



April 29, 2026

The Honorable Joe Ciresi, Chair
House Communications and Technology Committee
Pennsylvania House of Representatives
325 Main Capitol Building
Harrisburg, PA 17120

Dear Representative Ciresi:

On behalf of the approximately 4,700 members of the Pennsylvania Dental Association (PDA), I thank you for the opportunity to provide comments on the use of artificial intelligence (AI) in health care, and its profound impact on health systems, providers, and patients. We appreciate the committee's due diligence on engaging the stakeholder community and addressing the benefits, risks, and challenges associated with AI.

PDA respectfully requests that the committee be mindful of any AI-related legislation's potential impact on the dental profession and that it work with dental stakeholders to ensure that laws regulating the use of AI in healthcare also make sense for dentists and patients. PDA is in the process of forming an AI committee to advise members, the public, and policymakers on AI-related issues. We would like to share some general thoughts regarding HB 1925, and AI legislation in general:

- It is often unclear in proposed legislation whether the intent is to include dentistry due to ambiguous definitions of *health insurance policies*, *health care provider* and *health care facility*. Specificity/clarity in such definitions greatly simplifies enforcement following enactment. PDA believes that the amendment to HB 1925 provides such clarity.
- Annual compliance statement requirements for individual and small group practices should be different than the requirements for large health systems and hospitals. We believe that HB 1925 as amended will help ensure that the Department of Health promulgates policies and procedures to fit each healthcare sector appropriately.
- As with medicine, while AI has a role to play in dentistry--such as with imaging and diagnosis and treatment planning--it is no substitute for human expertise and clinical judgement. PDA is concerned that AI models can produce biased outcomes and recommends the inclusion of language in Section 3503 (2) that AI models and training "do not disadvantage vulnerable populations through misdiagnosis, denial of coverage, or algorithmic exclusion."

- While PDA sees the value in insurers using AI for administrative tasks and to expedite claims processing, we believe that humans with appropriate clinical expertise will always play a vital role in evaluating and making determinations related to prior authorization and coverage. Only licensed dentists should make adverse claims adjudications. PDA recommends an amendment to Section 5203 that specifically prohibits the use of AI to deny dental claims, benefits, or appeals.
- PDA recommends that HB 1925 include verbiage related to maintaining security of AI systems and handling data breaches, and cross-reference with other applicable laws as appropriate.

PDA appreciates the committee's commitment to working on legislation that strikes the proper balance so that AI is used as a tool to help provide the best care possible for patients. We welcome the opportunity to meet with you and your staff to discuss the inclusion of dentistry in AI legislation when appropriate. Please contact me at (412) 551-5498 or DrJamesMancini@aol.com, if you have any questions or would like to further discuss the role of AI in dentistry. Or you may contact Marisa Swarney, PDA's director of government relations, at (717) 234-5941 x116, or mss@padental.org.

Sincerely,

A handwritten signature in cursive script, appearing to read "James Mancini DMD".

James Mancini, DMD
President