

February 24, 2026

The Honorable Gary Palmer
Chair
Subcommittee on Environment
House Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Paul Tonko
Ranking Member
Subcommittee on Environment
House Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

Re: From Source to Tap: A Hearing to Examine Challenges and Opportunities for Safe, Reliable, and Affordable Drinking Water

Dear Chairman Palmer and Ranking Member Tonko:

As the leading authority on oral health in the United States, the American Dental Association (ADA) is pleased to submit this statement for the record for the subcommittee hearing of February 24, 2026, titled *From Source to Tap: A Hearing to Examine Challenges and Opportunities for Safe, Reliable, and Affordable Drinking Water*.

The ADA appreciates the Subcommittee's focus on policies that affect the safety, reliability, and affordability of drinking water. Because community water fluoridation is a longstanding public health practice implemented through public water systems, federal decision-making under the Safe Drinking Water Act can have significant implications for oral health outcomes, particularly for children and underserved populations.

Specifically, we urge Members of the Subcommittee to cosponsor H.R. 4556, the Protect Our TEETH Act. Introduced by Rep. Emanuel Cleaver, this bill would amend the Safe Drinking Water Act to require the Environmental Protection Agency (EPA) to commission an independent, rapid-response evidence review from the National Academies of Sciences, Engineering and Medicine (NASEM) before proposing updates to its drinking water regulations affecting community water fluoridation. NASEM is widely recognized as an independent and highly respected scientific body.

As you may know, the EPA is evaluating scientific evidence related to fluoride in drinking water, including issues related to neurodevelopment and dental fluorosis. The EPA is seeking to determine if there is a specific fluoride concentration in drinking water that could measurably impact neurodevelopment and/or dental fluorosis. The findings may inform future decisions about adjusting the legally permissible concentrations of fluoride in drinking water.

The EPA's study has the potential to affect the longstanding practice of community water fluoridation, which is the controlled upward adjustment of the natural fluoride content in water to levels recommended by the U.S. Public Health Service to help prevent tooth decay.¹ For over 80 years, community water fluoridation has been a safe and accessible way to reduce tooth decay in children and adults by at least 25 percent.² The CDC hailed it

as one of ten great public health achievements of the 20th century.^{3,4}~~(b)(5)~~ The ADA supports community water fluoridation in accordance with appropriate standards and supports ongoing research on the safety and effectiveness of fluoridation. Given the public health importance of this issue, the ADA is concerned that the current process may not reflect a sufficiently transparent, independent, and methodologically rigorous evidence review. In particular, the ADA is concerned about the following:

- The study is being developed by EPA's Office of Water instead of the office that would ordinarily conduct such studies: the Office of Research and Development. In fact, the ORD is currently being dismantled.
- EPA appears to be giving weight to a National Toxicology Program report that EPA's own lawyers have argued is "incomplete and not reflective of the best available science."⁵
- EPA has not published a systematic review protocol and is not reviewing more recent studies that refute the findings of the NTP report and other literature.

The Protect Our TEETH Act would require EPA to enlist NASEM to conduct rapid review of all data and research methods being used to justify a change in the primary and secondary maximum contaminant levels for fluoride in drinking water. It would further require EPA to publish the results of the evidence review in the *Federal Register* and consider them in any rulemaking. In effect, it would add a layer of scientific integrity and transparency to policy decisions affecting this safe and time-tested public health practice.

The ADA supports the Protect Our TEETH Act to help ensure that policy decisions affecting community water fluoridation are informed by rigorous, transparent, and independent scientific review grounded in the best available evidence.

Thank you for providing the opportunity to comment. If you have any questions or would like to discuss further, please contact Mrs. Natalie Hales at Halesn@ada.org.

Sincerely,

/s/

Richard J. Rosato, D.M.D.
President

RJR:EAS:rjb

/s/

Elizabeth Shapiro, D.D.S., J.D., C.A.E.
Interim Executive Director

¹ U.S. Department of Health and Human Services. Federal Panel on Community Water Fluoridation. U.S. Public Health Service recommendation for fluoride concentration in drinking water for the prevention of dental caries. *Public Health Rep.* 2015 Jul-Aug; 130(4): 318–331. doi:10.1177/003335491513000408

² American Dental Association, *Fluoridation Facts*, 2025. Available at <https://www.ada.org/fluoride> (accessed February 5, 2026)

³ Centers for Disease Control and Prevention. Ten Great Public Health Achievements – United States, 1900-1999. *MMWR* 1999; 48 (12): 241-243.

⁴ Murthy VH, Surgeon General's Perspectives: Community Water Fluoridation—One of CDC's 10 Great Public Health Achievements of the 20th Century, *Public Health Rep* 2015; 130(4): 296-298. doi:10.1177/003335491513000402

⁵ Appellants' Further Excerpts of Record at 4. *Food & Water Watch et al. v. Environmental Protection Agency*, No. 25-384 (9th Cir. Appeal, Jan. 22, 2026).