

LD 2123: An Act to Improve Dental Care Access for Children by Modifying the MaineCare Reimbursement Methodology for the Provision of Anesthesia for Certain Dental Services

Senator Ingwersen, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services,

My name is Kim Humphrey. I live in Auburn, Maine. I also serve on the dental subcommittee of the Maine Developmental Services Oversight Advisory. I am the Founder and President of Community Connect Maine, a nonprofit with a statewide network of more than 4,000 people. And I am the mother of an adult son with profound autism. This testimony is my personal testimony as well as representing Community Connect Maine.

As the parent of a non-verbal adult with autism in his thirties, my family has spent more than three decades struggling to access appropriate dental care for him. Inadequate reimbursement for anesthesia has created cascading barriers to care, with serious consequences for my son, our family, and the many people whose lives he has touched. Teeth are part of the human body, and dental care, when it requires anesthesia, must be covered appropriately by insurance.

Here are a few troubling snapshots from my son's life that illustrate the real-world impact of this issue:

My son had his first dental visit at age three. He was unable to speak then, (and he is unable to speak today). He began showing distress through tantrums and aggression. We decided to take him to a dentist. No provider in our area would see him that would provide IV sedation. A dentist in Auburn did us a favor and recruited a provider from four hours away to come and administer IV sedation in-office. Our first dental bill was \$1,100 for six cavities. Without personal connections and family resources, I don't know what we would have done.

In first grade, my non-verbal son again became aggressive and dysregulated. Over a six-month period it was discovered that untreated dental pain was the cause of his behavior. He was placed on a four-month waiting list for outpatient IV sedation. Through connections, we were able to reduce that wait to one month instead of four. The ordeal cost him his mainstream school placement, something he never regained.

As a teenager, he was inappropriately hospitalized in a psychiatric setting for two and a half months. It was later determined that the root causes were physical, including chronic esophagitis and extensive unmet dental needs- multiple cavities and a partial root canal.

The ongoing inability to access appropriate dental providers has contributed to some of the most traumatic experiences of his life. These experiences have been devastating not only for him, but for our family and the many people who care for and support him.

As a member of the Maine Developmental Services Oversight Advisory Board, I am acutely aware of the state's legal obligation to respond to systemic unmet needs for adults with I/DD. Adequate payment for anesthesia in dental care is one such unmet need that affects people life long in our state. This is a systemic issue that disproportionately affects people with disabilities who require sedation, including children, and it has persisted for decades.

In the adult services system today, there is essentially one dentist serving most adults statewide who require IV sedation. He has a waiting list that is years long! The indirect costs of untreated dental

disease such as emergency care, psychiatric hospitalizations, school and placement disruptions, far outweigh the cost of providing timely, appropriate dental care.

I urge you to support LD 2123 and take an important step toward correcting a long-standing failure in our system. We must do better.

Sincerely,

Kim Humphrey

Mother of an adult with profound autism

Founder and President of Community Connect Maine

Auburn, Maine