



December 3, 2020

The Honorable Nita Lowey
Chairwoman
House Appropriations Committee
Washington, DC 20515

The Honorable Kay Granger
Ranking Member
House Appropriations Committee
Washington, DC 20515

The Honorable Richard Shelby
Chairman
Senate Appropriations Committee
Washington, DC 20510

The Honorable Patrick Leahy
Vice Chair
Senate Appropriations Committee
Washington, DC 20510

Dear Chairwoman Lowey, Chairman Shelby, Vice Chair Leahy and Ranking Member Granger:

As you work to finalize the FY 2021 Labor, Health and Human Services, and Education, and Related Agencies Appropriations bill, the American Dental Association, the American Academy of Pediatric Dentistry, the American Dental Education Association, and the American Association for Dental Research respectfully request that you fund oral health programs at the highest amount possible and oppose any efforts to reduce or eliminate funding for vital programs. We thank you for your commitment to oral health over the years, and we urge Congress to continue its support of programs critical to the nation's oral health.

Greater investments in access to quality dental care, dental training, oral health education, disease prevention, and dental research lead to improved oral health outcomes. The modest programmatic increases we are requesting, together with the continuation of programs, will help reach the goal of ensuring optimal oral health for all Americans.

The Centers for Disease Control and Prevention (CDC) Division of Oral Health is a much needed (and highly valued) source of support for state health departments to help reduce oral health disparities through evidence-based community preventive interventions and access to clinical preventive services. The CDC's investments in state health agencies, community water fluoridation, school-based dental sealant programs, and oral health literacy have helped to significantly reduce the incidence of oral disease among children and adults. In order to expand the Division's capacity and outreach, more funding is needed to support additional states with the infrastructure to develop and implement policies and programs to prevent or minimize oral disease. Currently 20 states, including Alabama and New Mexico, which have some of the highest poverty rates, have never received funding from the Division of Oral Health. Additional funding would provide these states with the capacity and infrastructure needed to translate health promotion and disease prevention approaches into effective policies and health care practices. Additionally, the Division's outstanding

contributions in the CDC response to COVID-19 have guided the dental community through the uncertainty of the nation's public health emergency.

Title VII general and pediatric dental residency programs within the Health Resources and Services Administration (HRSA) provide primary oral health care services in some of the nation's most remote and underserved locations. HRSA's Title VII dental residency programs are the only federal programs focused on improving the supply, distribution, and diversity of the dental workforce. In Academic Year 2018-2019, grantees of the Training in General, Pediatric, and Public Health Dentistry and Dental Hygiene Program trained 10,356 dental and dental hygiene students in pre-doctoral training degree programs; 494 dental residents and fellows in advanced primary care dental residency and fellowship training programs; and 261 dental faculty members in faculty development activities and programs.¹ By providing advanced training opportunities to oral health professionals, the program plays a critical role in preparing the dental workforce to meet the nation's changing health care needs. Also, we support both House and Senate report language directing HRSA to provide continuation funding for post-doctoral training and dental faculty loan repayment [DFLRP] grants, and to initiate a new DFLRP grant cycle with a preference for 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.

We are concerned about the Senate's proposed elimination of funding for HRSA's Health Careers Opportunity Program (HCOP). The HCOP pipeline program is instrumental to the development of a culturally competent workforce equipped to meet the needs of a growing diverse population. This critical program provides economically disadvantaged youth with the necessary skills to successfully compete for, enter, and graduate from schools of health professions or allied health professions. We extend our support for the House proposal of \$15 million for the HCOP program.

As an independent agency within the National Institutes of Health (NIH), the National Institute of Dental and Craniofacial Research (NIDCR) is the largest institution in the world dedicated exclusively to research to improve dental, oral and craniofacial health. Investments in NIDCR-funded research during the past half-century have led to improvements in oral health for millions of Americans and continue to show promise in areas encompassing pain biology and management, regenerative medicine, and in assessing the efficacy of a human papilloma virus (HPV) vaccine for oral and pharyngeal cancers. The scientific research workforce continues to face a myriad of challenges due to the current public health crisis. While research institutions are understandably concentrating on coronavirus-related research, most other research has been scaled back or stopped entirely due to pandemic-induced closures of university campuses and laboratories. Increased funding is critical to sustaining the nation's research workforce and capabilities; therefore, we ask you to maintain at least the Senate level of \$493.234 million for NIDCR. We also urge you to include supplemental funding to ensure NIH has the resources it needs to continue funding critical research projects, including but not limited to, its COVID-19-related research.

For your consideration, below is a table delineating the House and Senate Appropriations Committee marks with comparisons to the FY 2020 enacted funding level. We understand the difficult task you face as you finalize the FY 2020 Labor-HHS-Education-Appropriations bill in the current environment of tight budget constraints, and we greatly appreciate your consideration of our requests.

We look forward to meeting with your staff to discuss these important programs. In the meantime, if you have any questions, please contact Jennifer Fisher with ADA at fisherj@ada.org; Scott Litch with

¹ Department of Health and Human Services, *FY 2021 Justification of Estimates for Appropriations Committees*. <https://www.hrsa.gov/sites/default/files/hrsa/about/budget/budget-justification-fy2021.pdf>

AAPD at slitch@aapd.org; Timothy Leeth with ADEA at leeth@adea.org; or Lindsey Horan with AADR at lhoran@aadr.org.

Sincerely,

American Dental Association
 American Academy of Pediatric Dentistry
 American Dental Education Association
 American Association for Dental Research

**FY 2021 Funding Requests for Federal Oral Health Programs
 Supported by the American Dental Association, American Academy of Pediatric
 Dentistry, American Dental Education Association and the American Association for
 Dental Research**

Program	FY 2020 Enacted Funding	FY 2021 House	FY 2021 Senate
CDC – Division of Oral Health	\$19,500,000	\$19,500,000	\$19,500,000
HRSA Title VII General and Pediatric Dental Residencies	\$12,000,000	\$12,000,000	\$12,000,000
Dental Faculty Loan Repayment		See report language	See report language
TOTAL	\$40,673,000	\$40,673,000	\$40,673,000
HRSA – Maternal Child Health – Special Projects of Regional and National Significance	\$5,250,000	\$5,250,000	N/A
HRSA – Area Health Education Centers	\$41,250,000	\$43,249,000	\$45,250,000
HRSA – Health Careers Opportunity Program	\$15,000,000	\$15,000,000	\$0
HRSA - Ryan White Dental (Part F)	\$13,122,000	\$13,122,000	\$13,122,000
NIH – National Institute of Dental and Craniofacial Research	\$477,429,000	\$481,535,000	\$493,234,000