



July 10, 2017

The Honorable Charlie Baker
Office of the Governor
State House, Room 280
Boston, MA 02133

Steering Committee Members

*American Academy of Pediatrics,
Massachusetts Chapter*

*Better Oral Health for
Massachusetts Coalition*

Boston Benefit Partners

Boston Children's Hospital

*Boston Public Health
Commission HIV Dental Program*

*Boston Public Health
Commission*

Office of Oral Health

*Boston University Henry M.
Goldman School of Dental
Medicine*

Delta Dental of Massachusetts

DentaQuest

DentaQuest Foundation

From the First Tooth

The Forsyth Institute

*Harvard University School of
Dental Medicine*

Health Care For All

Health Law Advocates

*Massachusetts Dental Hygienists
Association*

Massachusetts Dental Society

*Massachusetts League of
Community Health Centers*

Massachusetts Society for the

Prevention of Cruelty to Children

*Partners for a Healthier
Community*

Tufts Dental Facilities

*Tufts University School of Dental
Medicine*

*University of Massachusetts
Medical School*

RE: Include Conference Committee provision in 4000-0700 to direct EOHHS to report a schedule and cost for restoring dental care for adult MassHealth members

Dear Governor Baker,

On behalf of the Oral Health Advocacy Taskforce (OHAT), thank you to you and your staffs for your hard work in developing the FY 2018 State Budget. Created in 2002 in response to state budget cuts to MassHealth adult dental services, OHAT is a broad-based statewide coalition of consumers, advocates, health care professionals, academics, and insurers. We also work closely with the nation's first Legislative Caucus on Oral Health, chaired by Representative John Scibak and Senator Harriett Chandler, to help Massachusetts continue to be a leader in oral health equity and awareness.

As you know, Massachusetts is the national leader in health care access, with more than 97% of the Commonwealth's residents covered by medical insurance. However, despite the progress we've made, quality oral health care still remains elusive for many Massachusetts residents. In fact, more than 1 million MassHealth members, including 149,000 seniors and 245,000 people with disabilities, are without access to comprehensive dental care beyond basic cleanings, fillings, extractions and full dentures.

Sadly, without access to appropriate dental care, untreated oral disease often leads to significant pain and suffering. Many people living with chronic illnesses such as diabetes or hypertension also see their conditions worsen, while others suffer from poor self-esteem, poor nutrition or the inability to seek/maintain their employment. Barriers to oral health care, such as inadequate insurance coverage, can then result in overuse of hospital emergency departments (ED) to treat non-emergent, and often preventable, oral health conditions.

In fact, the Health Policy Commission (HPC) found that in 2014, there were over 36,000 preventable oral health ED visits in Massachusetts, which cost the health care system between \$14.8 million and \$36 million. Around half of all preventable dental ED visits were paid for by MassHealth with non-elderly adults on MassHealth using the ED for preventable oral health conditions 7 times more frequently than commercially-insured adults.

The HPC report also went on to highlight the fact that hospital emergency departments are ill-equipped to provide comprehensive dental care and that most patients only receive antibiotics and pain medication, thereby leaving the underlying dental condition untreated. This is particularly concerning at a time when we are grappling with the ongoing opioid crisis that is impacting all corners of the Commonwealth.

Nevertheless, despite research supporting the importance of good oral health to overall health, dental benefits for adults on MassHealth have suffered numerous cuts over the past decade. We are grateful that several services have been incrementally restored in recent years, however, a number of crucial services still remain uncovered including periodontal services for gum disease, endodontic services (root canals) and crowns. Full adult dental benefits were last covered in 2010.

Therefore, as you review the Conference Committee Report for FY2018, we urge you to prioritize the oral and overall health of residents of the Commonwealth by supporting the no-cost MassHealth budget provision that directs EOHHS to report the following:

Line item 4000-0700

“(5) a schedule to include within its covered services for adults at least those federally optional services for dental care and dentures which were included in its state plan in effect on January 1, 2010 and the accompanying cost of implementation;”

Thank you for your time and consideration. On behalf of OHAT, we look forward to continuing to work with your Administration to ensure that all residents of Massachusetts, particularly our most vulnerable populations, have access to the oral health services needed to keep them healthy. If you have questions or would like more information, please contact me at 617-275-2801 or nsingh@hcfama.org.

Sincerely,



Neetu Singh, DMD, MPH
Manager, Oral Health Integration Project
Health Care For All
On behalf of the Oral Health Advocacy Taskforce



Cc: Secretary Kristen Lepore, Executive Office of Administration and Finance
Secretary Marylou Sudders, Executive Office of Health and Human Services