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November 29, 2021

The Honorable Rosa DeLauro Chair Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies U.S. House of Representatives Washington, DC 20515

The Honorable Patty Murray Chair Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies U.S. Senate Washington, DC 20510 The Honorable Tom Cole Ranking Member Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies U.S. House of Representatives Washington, DC 20515

The Honorable Roy Blunt Ranking Member Appropriations Subcommittee on Labor, Health and Human Services, Education and Related Agencies U.S. Senate Washington, DC 20510

Dear Chairs DeLauro and Murray, and Ranking Members Cole and Blunt:

On behalf of the Academy of General Dentistry (AGD) and its 40,000 members, I write to respectfully urge you to continue investing in our nation's health by funding critical dental workforce and oral health-related programs.

We appreciate that the House and Senate FY2022 Labor-HHS proposals included provisions on HRSA's Oral Health Training Programs. We would like to request that the following recommendations be considered as you move forward in resolving differences between the House and Senate FY2022 appropriations proposals.

<u>**Oral Health Literacy**</u> – The AGD asks the Subcommittees to include report language providing funding from Program Management for the continued development of an oral health awareness and education campaign across relevant HRSA divisions. The FY2021 appropriations for HRSA provided \$300,000 from Program Management for HRSA to continue the development of an oral health literacy campaign.

The House FY2022 Labor-HHS appropriations bill report (<u>H. Rept. 117-96</u>) includes \$500,000 from Program Management to continue this program. The Senate FY2022 Labor-HHS appropriations proposed explanatory statement does not have explicit language on HRSA's Oral Health Literacy activities under Program Management. However, it would increase the overall Program Management funding recommendation by nearly \$10 million, for initiatives outside of Congressionally Direct Spending, over the FY2021 level. Specific report language on Oral Health Literacy is essential to guarantee that HSRA's oral health literacy efforts continue.

The importance of oral disease prevention in the form of oral health literacy is often overlooked, much to the detriment of our nation's oral health needs. The vast majority of oral health ailments can be avoided by increasing oral health literacy and awareness.

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This is especially important within the vulnerable populations HRSA seeks to serve through this program that Congress has directed it to develop.

HRSA Oral Health Training Programs – AGD appreciates that the House and Senate proposals include funding for the HRSA Title VII Primary Care Dental Training Cluster and related oral health programs. We would ask that the Subcommittees provide equitable allocations for General and Pediatric Dentistry programs, as is provided for the Senate FY2022 Labor-HHS appropriations proposed explanatory statement. However, we would support the \$2 million increase in topline program funding for Oral Health Training included in the House FY2022 Labor-HHS appropriations bill report (H. Rept. 117-96).

AGD supports the Committee recommendation included in the House FY2022 Labor-HHS appropriations bill report (H. Rept. 117-96), which directs HRSA to initiate a new pre-doctoral grant cycle and provide continuation of funding for section 748 post-doctoral training grants initially awarded in FY2020. General Dentistry Residency programs or Advanced Education in General Dentistry programs are intensive postgraduate training programs designed to train the general dentist in managing medically complex and special needs patients in both outpatient and hospital settings while increasing knowledge in the practice of dentistry and its various disciplines. Approximately 50% of dentists that enroll in advanced dental education programs choose to pursue a program within General Dentistry<sup>1</sup>.

We also support the recommendation directing HRSA to provide continuation of funding for dental faculty loan repayment program (DFLRP) grants initially awarded in FY2018 and 2021, and to initiate a new DFLRP grant cycle for dentistry faculty supervising dental students or residents and providing clinical services in dental clinics located in dental schools, hospitals, and community-based affiliated sites. AGD hopes that if this recommendation is included in the final FY2022 appropriations measure, an equitable preference for General and Pediatric Dentistry faculty will be provided in a new DFLRP grant cycle.

A critical factor in recruiting and retaining dental school faculty is helping them reduce their student loan debt. The average educational debt for all indebted dental school graduates in the Class of 2020 was \$304,824, according to a survey by the American Dental Education Association (ADEA)<sup>2</sup>. Academic positions typically pay only one-third of what graduates can earn upon entering private practice. Additionally, ADEA reported that there were approximately 364 dental faculty vacancies in the 2018-19 academic year, with the General Dentistry having the largest share of faculty vacancies among the various disciplines<sup>3</sup>.

<u>HRSA Chief Dental Officer</u> – The AGD continues to support the importance of the position of Chief Dental Officer (CDO) at HRSA to ensure HRSA's oral health programs operate with maximum impact and efficiency under the leadership of a CDO with

<sup>&</sup>lt;sup>1</sup>American Dental Association, Health Policy Institute, 2020-21 Survey of Advanced Dental Education.., Table 3 (<u>https://www.ada.org/resources/research/health-policy-institute/dental-education</u>)

<sup>&</sup>lt;sup>2</sup> American Dental Education Association, Analysis of 2020 ADEA Survey of U.S. Dental School Seniors., Table 16, March 2021 (<u>https://www.adea.org/data/seniors/</u>)

<sup>&</sup>lt;sup>3</sup> American Dental Education Association, Survey of Dental School Faculty, 2012-13 through 2018-19, (<u>https://www.adea.org/data/Faculty/2018-2019-Survey/</u>)

executive-level authority and resources to oversee and lead HRSA oral health programs and initiatives. We were pleased to see that the proposed House FY2022 Labor-HHS appropriations bill report (H. Rept. 117-96) includes language directing HRSA to restore the authority and resources of the CDO, as well as a request for an update as part of HRSA's FY2023 Congressional Budget Justification.

