February 21, 2014

TO: B. Kaye Hayes, MPA, Executive Director, Presidential Advisory Council on HIV/AIDS

FROM: Richard W. Valachovic, D.M.D., M.P.H, ADEA President and CEO
Yvonne Knight, J.D., ADEA Senior Vice President for Advocacy and Governmental Relations

RE: Ryan White Dental Reimbursement Program and Community-Based Dental Partnership Program

The American Dental Education Association (ADEA) appreciates the opportunity to provide comment at the 53rd Presidential Advisory Council Meeting on HIV/AIDS (the PACHA). ADEA is the voice of dental education. Its members include all 66 U.S. dental schools and many allied and advanced dental education programs, faculty and students. The mission of ADEA is to lead individuals and institutions of the dental education community to address contemporary issues influencing education, research and the delivery of oral health care for the health of the public. ADEA's activities encompass a wide range of research, advocacy, faculty development, meetings and communications like the esteemed Journal of Dental Education, as well as the dental school admissions services.

The charge of the 53rd PACHA meeting is keyed to evaluation of the Ryan White HIV/AIDS Program and efforts to formally reauthorize the Program’s five parts as full implementation of the Affordable Care Act (ACA) begins. While the ACA will provide numerous benefits to people living with HIV/AIDS (PLWHA) in the U.S.—including consumer protections and private insurance reforms, establishment of federally administered or state-run healthcare market places in all states, prevention enhancements, new benefit standards, expanded Medicaid, and health system improvements—unfortunately it remains that oral health coverage is not included as an adult benefit.

In turn, the Ryan White Part F Dental Programs remain a critical health benefit, and lifeline to adequate oral health services, for thousands of adult PLWHA. Two programs in particular—the Dental Reimbursement Program (DRP) and the Community-Based Dental Partnership Program (CBDPP)—specifically focus on funding oral health care for PLWHA.
Funding for dental services, as well as education and training for oral health care providers, is a key programmatic element to Part F Dental Programs. Eligible Part F applicants for both the DRP and CBDPP include institutions that have dental or dental hygiene education programs accredited by the Commission on Dental Accreditation (CODA). Such institutions include our dental schools, which serve as safety-net providers, hospitals with postdoctoral dental residency programs, and community colleges with dental hygiene programs.

In Fiscal Year 2011, HRSA reported that the Part F DRP trained over 11,700 dental students, postdoctoral dental residents, and dental hygiene students, while providing over 37,100 PLWHA with oral health services. The importance and magnitude of these oral benefits for PLWHA cannot be overstated: they both improve overall physical health, while mitigating the risk for opportunistic infections to manifest orally in PLWHA. Nonetheless, during Fiscal Year 2013, HRSA reported that Part F DRP awards covered less than 23% of non-reimbursed costs in providing oral health care at participating academic dental institutions.

Furthermore, Part F CBDPP supports the education and training of the next generations of oral health providers to enable them to manage the oral health needs of PLWHA. In Fiscal Year 2011, CBDPP recipient institutions trained nearly 3,000 dental students, postdoctoral dental residents, and dental hygiene students in HIV oral health care, while providing services to over 5,800 PLWHA. CBDPP remains a critical program for community-based dentists and dental clinics to collaborate with dental and dental hygiene education programs to offer essential oral health services.

ADEA respectfully requests the PACHA to urge the President and the Congress to include robust funding for Part F programs in their forthcoming budgets to ensure both the DRP and CBDPP are operable and sustainable. Specifically, ADEA requests that Ryan White Part F Dental Programs be funded at no less than $18 million in Fiscal Year 2015. While this funding amount will still not fully cover the non-reimbursed costs in providing oral health care at participating dental schools and affiliates, it will begin to assuage the financial burden of participating institutions and encourage non-participating institutions to become involved in the provision of Part F oral health services to PLWHA.

If you should require additional information regarding the above, please do not hesitate to let us know. Contact Yvonne Knight, J.D., ADEA Senior Vice President for Advocacy and Governmental Relations, ADEA Policy Center at KnightY@dea.org or at (202) 289-7201.