

From: fhartman@rioralsurgery.com
To: [SLegislation](#)
Subject: Support for S2887
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**Honorable Senator Murray and
Members of the Senate Health and Human Services Committee**

Re: Support for S2887

Dear Senator Murray,

For years, dentists in Rhode Island have practiced under an insurance environment that limits patient choice, suppresses reimbursement, and undermines the long-term stability of our dental workforce. S2887 represents a meaningful and overdue correction—one that restores fairness for patients, autonomy for providers, and competitiveness within our state's dental marketplace.

In 2004, the General Assembly acted wisely by granting patients the right to assign their dental benefits directly to the dentist of their choosing. The intent was clear: empower Rhode Islanders to seek care where they feel most comfortable and ensure that insurance companies could not coerce patients into narrow networks.

Yet one dominant insurer circumvented that intent by creating discriminatory fee-allowance tables that penalized patients who sought care outside the insurer's preferred network. When dentists exercised their right to leave the network, the insurer shifted its leverage onto patients—reducing or eliminating benefits to steer them back. This practice has harmed patient autonomy and distorted the market for years.

S2887 restores the original purpose of the 2004 statute by requiring insurers to pay all dentists equally for the same covered services, regardless of network status. Patients regain the freedom to choose their provider without financial penalty, and dentists regain the ability to practice without coercive reimbursement structures.

But the importance of this bill extends beyond fairness—it is essential to Rhode Island's ability to **maintain a stable dental workforce**.

Today's dental graduates carry **over \$300,000 in average student loan debt**, yet Rhode Island's reimbursement rates continue to lag behind neighboring states. With a single insurer setting the effective market rate, new dentists have little incentive to practice here, and existing dentists struggle to remain independent. Without meaningful insurance reform, Rhode Island will continue to lose providers to states with more competitive and transparent insurance environments.

This dynamic has already contributed to a troubling trend: the rapid consolidation of dentistry into large, private-equity-backed corporate groups. Independent practices—long the backbone of community-based dental care—cannot compete when reimbursement is artificially suppressed. We have seen the consequences of this consolidation in medicine: reduced access, diminished

continuity of care, and decisions driven more by financial metrics than by patient well-being. Dentistry is now on the same trajectory.

S2887 is a practical, targeted step that strengthens Rhode Island's dental workforce, protects patient choice, and ensures that independent practices can continue to serve their communities. By increasing competition and reducing insurer-driven distortions, this bill makes Rhode Island a more attractive place for young dentists to build careers and for established dentists to stay.

I respectfully urge the Committee to support S2887 and restore control to where it belongs—with patients and the providers who care for them.

Sincerely,

Frederick A. Hartman, DMD
Diplomate, American Board of Oral and Maxillofacial Surgery
Past President, Rhode Island Dental Association
Clinical Assistant Professor of Surgery, Brown University Warren Alpert School of Medicine

Cumberland 401-769-1200
East Providence 401-434-4646