

May 8, 2026

James V. McDonald, M.D., M.P.H., Commissioner
New York State Department of Health
Corning Tower, Empire State Plaza
Albany, NY 12237

Re: Request to Remove Dental Accreditation Requirement from NYSDOH Proposed Rule Making on Ionizing Radiation

Dear Commissioner McDonald:

On behalf of the New York State Dental Association (NYSDA), and the New York State Society of Oral and Maxillofacial Surgeons (NYSSOMS), we thank you for the recent opportunity to meet with Department staff to discuss the proposed regulations on ionizing equipment in dental offices.

As discussed during that meeting, our associations strongly support appropriate quality assurance and quality control standards for dental CBCT imaging. Patient safety remains a top priority for the dental profession and our specialty.

However, we strongly oppose the proposed accreditation requirement under these proposed regulations.

Specifically, we reiterate the following concerns:

- Existing accreditation programs are designed primarily for large medical facilities and hospital-based imaging centers, not small dental practices with limited staff and infrastructure.
- Numerous studies indicate that dental CBCT units emit only a fraction of the radiation associated with traditional medical CT imaging.
- There are no studies that we are aware of that demonstrate patient harm related to dental CBCT usage.
- No other state in the nation requires dental CBCT accreditation.
- Most accreditation programs are not designed for dentists and the one that is, IAC (Intersocietal Accreditation Commission) is primarily for very large practices that bill for Medicare. Well under 1% of national dental billings are paid by Medicare.
- The vast majority of dentists with these machines would not qualify for IAC accreditation.
- The IAC requires dental assistants taking CBCTs to be licensed by the state. More than 90% of dental assistants in the state are unlicensed. And most of them, though technically competent, would likely struggle to become registered dental assistants.

- Radiologic scan guidance from the American Dental Association is a principle known as “ALARA” – As Low As Reasonably Achievable. Yet, IAC accreditation models require a minimum volume of 300 CT scans annually; a threshold many dental offices do not meet. This creates a concerning incentive structure.
- The costs associated with accreditation, staffing compliance, inspections, and program maintenance would be substantial and would ultimately increase costs to patients seeking care.
- If implemented as proposed, these requirements may force many dental practices, particularly smaller and rural practices, to discontinue CBCT services altogether, negatively impacting patient access to care and hindering diagnostic capabilities. This is not the direction the state should be going at a time when there are already severe shortages of dental providers, and patient access is limited.

We respectfully urge the Department to carefully consider the practical realities of dental practice operations, the unique nature of dental CBCT technology, and the significant impact these proposed requirements may have on patient access to care throughout New York State. While we strongly support the provisions in the regulation to ensure quality assurance and control through enhanced inspection requirements for the CBCT equipment, we strongly urge the Department to remove the dental accreditation requirement prior to adopting this regulation.

Our profession remains committed to continued collaboration with the Department and welcomes the opportunity to serve as a resource as these discussions move forward. Thank you for your time and consideration.



Michael J. Herrmann
Executive Director, NYSDA
Executive Director, NYSSOMS

Cc Johanne E. Morne, MS, Executive Deputy Commissioner
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