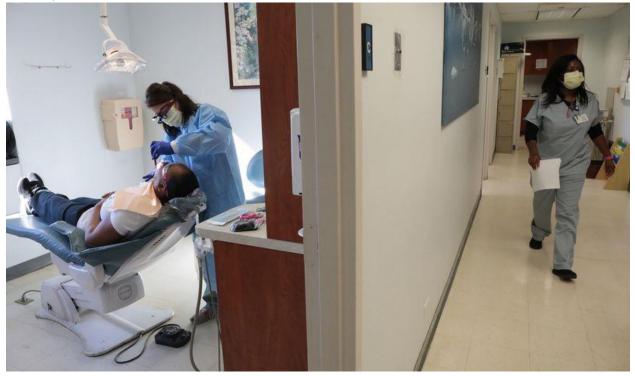
Expand Medicaid to cover adult dental care in Maryland

COMMENTARY By BALTIMORE SUN EDITORIAL BOARDALTIMORE SUN |



FEB 01, 2022 AT 5:45 AM

Dr. Mary Joyce Gomez works on patient Arshella Henderson on Oct. 16, 2018, at St. Bernard Hospital's dental clinic in Chicago, Illinois which serves a Medicaid and special needs population. (Antonio Perez/Chicago Tribune). (Antonio Perez/Chicago Tribune)

One by one, medical providers, social workers, dentists and health care advocates gave their brief but sobering accounts to the Senate Finance Committee during a <u>virtual hearing last week</u> with one common theme: They all knew of adults living in Maryland who suffered serious, often debilitating oral health problems and could not get the care they desperately needed. The reason? They lacked the ability to pay. And in Maryland, unlike 47 other states, Medicaid — the taxpayer-subsidized public health program that is supposed to help low-income individuals afford health care — simply did not cover their needs. As a result, they suffered or turned to illegal narcotics or ended up with problems so serious they had to be admitted to hospital emergency rooms, or, in extreme cases, they died from infections that might otherwise have been routinely treated.

No one testified against the measure to alleviate this circumstance. How could they? Only the states of Alabama and Tennessee do not offer full Medicaid adult dental coverage. But there remains one significant barrier: It comes with a big price tag. According to an analysis prepared by the Department of Legislative Services, adding that coverage would cost tens of millions of dollars per year. And while the federal government would cover the majority (60%), the state would eventually be left with a bill for \$66.5 million annually and that's on top of the state's **\$12.6 billion Medicaid and Children's Health Insurance Program (CHIP)**.

Yet there is good news on that front. First, Maryland has a budget surplus right now. As Gov. Larry Hogan and others have noted, the state currently has an extra \$4.6 billion on hand, which makes this relatively modest expansion of Medicaid easily affordable, at least this year. If helping people living within 133% of the poverty line get needed dental care, as <u>Senate Bill 150/House</u> <u>Bill 6</u> proposes to do, uses up 1% or 2% of that sum, it would appear to be money well spent. But there's also another compelling reason: While taxpayers may have to pay more to dentists to provide this coverage, they may very well save a substantial sum by not having to underwrite other forms of health care that result from dental neglect, from those ER visits to substance abuse programs.

That's no mere theoretical savings. Studies show people who get regular dental care are simply healthier. They are less prone to diabetes, cardiovascular disease, mental health disorders and cancer. And there's also a clear equity component to this. People of color are more apt to find dental care unaffordable and thus more likely to suffer these related illnesses. A pilot program run by the Maryland Department of Health since June of 2019 has been helpful in getting dental care for some low-income adults age 21 to 64 but does not cover more costly procedures like dentures or root canals that are viewed as less essential.

Those testifying for the measure last week included U.S. Sen. Ben Cardin who has sponsored legislation in Congress to require states to provide adult dental care through Medicaid. As he noted, the Medicaid expansion is overdue. In 2007, a lot of Marylanders were aghast to learn of the death of 12-year-old **Deamonte Driver** who suffered an infection from an abscessed tooth that spread to his brain. His death brought national attention to the issue and, in Maryland, caused an overhaul of Medicaid dental coverage to make sure children would not be similarly neglected in the future. Adults, however, were not given the same priority.

Now is the time to correct that oversight. Nearly 800,000 Maryland adults are not currently covered by dental insurance. The bill sponsored by state Sens. Malcolm Augustine, a Prince George's Democrat, and Guy Guzzone, a Howard County Democrat who also chairs the Senate Budget and Taxation Committee, would go a long way to providing access to care for many. The House version is sponsored by Del. Bonnie Cullison, a Montgomery County Democrat.

In Annapolis, state leaders have been talking for weeks about how best to use the surplus from tax cuts for retirees to infrastructure projects and an expanded "Rainy Day" fund to guard against a potential economic downturn in the future whether from COVID-19 or some other cause. But given Maryland continues to report one of the highest median household incomes in the nation, expanding dental care to the poor seems as good a use of these funds as any. It's an investment in what is ultimately the state's most precious resource, its people.

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