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Testimony Neither For Nor Against LD 595, Resolve, To Ensure That Access to Oral and Facial Ambulatory Surgical Centers in Maine Remains Viable

Senator Claxton, Representative Meyer, and Members of the Health and Humans Services Committee:

My name is Angela Westhoff and I serve as the Executive Director of the Maine Dental Association. The MDA is a statewide association dedicated to advancing excellence in dentistry.

The MDA represents 85% of the dentists in Maine; there are 774 practicing and retired dentists who are active members of the association.

On behalf of the MDA, I am providing testimony neither for nor against LD 595, Resolve, To Ensure That Access to Oral and Facial Ambulatory Surgical Centers in Maine Remains Viable.

Dental reimbursement rates are abysmally low. The last time an across the board MaineCare rate increase for dental procedure codes occurred was in 1991. In 2002, fees increased, but only on nine (9) procedure codes; MaineCare reimbursement remains less than 50% of commercial dental insurance reimbursement. By and large, MaineCare fees for dental procedures fall below the 10th percentile of fees across New England. Unfortunately, these low reimbursement rates threaten the viability of safety net clinics and oftentimes undermine the ability of private practice dentists to treat significant numbers of MaineCare patients.

We can appreciate the economic impact the pandemic has had on businesses across Maine including ambulatory surgical centers as well as dental practices in general. However, the MDA has actively participated in the MaineCare Rate System Evaluation process and in the Myers and Stauffer Interim Report¹ dated January 26, 2021 dental codes were among the top priority areas for implementing recommended changes (Table 1, Group A, Priority Groupings, pg. 12). However, we do have concerns about legislation that would address just one dental code when we know that there are significant concerns that are much wider than one code or one region of the state. We believe a comprehensive and equitable approach to increasing dental rates is needed.

¹ DHHS MainCare Comprehensive Rate System Evaluation Interim Report: https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/MaineCare%20Comprehensive%20Rate%20System%20Evaluation%20Interim%20Report%202021.01.20.docx.pdf

In the Interim Report, two models identified to address dental services. One applied a fee schedule using rates based upon the 50th percentile (median) of estimated allowed amounts for commercial health plans. In this model, rates for 165 dental codes would increase and 10 would decrease.

In the other model, rates would be set at a percentage of the median commercial rate but pay a higher percentage for diagnostic, preventive, and endodontic services than for other services. This approach would be based upon a set % of the median allowed amounts for commercial health plans. In this approach, 141 dental codes would increase and 34 codes would decrease.

In either approach, there are between 141-165 dental codes that need to be adjusted. Going forward, we would be better served with a consistent and standardized way for developing rate methodologies and rate updates versus continuing to legislate changes one at a time.

Thank you for your time and attention.