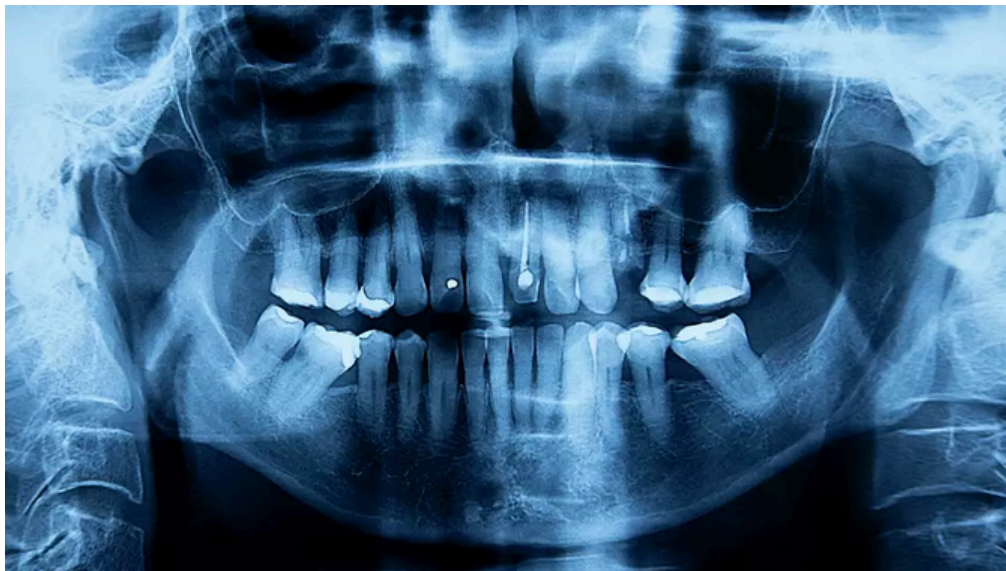


# Commentary: Dental care for Medicaid patients is in crisis, but the Legislature can help

Two bills before the Assembly would remove some barriers to dental care. A third proposal, to fast-track licensure for foreign-trained dentists, deserves attention next year.

By **David Shippee**  
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As CEO at Whitney Young Health, I see how barriers to health access affect the lives of our neighbors. One of the biggest barriers right now is a shrinking health workforce — and that’s especially true for the dental health workforce.

The oral health crisis is hurting millions of New Yorkers of all ages, in every region. Tooth decay remains the most common chronic childhood disease, despite being almost entirely preventable.

We have hundreds of people — children, adults and seniors — on our waitlist for dental services. The same is true of clinics like ours across the state that take public health insurance. There simply aren’t enough dentists to serve the populations in need of care.

But change is possible, right now: New York’s leaders have the opportunity to improve dental care in our state before they head home for the summer.

Two bills that seek to remove barriers to care have passed in the Senate and are awaiting a vote in the Assembly. These bills offer smart, proven, cost-effective solutions that would expand access to dental care across the state.

One bill would let parents apply fluoride varnish to children's teeth at home under the remote supervision of a licensed provider, such as through a telehealth visit. Fluoride varnish is a safe, fast and affordable way to prevent cavities in children. It's so easy to apply that it takes less than two minutes — and yet, many families still can't access this service due to a shortage of providers, transportation barriers or long wait times.

Another bill would put dental hygienists where they're needed most. New York's outdated laws restrict where dental hygienists can work without direct dentist supervision. That means fewer services in places like schools, nursing homes, domestic violence shelters and rural clinics.

This bill expands a successful model already in limited use in New York. It would allow hygienists to provide care in more community-based settings under a consulting agreement with a dentist — not on-site supervision. This model works. Other states that have adopted similar laws have seen improved access and outcomes.

These two bills are grounded in research, backed by practitioners and designed to meet people's needs. They don't require new state spending. They simply remove outdated barriers and empower families and professionals to protect oral health. They just need to pass the Assembly.

A third solution is waiting for action but is urgently needed. Across the state, safety net dental providers like Whitney Young Health have staff members who are licensed dentists in their home country but are not practicing here because the barriers to licensure in New York are expensive and take many years.

The proposal would require foreign-trained dentists to complete an apprenticeship, pass the board exam and work in an underserved area in order to receive their New York state license.

This straightforward solution would help us serve the thousands of people who are waiting for dental care, and it would enable us to bridge language and culture gaps in our communities. This is the biggest opportunity to address New York's dental workforce shortage, and it must be acted on in the coming year.

Every New Yorker should have timely access to dental care, but community dental clinics can't do it on their own. We need systemic solutions from lawmakers who are willing to open pathways to oral health care and keep more New Yorkers smiling.

*David Shippee is the CEO of Whitney Young Health.*