oral Health Program employed four staff members. Over time, that number dwindled to zero. It is crucial to restore the infrastructure at the State level. Additional staff will continue to offer technical support to oral health entities that serve Maine's most venerable residents: our children.

Thank you for your consideration of my testimony on this important issue.