

November 1, 2021

Anita Glicken, MSW

Chair

Advisory Committee on Training in Primary Care Medicine and Dentistry

CC: Shane Rogers, Designated Federal Official

Dear Chair Glicken:

Dental therapists are joining the dental team in practices across the U.S. and have the potential to dramatically improve access to oral health care in the U.S. across a variety of care settings. Despite the growing adoption of this [evidence-based](#) provider model, dental therapy education programs and dental therapists are not eligible for all of the federal funding opportunities under Title VII of the Public Health Service Act. We write to you today to request the Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD) consider making the recommendation of adding dental therapy to all grant programs that currently fund other dental education and training.

As you well know, dental care is out of reach for many Americans. Over [60 million Americans](#) live in areas without enough dental providers and almost one-third of adults report having [skipped dental care due to cost](#). Moreover, access to dental care in programs like Medicaid remains inconsistent. The availability and comprehensiveness of optional adult dental benefits varies widely from state to state and fewer than half of dentists [accept Medicaid](#) at all, leaving many families without access to care even if they do have coverage. Due to these barriers, oral health has become one of the most visible examples of health disparities in America. Good oral health is taken for granted by many Americans but remains out of reach for low-income families, communities of color, Tribal communities, and many rural communities. Bad teeth are not just a visible reminder of the inequities in our oral health system; they [affect](#) overall health, performance in school and earning potential.

In order to address this crisis and the growing divide, it is critical to support the expansion of the dental workforce to include dental therapists. Across the states, support for dental therapy has been bipartisan and diverse. President Biden endorsed the expansion of dental therapists in his [campaign platform](#) and the Trump Administration [promoted](#) them as well. In addition, the U.S. House of Representatives recently [eliminated](#) appropriations language prohibiting the Health Resources and Services Administration (HRSA) from using funds to support alternative dental providers like dental therapists, noting that “ending this prohibition will give states flexibility to expand the oral health workforce and improve access to dental care, particularly in rural and underserved communities.” The Senate has also included such language in its FY2022 appropriations bill, signaling strong Congressional support for dental therapy.

In fact, more and more states are authorizing dental therapists to address growing unmet need and ensure that every community has access to dental care. However, the start-up costs of creating new

dental therapy education programs is limiting the growth of the profession and leaving clinics eager to hire dental therapists empty-handed.

Dental therapists are licensed providers who play a similar role in dentistry to that of physician assistants in medicine and work under the supervision of a dentist to provide routine dental care like exams and fillings. Using telehealth to collaborate with their supervising dentist, dental therapists can bring care to people where they are, including schools, nursing homes and rural communities. And because their employment cost is, on average, one-third to one-half the amount of a dentist, hiring dental therapists is a cost-effective way for safety-net clinics to stretch their budget to treat more patients. A number of colleges are building education programs in partnership with rural communities, communities of color and Tribal communities to create an accessible pathway for people from areas with little access to oral health care to become the dental providers their communities need. For the first time, these communities are having regular access to dental care from someone who is part of their community.

Dental therapists have been working in the U.S. for over 15 years and have a proven track record of high-quality care. To be clear, dental therapy education programs are accredited by the Commission on Dental Accreditation, the same body that accredits education programs for other dental professions. Currently, dental therapists are working or authorized in at least some settings in 12 states, seven more states have had legislation introduced this year to authorize them and many more are considering legislation.

States with Dental Therapists Working/Authorized	States with Active Legislation This Year
AK, AZ, CT, ID, ME, MI, MN, NM, NV, OR, VT, WA	FL, IN, KS, MA, NJ, NY, WI

We urge you and the ACTPCMD to further examine this issue and consider making recommendations to HRSA to add dental therapists as eligible provider types to existing grant programs for dental education and training. Dental therapy has the potential to significantly change how oral health care in the U.S. is delivered, creating new pathways for diverse and underserved communities to become the dental providers their communities need. Making dental therapists and dental therapy programs eligible for Title VII programs would not merely accelerate the implementation of dental therapy, but more importantly, make important strides in oral health equity and increase access to care for communities that face the highest barriers to oral health.

Sincerely,

American Association for Community Dental Programs
American Dental Hygienists' Association
American Institute of Dental Public Health
Asian & Pacific Islander American Health Forum
CareQuest Institute for Oral Health
Community Catalyst

National Coalition of Dentists for Health Equity
National Network of Healthcare Hygienists
National Rural Health Association

Arizona Dental Hygienists' Association
Arizona Oral Health Coalition
The Bingham Program (ME)
Central Florida Health Care
Children's Action Alliance (AZ)
Children's Health Alliance of Wisconsin
Clintonville-Beechwold Community Resources Center
The Connecticut Oral Health Initiative, Inc.
Consumers for Affordable Health Care (ME)
Florida Dental Hygienists' Association, Inc.
Florida Institute for Health Innovation
Florida Legal Services, Inc.
Florida Rural Health Association
Floridians for Dental Access
Fones School of Dental Hygiene University of Bridgeport
Greater Tampa Bay Oral Health Coalition
Health Action New Mexico
Healthier Colorado
Jacksonville Urban League
Kentucky Voices for Health
Klamath Basin Oral Health Coalition
Miami Dade College
Michigan Council for Maternal and Child Health
Minnesota Dental Therapy Association
Native American Youth and Family Center
New Jersey Dental Hygienists' Association
New Mexico Community Dental
New Mexico Oral Health Coalition
The North Dakota Nurses Association
Northwest Health Law Advocates
Oregon Primary Care Association
Oregon School-Based Health Alliance
Southern Vermont Area Health Education Center
Southside Community Health Services, Inc. (MN)
Statewide Poverty Action Network (WA)
Universal Health Care Action Network of Ohio
Vermont Technical College
Voices for Vermont's Children
Washington Dental Hygienists' Association
West Central Initiative (MN)
West Virginians for Affordable Health Care
Wisconsin Dental Hygienists' Association