

September 1, 2021

The Honorable Nancy Pelosi  
Speaker  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Chuck Schumer  
Majority Leader  
U.S. Senate  
Washington, DC 20510

The Honorable Kevin McCarthy  
Minority Leader  
U.S. House of Representatives  
Washington, DC 20515

The Honorable Mitch McConnell  
Minority Leader  
U.S. Senate  
Washington, DC 20510

Dear Speaker Pelosi, Leader Schumer, Leader McCarthy and Leader McConnell:

On behalf of our collective organizations, we are writing to let you to know that we are all committed to addressing the oral health needs of all Americans – including older Americans. As Congress is discussing expanding Medicare to include dental benefits, we want to help you to provide the best oral health care to seniors while ensuring a robust provider network is in place.

The current Medicare program includes distinct “parts” that recognize the variability in delivery of health care services such as hospital care, physician services and prescription drugs. The dental care system is significantly different from the medical care delivery system. Based upon current legislative proposals, an expansion of benefits within the current Part B structure of Medicare would not adequately meet the needs of our dentists and Medicare patients. Dentists are unlikely to join a network based on the current Medicare Part B structure for a number of reasons, including:

- Low reimbursement rates that fail to address overhead costs associated with delivering dental care will strongly influence dentists’ ability to participate;
- Undue burden on dentists by requiring compliance with regulations designed for the medical delivery system, such as those for Electronic Health Records, quality ratings, auditing/compliance, documentation, and more, further dissuading dentist participation.

The overall administrative burden of participating in Part B of Medicare will likely impact access to care for Medicare beneficiaries. Given that dental offices are vastly different than physician offices, applying the physician fee schedule system to fee schedules for dental care will not assure sustainability of the dental delivery system. This is a system that has high costs of maintaining and running an office, including dental equipment, supplies, lab costs, staffing needs, anesthesia, and personal protective equipment (PPE).

We look forward to continuing this important conversation with you and your staff as Congress considers how best to provide oral health care to our Nation’s seniors. Should you have any questions, please contact Mr. Mike Graham with the American Dental Association at [grahamm@ada.org](mailto:grahamm@ada.org).

Sincerely,

American Dental Association  
Academy of General Dentistry  
American Academy of Oral and Maxillofacial Pathology  
American Academy of Oral and Maxillofacial Radiology  
American Academy of Periodontology

American Association for Women Dentists  
American Association of Endodontists  
American Association of Oral and Maxillofacial Surgeons  
American Dental Education Association  
American Student Dental Association  
Society of American Indian Dentists

cc: U.S. House Committees on Energy and Commerce; Ways and Means; Budget  
U.S. Senate Committees on Health, Education, Labor, and Pensions; Finance; Budget