

Good morning Mr. Chairman and members of the Committee. My name is Dr. Thomas Rossi, and I am the President of the NJ Dental Association, representing more than 60 percent of the practicing dentists in NJ.

On behalf of all licensed dentists in this state, I thank you for the opportunity to speak with you today regarding the state of our profession in the wake of the COVID-19 pandemic.

I would also like to thank Senate President Sweeney, the Senate and Governor Phil Murphy for acknowledging that dentists provide essential healthcare services.

As per Executive Order 109 that took effect on March 27, all non-essential dental procedures were suspended. However, we deeply appreciate that the order allowed a practicing dentist to use their clinical judgement to perform those procedures that could not be delayed without undo risk to the patient's health.

New Jersey has the most disbursed and diverse network of dentists in America. According to data from the American Dental Association's Health Policy Institute, more than 97 percent of New Jerseyans can access dental treatment within 15 minutes of their homes. Furthermore, 99 percent of all Medicaid eligible children live within 15 minutes of a Medicaid provider.

Here are some quick statistics about the dental industry in New Jersey:

- We have the 7th largest population of dentists in America.
- There are 8697 licensed dentists
- There are 6756 practicing dentists
- There are 5,960 dental offices
- Approximately 55 percent of dentists are solo practitioners. However, nearly 90 percent of dental offices have 2 or fewer dentists employed.
- General dental practices generate, on average between \$500,000 and \$1,000,000 in gross revenue with overhead costs between 60 and 70 percent. Specialty practices operate in a \$750,000 to \$3,000,000 gross revenue range with average overhead costs of 70 to 90 percent.
- The typical dental facility in New Jersey has 5 employees, including the owner-dentist. The overwhelming majority of dental practices have 10 or fewer employees.
- Dentistry employs nearly 30,000 New Jerseyans. Most employees are highly skilled and well compensated. They include, dental assistants who support the doctor during surgical procedures; and, licensed dental hygienists who provide

preventative care services to reduce the rate of dental disease. Dental assistants typically earn between \$15-\$25 an hour, while licensed dental hygienists earn between \$35 and \$60 an hour. There are also receptionists as well as office administrative personnel.

- Dental student debt has become crippling over the last decade with recent dental school graduates having more than \$285,000 of outstanding debt, on average, according to data from the American Student Dental Association (ASDA).

The COVID-19 pandemic has significantly impacted the U.S. dental care sector. Dentists are essential to the healthcare delivery system and provide critical care that improves both oral and systemic health.

However, the directives and guidance that have been put out by federal and state agencies have been so vague, and, at times contradictory that most practitioners have chosen to severely limit patient care or even close for fear of reprisals from licensing agencies or other governmental entities as well as their staff. The impact has been devastating.

Thousands of new graduates and dental auxiliary personnel were furloughed resulting in their joining massive numbers of other New Jerseyans in applying for unemployment benefits.

According to research conducted by the American Dental Association:

- The vast majority of dentists report their volume of total collections is less than 5 percent of what is typical.
- Modeling predicts that U.S. dental care spending could decline by up to 66 percent in 2020 and 32 percent in 2021.

Most troubling is that dental economists are anticipating as many as 20 percent of the sector may close within one year as a result of this pandemic and the policies that may substantially prohibit practitioners from operating.

In this instance, the cure may be worse than the disease.

To put this number into an NJ context, nearly 1,200 practices could close.

The world has changed because of COVID-19, but as of yet we don't know to what extent.

We've learned that the PPE supply chain is broken and created unnecessary competition among providers.

We've learned that fear drives access to care policies that may not be rooted in scientific evidence.

We've learned that healthcare economics can be shattered more by government action than insurance carrier policies.

But I can't emphasize enough that above all, we've learned that dentists are excellent at infection control and deliver care in a safe way.

Even though dentists are in one of the highest risk categories for infection exposure due to the nature of what we practice, infection levels have been extremely low.

This is not the first time dentistry, and quite frankly healthcare, has dealt with fear and infection control concerns.

I was already in practice when we experienced many of the same questions and concerns with the HIV/AIDS epidemic of the 1980's.

As dentists, we adopted CDC guidelines regarding universal precautions thereby learning how to manage patients, reduce risk and provide essential care. Those protocols and procedures continue to guide how we practice today.

Last month, NJDA developed and delivered a comprehensive plan to re-open dental practices. That plan provides specific guidelines on how to re-open and manage patients as well as staff in the wake of COVID-19.

I want to personally thank all of the legislators who took time to speak with the Association about this report and consider additional steps needed to preserve NJ's dental industry.

We will need to employ, and in fact we are employing, new patient triaging by asking patients healthcare questions related to COVID-19 even before they enter the office.

We are practicing social distancing by changing waiting room policies and patient appointment management.

While practices have dramatically shrunk many still are practicing for essential care, and, I might add, without any of the new binding procedures that are yet to be put out by the State of New Jersey as alluded to by Governor Murphy last Friday.

To our knowledge, there have been no identified infections as a result of dentists treating patients in New Jersey.

Dental practices are ready to fully reopen and treat patients, but we need a few things first.

1: access to PPE, and, if mandated to use certain PPE then provisions need to be made by government for those mandated.

2: Access to capital for practices to quickly implement any requirements so access to care is not further delayed.

3: limit liability for practices and practitioners, so they do not live in fear of reprisals from patients or staff from possible COVID-19 exposure.

4: insurance carriers need to waive frequency limitations and other contract related constraints to make it as easy as possible for patients to be treated and doctors to be paid quickly. Prompt insurance payment will maintain the cash-flow needed to sustain the operation of dental practices and, of course, paying employees.

5: Government and Insurance Carriers need convey strongly to the public that doctor's offices are safe places and they should not fear going to the doctor and becoming sick. In fact, not going to the doctor can make someone more sick.

Even though it is reported we have flattened the curve, public health experts are already talking of a fall resurgence. This does not help people feel comfortable.

Should another outbreak occur, we need to be very thoughtful and not just de novo close sectors of our economy.

We have learned that many businesses can be open responsibly.

We've also learned that delaying care for a couple months can harm our population in other ways.

We've learned that government needs to ensure an adequate supply chain for the provider community so it will be prepared to deliver care.

Personally, I am very proud of the way in which organized dentistry has responded to the COVID-19 Pandemic.

The NJDA was quick to acknowledge the coronavirus health risk on the profession and acted decisively, when, on March 16, our Board recommended that all dental offices suspend routine procedures for two weeks. This was prior to both an American Dental Association recommendation or this issuance of Executive Order 109 by the Governor.

There is no doubt in my mind, that should a similar outbreak occur, the leadership and staff of our Association will respond just as quickly to make the appropriate recommendations and will continue to be the advocate and resource for the dentists of New Jersey that it has always been.

Thank you again for allowing me a few minutes to speak with you and offer my thoughts as we begin to reopen healthcare in New Jersey. I am happy to answer any questions you may have.

