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Testimony of:

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At a Joint Budget Hearing of

The New York State Assembly/Senate Committees on Health

&

The New York State Senate Committee on Finance &

The New York State Assembly Committee on Ways and Means

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Good afternoon, Chairs Weinstein, Krueger, Paulin and Rivera and other distinguished members of the New York State Legislature. Thank you for this opportunity to testify on the Executive budget proposal for state fiscal year 2024.

My name is Jennifer Tassler, Vice President for Government Relations and Strategic Affairs for the New York State Academic Dental Centers (NYSADC). NYSADC is the consortium of the six dental schools in New York State. NYSADC works in partnership with its members to advance dental education and address disparities in oral health care.

### **Background**

An estimated 7.3 million people in the United States (U.S.) have an intellectual or other developmental disability (I/DD). Developmental disabilities cause functional limitations in three or more areas of life such as self-care, receptive and expressive language, learning, mobility, capacity for independent living, and economic self-sufficiency. Intellectual disabilities are characterized by significant limitations in cognitive functioning and adaptive behavior and with onset during the developmental period from birth to age 18. Individuals with I/DD bear a disproportionately high burden of oral disease and remain at higher risk of oral diseases throughout their lives. The most common dental conditions include untreated carries, periodontitis, significant oral pain, gingivitis, and injured or missing teeth, but some I/DD conditions, such as cerebral palsy, down syndrome, and Sjogren's syndrome can further exacerbate and accelerate dental problems. Unfortunately, systemic barriers to access have contributed to chronically poorer oral and overall health for people with I/DD. Nationwide, individuals with I/DDs receive dental evaluations 17 percent less frequently than the general population. Those who do receive dental evaluations are still significantly less likely to receive treatments required to address patient concerns; such treatments can range from basic cleanings to reconstructive surgeries.

### **Systemic Challenges**

There is a persistent shortage of dental providers in the U.S. who treat patients with moderate to severe I/DD, with only 10 percent of general practice dentists reporting that they regularly treat individuals with



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cerebral palsy, intellectual disability or other medically compromising conditions. The historical lack of exposure to, and specialized training for, patients with I/DD in dental schools has created a dearth of willing providers and perpetuated a culture of uncertainty and hesitancy in treating this population. Prior to the implementation of new Council on Dental Accreditation (CODA) requirements in 2020 (more below), more than 75 percent of dental students in the U.S. reported little to no training in providing care to people with I/DD.

Significant strides have been made in the past several years in updating requirements for dental schools. As of July 2020, CODA requires that undergraduate (DDS and DMD) dental students have both didactic learning and clinical experiences with patients with special needs. Moreover, the American Dental Association revised its Code of Professional Conduct to state that "dentists shall not refuse to accept patients into their practice or deny dental service to patients because of the patient's...disability."

Despite this new CODA requirement for undergraduate dental students, access to clinical training remains a barrier for general practice dentists seeking to treat patients with I/DD. Indeed, the number of postgraduate training opportunities in New York State has contracted in the past several years. Helen Hayes Hospital in West Haverstraw, NY – which specializes in treating patients with special needs and has for decades been an important safety-net oral health provider for people with I/DD – recently suspended its General Practice Residency (GPR) program due to the significant financial challenges imposed by the COVID-19 pandemic. Graduates of this program have frequently gone on to practice in major hospital systems throughout the northeast and termination of this training opportunity creates a significant gap and threatens the pipeline of dental providers in New York State with advanced training for patients with special needs.

### **NYSADC Fellowship to Address Oral Health Disparities**

The New York State Academic Dental Centers (NYSADC) designed and piloted its Fellowship to Address Oral Health Disparities in 2021, placing two recent graduates of dental residency programs in fellowships at NYU College of Dentistry and the Touro College of Dental Medicine.



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The fellowship consists of a one-year intensive training program focused on patients with I/DD that follows completion of a General Practice Residency (GPR) or Advanced Education in General Dentistry (AEGD) program. Fellows provide direct patient care in clinical settings that specialize in serving patients with special needs for the duration of the fellowship year. Fellows are also required to devote at least one day per week during the fellowship year to teaching and/or conducting research at one of New York State’s six academic dental centers. Committing 20 percent of the fellow’s time to academic and teaching work helps mitigate another training barrier for undergraduate dental students – the relative shortage of dental faculty with direct experience providing care for patients with I/DD. By leveraging the clinical experience of the fellows, the academic dental centers can expand undergraduate students’ exposure to practitioners treating this underserved population.

Upon completion of the fellowship year, fellows commit to working at a site in New York State with a significant I/DD patient population (as determined by scoring metrics to be developed by NYSADC) and continuing teaching and/or conducting research at a dental school for one year. This service commitment can alternatively be fulfilled by providing part-time care at an approved facility and continuing teaching and/or research responsibilities over two years. Additionally, NYSADC will continue to cultivate fellows and graduates of the fellowship program as mentors to undergraduates and postgraduates interested in providing care for people with I/DD.

Finally, NYSADC will formalize and expand the fellowship curriculum and recruit a program director to oversee curricula and coordinate fellows’ teaching and research experiences statewide.

**New York State Academic Dental Centers requests \$750,000 in New York State fiscal year 2023-2024 to support six fellowships that provide advanced clinical training in the provision of oral health care for people with intellectual and developmental disabilities.**

With funding from New York State, NYSADC will support six fellows – one at each of our six academic dental centers, which are geographically distributed across the state. Fellows will be supported with one



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year of salary during the fellowship year with salaries indexed to the average second-year residency (PGY-2) salary in the region in which the fellow is practicing. Salary support is approximately \$95,000 per fellow per year. An additional \$30,000 per year per fellow supports program administration, including but not limited to curriculum development, coordination of education and research projects, program oversight and faculty mentoring. Last fiscal year, the State provided these funds for fellows starting this academic year and the selection of fellows is occurring now. NYSADC urges a recommitment of these funds to ensure that New York can continue to be leader in training dentists with specialized training to care for individuals with special needs.

### **Closing**

Thank you for the opportunity to testify today and for your continued support of academic dentistry. I welcome any questions you may have.

Respectfully submitted,  
Jennifer Tassler, J.D.

### **NYSADC Member Institutions**

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