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Testimony of Representative Joshua Morris in support of LD 307, An Act to Reduce the State's Health Care Costs

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Good afternoon Senator Baldacci, Representative Meyer, and honorable members of the Joint Standing Committee on Health and Human Services. My name is Representative Joshua Morris, and I represent the towns of Turner, Leeds, and Wayne.

I am pleased to sponsor LD 307, originally titled An Act to Lower the State's Health Care Costs. LD 307 would bring management to the existing dental benefit for Medicaid adults and children. The FY22-FY23 biennial budget included funds to establish a new Adult Dental Benefit in MaineCare. Maine DHHS tried to implement this through MaineCare, but the program is continuing to be under-utilized. Dental care is preventative care, and increasing utilization of this benefit would have wide reaching impact.

Maine currently has a MaineCare adult dental benefit, which is entirely run by DHHS. Utilizing a managed care dental system in Maine would result in greater access, a more robust dental network, increased access to care and cost-effective outcomes through a carved out, pre-paid dental health program. This would also bring budget predictability to the state. Through a managed care dental plan, the state would pay a flat fee per member per month.

Increased access to dental care has wide reaching impacts including reduced emergency department utilization, early detection of chronic diseases such as heart disease and diabetes, and saving taxpayer dollars through more efficient delivery of dental care.

Data shows that some states have seen a 38% to 40% drop in ER visits after adding the adult dental benefit. Managed care dental has proven that it can help lessen the burden on emergency rooms – if you already have a “dental home” you are more likely to visit your dentist before a dental problem becomes a dental emergency if you have an established relationship with a dental office. Their dentist will send them reminders to show up for their scheduled appointments, and reminders to schedule future appointments when it is time for a new cleaning. This is incredibly important, and the onus falls on the insurer to make sure the patients fill the dentist chairs.

An additional benefit is that dentists would not have to hire an additional person to handle burdensome government paperwork, reducing the administrative burden on providers. This streamlines the process for dental offices, and hopefully helps to encourage more providers to participate and be in-network.

Lastly, patients utilizing managed care dental would not be subject to any of the stigma that they may sadly face by utilizing Medicaid dental. The patient would receive a dental insurance card from the provider, just like you or I do. We should make it easier for covered individuals to access care, rather than harder.

Maine is one of only 9 states that still uses a fee-for-service model for dental. As a result, we have a lot of data about how well managed care dental works in other states. Data from states utilizing managed care dental demonstrates that states can increase access, maintain network adequacy, lower costs, and promote population health improvement through implementing managed care dental.

But don't just take my word for it – the numbers speak for themselves. In Massachusetts, more than 10,000 members received care under the state's Public Health Dental Hygienist Program, a 268% increase in 7 years. In Virginia, the managed care dental provider was able to triple an existing network of 620 dentists to a total of 1,895 providers – without a fee schedule increase. In 2022, 81% of those dentists were actively submitting claims, with 86% accepting new patients. In Texas, this same managed care dental provider was able to more than double the network of participating dentists within a year. Closer to home, in New Hampshire, patients began utilizing managed care dental in April 2023. It has been a success thus far. In New Hampshire, the insurer and the managed care provider developed a mobile strategy given workforce shortages and the need to build and strengthen the provider network statewide. These mobile events are being developed and deployed in areas of the state where the need is the greatest. Currently they have quarterly mobile dentistry events to support the dental home model in the most underserved areas. Innovative programs like this, run by the insurer and managed care dental provider, could help to serve even more Mainers in dire need of dental services.

Thank you for your time, and I am happy to answer any questions. There are also experts here behind me who can talk more about the many advantages of a managed care dental system.

Sincerely,



State Representative