



Testimony of Kalie Hess, Associate Director Partnership for Children's Oral Health on LD 979, An Act To Expand Maine's School- based Health Centers

Before the Joint Standing Committee on Health and Human Services
Public Hearing: April 6, 2021

Senator Claxton, Representative Meyer, and Members of the Committee on Health and Human Services: My name is Kalie Hess and I am the Associate Director of the Partnership for Children's Oral Health (Partnership). The Partnership is a collaborative effort, funded by philanthropic dollars, to build a broad network of individuals and organizations to create a Maine where no child suffers from preventable dental disease. I am writing in support of LD 979, An Act To Expand Maine's School-based Health Centers.

The Partnership has several strategic priorities that we are working on to improve the oral health of Maine children – one of which is to ensure that all children have access to preventive oral health care in school settings, and another is to integrate oral health into primary care. School-based health centers would be a great way to ensure that Maine children have more access to prevention through both traditional oral health care opportunities as well as the preventive oral health care that can happen in a medical office.

A major barrier that prevents children from getting oral health care is that it can be challenging for parents to take time off from work and drive their children to and from dental appointments, among other logistical challenges.¹ When you add in extra barriers such as children having MaineCare coverage this can be even more challenging as there are limited options for where children with MaineCare can get dental care, so parents often must travel significant distances to get this care.² For this reason, achieving good oral health becomes a health equity issue, where children who have commercial insurance are more likely to get preventive care than their peers who have MaineCare. We explored the differences in oral health care received by children with MaineCare and commercial insurance and this disparity plays out in significant ways. Children with MaineCare are less likely to have preventive dental care in any given year and preventive dental care peaks in elementary school and declines as children get older.³ Bringing services right to students can help alleviate some of this disparity.

¹ Kelly, S. E., Binkley, C. J., Neace, W. P., & Gale, B. S. (2005). Barriers to care-seeking for children's oral health among low-income caregivers. *American journal of public health, 95*(8), 1345–1351. <https://doi.org/10.2105/AJPH.2004.045286>

² Mofidi, M., Rozier, R. G., & King, R. S. (2002). Problems with access to dental care for Medicaid-insured children: what caregivers think. *American journal of public health, 92*(1), 53–58. <https://doi.org/10.2105/ajph.92.1.53>

³ Partnership for Children's Oral Health. (2020) *Dental Care among Children with MaineCare and Commercial Dental Benefits*. <https://mainepcoh.org/publications/databrief.pdf>



Partnership for Children's Oral Health

A network to eradicate dental disease in Maine children

Even if it seems unrealistic to bring a full dental clinic to every school with a school-based health center, the benefits of having at least a medical center would still help ensure that children received some preventive oral health services and referrals to dental care when needed. For example, fluoride varnish is a highly effective way to prevent cavities, and applying it is an easy process that happens in pediatrician offices all over the state. Bringing this to Maine's children through the school-based health centers would be a benefit in and of itself. In fact, there is an entire program called From the First Tooth that could be employed to help make this happen at the clinics across the state.⁴

Oral health care is integral to students' well-being, and to their academic success. In fact, oral health issues are a leading reason why students miss school, and children who are underserved by our system are disproportionately impacted in this way.^{5,6} Expanding school-based health centers would ensure that more children are connected with preventive oral health services and that oral health issues are caught early. There are myriad benefits to students from expanding school-based health centers in Maine – and improvements in oral health are one of them.

Thank you for your consideration of this testimony. I am happy to answer questions.

⁴ From the First Tooth. (2021) <https://www.fromthefirsttooth.org/>

⁵ Jackson, S. L., Vann, W. F., Jr, Kotch, J. B., Pahel, B. T., & Lee, J. Y. (2011). Impact of poor oral health on children's school attendance and performance. *American journal of public health*, 101(10), 1900–1906. <https://doi.org/10.2105/AJPH.2010.200915>

⁶ Seirawan, H., Faust, S., & Mulligan, R. (2012). The impact of oral health on the academic performance of disadvantaged children. *American journal of public health*, 102(9), 1729–1734. <https://doi.org/10.2105/AJPH.2011.300478>