

January 28, 2025

The Honorable Tom Cole
Chairman
Appropriations Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
Appropriations Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Susan Collins
Chairwoman
Appropriations Committee
U.S. Senate
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Appropriations Committee
U.S. Senate
Washington, DC 20510

Dear Chairs Cole, Collins and Ranking Members DeLauro and Murray:

On behalf of the American Dental Association (ADA) and our more than 159,000 members, we are writing to express significant concerns regarding the recent directive from the Office of Management and Budget (OMB) to pause certain federal financial assistance programs implicated by Executive Order. This directive, while intended to align funding with new administration priorities, has generated substantial uncertainty for programs critical to advancing oral health, education, research, and care delivery.

Federal funding from agencies such as the National Institutes of Health (NIH), Health Resources and Services Administration (HRSA), and the Centers for Disease Control and Prevention (CDC) plays an essential role in improving the oral health of the nation. The scope of this pause, and the lack of clarity on its application to these programs, creates risks that could profoundly impact the following areas:

- **NIH/NIDCR Research Grants:** Funding from the National Institute of Dental and Craniofacial Research (NIDCR) supports transformative research into the prevention and treatment of oral diseases. In 2022 funding cycle alone, more than \$300 million in NIDCR grants supported groundbreaking projects at institutions such as the University of Michigan, the University of California, San Francisco, University of Florida and the ADA Forsyth Institute. Past and current research activities are vital to the future of oral health and the care of our nation. The research enterprise is essential to safeguarding public health, economic growth and competitiveness in global scientific leadership. Any disruptions to these programs could derail critical research with lasting impacts on public health.

- **HRSA Oral Health Programs:** HRSA-funded initiatives, such as the Dental Faculty Loan Repayment Program, Oral Health Workforce Improvement Program Community-Based Dental Partnership Program and Teaching Health Centers GME, are vital for addressing workforce shortages and ensuring underserved communities receive care. These programs awarded over \$18 million in grants in FY2023, with significant contributions to workforce development and access to care.
- **CDC Oral Health Initiatives:** CDC Division of Oral Health is a much-needed source of support for state health departments to reduce dental disease in underserved and rural communities. Programs aimed at expanding access to fluoridation and other prevention-focused efforts may be delayed, undermining proven public health measures that benefit some of the nation's most vulnerable communities.

Additionally, the pause has created unintended disruptions in areas that remain unclear, such as funding for public health infrastructure, disaster relief for dental facilities, and other cross-sector programs that indirectly impact oral health. For example, federal support for workforce development, veterans' oral health programs, and school-based health initiatives may also be affected. Without clear guidance from OMB, institutions and organizations that depend on these funds face challenges in planning, continuity, and service delivery. Clarification on the status of these programs is urgently needed to prevent further confusion and disruption.

The ADA recognizes that programs providing direct benefits to individuals, such as Medicaid and CHIP, are explicitly excluded from the pause. However, many federally funded oral health programs rely on indirect grants, loans, and partnerships to address access-to-care gaps and foster innovation. The lack of clarity on exemptions for these programs risks unnecessary disruptions, further exacerbating existing health disparities.

We respectfully urge Congress to:

1. **Seek immediate clarification from OMB on the status of NIH, HRSA, and CDC programs related to oral health, and ensure their timely continuation.**
2. **Advocate for expedited review and approval of oral health-related grants to minimize disruption to ongoing research, workforce development, and public health initiatives.**
3. **Ensure consistent communication with grantees and stakeholders to mitigate uncertainty and prevent adverse effects on oral health programs.**

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As the leading voice for oral health in the United States, the ADA is committed to working with Congress to address these critical issues. We strongly encourage Congress to provide oversight and guidance to ensure that oral health remains a national priority and that funding disruptions are avoided.

Thank you for your attention to this urgent matter. Please do not hesitate to contact me at Jennifer Fisher at fisherj@ada.org if we can provide additional information or assistance.

Sincerely,

/s/

Brett Kessler, D.D.S.
President

/s/

Raymond A. Cohlma, D.D.S.
Executive Director

CC: Acting Office of Management and Budget Director Matthew J. Vaeth