

**Department of Legislative Services**  
Maryland General Assembly  
2016 Session

**FISCAL AND POLICY NOTE**  
**First Reader**

Senate Bill 550  
Finance

(Senator Pugh, *et al.*)

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**Task Force to Study Access to Dental Care in the State**

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This bill establishes the Task Force to Study Access to Dental Care in the State. The Department of Health and Mental Hygiene (DHMH) must staff the task force. The bill specifies task force membership and duties and requires the task force to report its findings and recommendations to the Governor and the General Assembly by December 30, 2016.

The bill takes effect June 1, 2016, and terminates June 30, 2017.

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**Fiscal Summary**

**State Effect:** DHMH can likely staff the task force and handle the bill's requirements with existing resources, as discussed below. Revenues are not affected.

**Local Effect:** None.

**Small Business Effect:** None.

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**Analysis**

**Bill Summary:** The task force consists of the Secretary of Health and Mental Hygiene (or designee) and two members each from the Maryland Senate and House of Delegates. Additionally, the Governor must appoint three dental care providers from organizations that serve low-income populations and one member each from the State Board of Dental Examiners, the Maryland State Dental Association, the Maryland Dental Hygienists' Association, and the University of Maryland School of Dentistry. Task force members may not receive compensation but are entitled to reimbursement for expenses under the standard State travel regulations, as provided in the State budget.

The task force must study (1) how to increase preventive dental care utilization and decrease unmet dental care need for both Medicaid-eligible and Medicaid-ineligible children and adults; (2) dental care costs, including the effect of the Medicaid dental fee increase paid to providers and the increase in the Medicaid dental provider network in 2009; (3) how to address barriers to dental care, including financial issues and workforce shortages; and (4) the effects of the federal Patient Protection and Affordable Care Act on dental benefits coverage and cost barriers to dental care. The task force must make recommendations on how to increase access to dental care among children and adults in the State.

**Current Law/Background:** The Oral Health Safety Net Program, as established under the Health-General Article, provides start-up funding to expand oral health capacity for underserved low-income and disabled individuals, including individuals enrolled in Medicaid and the Maryland Children's Health Program. DHMH's Office of Oral Health has to conduct an annual evaluation of the program and report specified information to the Governor and the General Assembly by November 1 of each year.

The 2015 annual report for the Oral Health Safety Net Program, submitted jointly by the Office of Oral Health and Medicaid, addressed several issues relating to dental care access, specifically (1) Medicaid availability and accessibility of dentists; (2) Medicaid dental administrative services organization utilization outcomes and allocation and use of related dental funds; (3) the results of the Oral Health Safety Net Program; (4) the findings and recommendations of the Oral Cancer Initiative; and (5) other related oral health issues.

Additionally, in April 2015, the respective chairmen of the Senate Finance and House Health and Government Operations committees requested that the Maryland Dental Action Coalition (MDAC) conduct a study on expanding access to oral health care and coverage for adults, including extending Medicaid coverage for specific adult populations and establishing or expanding public health initiatives that support oral health care services for adults presently without dental coverage. MDAC contracted with the Hilltop Institute to conduct the study and presented a summary of its findings to the House Health and Government Operations Committee in February 2016. MDAC is in the process of finalizing its report.

**State Expenditures:** The Office of Oral Health advises that the office's role under the bill would be limited to providing consultation to Medicaid, which would be responsible for staffing the task force; the office advises that it must hire a part-time (25%) public health dentist administrator and a part-time (25%) health policy analyst to provide this consultation.

However, Medicaid advises that the bill's requirements are duplicative of existing reporting requirements, specifically the annual legislative report on the Oral Health Safety Net Program and that, to the extent staff resources are necessary to fulfill the bill's requirements, resources will need to be redirected from existing initiatives. Medicaid additionally notes that the bill's requirements may also be duplicative in light of the recent MDAC study.

The Department of Legislative Services (DLS) agrees that the bill may be duplicative of existing DHMH reporting requirements. Given that DHMH is already required to submit a similar report as is required under the bill, DHMH can likely meet the bill's requirements with existing resources. However, DLS also agrees that staff may need to be temporarily redirected to provide support for the task force and to submit the required report by December 30, 2016.

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### **Additional Information**

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** Department of Health and Mental Hygiene, Maryland Dental Action Coalition, Department of Legislative Services

**Fiscal Note History:** First Reader - February 24, 2016  
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