However, we understand that the CDO position at HRSA is now vacant. We recommend that the Subcommittees revise the final report language to reflect this vacancy and include language directing HRSA to fill this vacancy as soon as possible.

<u>Medicaid Dental Audits</u> – AGD appreciates that the House FY2022 Labor-HHS appropriations bill report (H. Rept. 117-96) includes language expressing concerns regarding the issues surrounding poorly overseen and inaccurate Medicaid dental provider audits. AGD strongly believes that spurious, profit-motivated audits are being conducted due to State Medicaid agencies' failure to provide and manage consistent auditing process guidelines. The lack of a peer-to-peer auditing model in many states also hinders the efficacy of the Recovery Audit Contractor (RAC) program, as independent contractors are not necessarily specialists with an understanding of dentistry.

The fear of facing an onerous and potentially unfounded audit is impacting dental providers' decisions to participate in Medicaid, and consequently, is negatively impacting patients' ability to access vital care. We strongly urge you to consider retaining and expounding upon the report language to ensure CMS is properly conducting oversight of Medicaid Dental Audits.

AGD thanks the Subcommittees for their consideration and encourages you to contact Daniel J. Buksa, J.D., Associate Executive Director, Public Affairs, by phone at (312) 440-4328 or via email at <u>Daniel.buksa@agd.org</u> should you have any questions concerning our requests or if you would like to meet to discuss these critical programs.

Thank you again for your ongoing support of and commitment to improving oral health for all Americans.

Attached is the proposed report language for your consideration.

Sincerely,

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Gerry Botko, D.M.D., MAGD President Academy of General Dentistry

Myer Brahuns

Myron (Mike) Bromberg, D.D.S. Congressional Liaison Academy of General Dentistry

## Proposed Report Language:

### • HRSA – Program Management

*Oral Health Literacy.* The Committee includes \$500,000 to continue the development of an oral health awareness and education campaign across relevant HRSA divisions, including the Health Centers Program, Oral Health Workforce, Maternal and Child Health, Ryan White HIV/AIDS Program, and Rural Health. The Committee directs HRSA to identify oral health literacy strategies that are evidence-based and focused on oral health care prevention and education, including prevention of oral disease such as early childhood and other caries, periodontal disease, and oral cancer. The Committee urges HRSA to ensure that the Chief Dental Officer plays a key role in the design, monitoring, oversight, and implementation of this project.

Chief Dental Officer. The Committee is disturbed to learn that despite its directive in House Report (116-450) to have HRSA ensure that the Chief Dental Officer (CDO) is functioning at an executive level authority with resources and staff to oversee and lead all oral health programs and initiatives across HRSA, no such authority has been delegated. The Committee directs HRSA to restore the authority of HRSA CDO with executive level authority and resources to oversee and lead HRSA dental programs and initiatives as well as have a role within oral health across the agency. The CDO is also expected to serve as the agency representative on oral health issues to international, national, State, and/or local government agencies, universities, and oral health stakeholder organizations. The Committee is concerned that the CDO position at HRSA has been vacant since October 2021. Without a dentist to oversee oral health issues across the agency, this vacancy leaves a significant clinical oral health expertise gap within HRSA. A licensed dentist clinician is an invaluable resource to the oral health programs at HRSA and the agency's strategy to expand access to oral health care. The Committee urges HRSA to move forward with filling this vacancy. The Committee requests an update as part of the fiscal year 2023 Congressional Budget Justification on how the CDO is serving as the agency representative on oral health issues to international, national, State and/or local government agencies, universities, and oral health stakeholder organizations.

## • HRSA, Oral Health Training Programs, Title VII – Dental Workforce

*Oral Health Training.* The Committee includes \$42,673,000 for Oral Health Training, \$2,000,000 above the fiscal year 2021 enacted level and the fiscal year 2022 budget request. Within the total, the Committee includes <u>not less than \$14,000,000 for General Dentistry Programs and</u> not less than \$14,000,000 for Pediatric Dentistry Programs, an increase of \$2,000,000 above the fiscal year 2021 enacted level. The Committee directs HRSA to provide continuation funding for section 748 post-doctoral training grants initially awarded in fiscal year 2020 and dental faculty loan repayment program (DFLRP) grants initially awarded in fiscal years 2018 and 2021. The Committee directs HRSA to initiate a new pre-doctoral grant cycle, and to initiate a new DFLRP grant cycle with a preference for <u>general and</u> pediatric dentistry faculty supervising dental students or residents and providing clinical services in dental clinics located in dental schools, hospitals, and community-based affiliated sites.

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