Council on Government Affairs

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Crabtree, Mark A., 2023, Virginia
Di Vincenzo, Giorgio T., 2023, New Jersey**
Erickson, Doug M., 2025, Minnesota
Greenwell, Darren S., 2026, Kentucky
Hildebrandt, David J., 2026, Louisiana
Miller, Raymond G., 2023, New York
Roberts, John R., 2025, Indiana
Roberts, Matthew B., 2023, Texas
Tauberg, James A.H., 2025, Pennsylvania
Velazquez, Elisa J., 2026, New Jersey
Watson-Lowry, Cheryl D., 2024, Illinois
Willis, Heather A., 2026, Alaska

Yaghoubi, Roxanne, director
Burns, Robert J., senior manager
Linn, David N., manager
McGee, Corey A., manager

The Council's 2022–23 liaisons include: Dr. Gary Oyster (Board of Trustees, Sixteenth District), Ms. Sue Hadnot (Alliance of the American Dental Association), and Ms. Nicole Anderson (American Student Dental Association).

Areas of Responsibility as Set Forth in the *Bylaws* or *Governance and Organizational Manual of the American Dental Association*

As listed in Chapter VIII, Section K.7., of the ADA *Governance and Organizational Manual,* the areas of subject matter responsibility of the Council shall be:

a. Encourage the improvement of the health of the public and to promote the art and science of dentistry in matters of legislation and regulations by appropriate activities;
b. Formulate and recommend legislation, regulatory activity, policies and governmental programs relating to dentistry and oral health for submission to Congress;
c. Serve and assist as liaison with those agencies of the federal government which employ dental personnel or have dental care programs, and formulate policies which are designed to advance the professional status of federally employed dentists; and
d. Disseminate information which will assist the constituents and components involving legislation and regulation affecting the dental health of the public.

** New Dentist member*
*** American Dental Political Action Committee chair without the power to vote*

Advancing ADA Strategic Goals and Objectives: Agency Programs, Projects, Results and Success Measures

The Council on Government Affairs (CGA) works on many of the same issues as other ADA Councils, but does so from a government affairs perspective. With guidance from the leadership of CGA, as well as from the staff and leadership of other Councils in the public/professional group, the staff lobby the government on the ADA's priorities. This lobbying is focused on issues that increase the value of ADA membership and reflect the values of ADA members.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Congressional support of the ADA's priority legislation.

Success Measure: Increased numbers of Congressional cosponsors of the ADA's priority legislation.

Target: Secure 200 bipartisan and bicameral cosponsors for the ADA's priority legislation.

Range: Secure 180-220 bipartisan and bicameral cosponsors for the ADA's priority legislation.

Outcome: Target met. Thanks to the ADA's lobbying, there were more than 200 bipartisan and bicameral cosponsors for the ADA's priority legislation.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Federal government funding for oral health programs.

Success Measure: Secure increased federal government funding for oral health programs.

Target: Increase federal government funding for oral health programs, including the National Institute of Dental and Craniofacial Diseases (NIDCR) and the Centers for Disease Control and Prevention (CDC) Division of Oral Health, by more than the average Consumer Price Index (CPI).

Range: Increase federal government funding for oral health programs, including the NIDCR and CDC Division of Oral Health, by 3-5%.

Outcome: Range met. The Fiscal Year 2023 omnibus appropriations bill that passed Congress and became law included an increase of 3.5% for oral health programs across the board, including an increase of more than $15 million for the NIDCR.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: The ADA's federal government affairs agenda on student loan reform.

Success Measure: Passage of legislation or a finalized regulation that would provide student loan relief to dentists who work in underserved areas or with underserved populations.

Target: The introduction of legislation or regulation that would provide student loan relief to dentists who work in underserved areas or with underserved populations.

Range: The introduction of two to three bills or regulations that would provide student loan relief to dentists who work in underserved areas or with underserved populations.

Outcome: Success measure met. The Bio-Preparedness Workforce Pilot Program was included in the Fiscal Year 2023 omnibus appropriations bill, which passed Congress and became law. The pilot program provides student loan repayment to health care professionals, including dentists, who undertake careers in infectious disease in underserved areas. For example, dentists who provide care to patients in underserved areas with HIV/AIDS through the Ryan White program could receive student loan repayment. Additionally, the Department of Education finalized a regulation to reform the Public Service Loan Forgiveness (PSLF) program, and as a result, it is easier for dentists who work in underserved areas or with underserved populations to receive PSLF relief.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Addressing the shortages of dentists in rural areas.

Success Measure: Passage of federal legislation to address the shortages of dentists in rural areas.

Target: The introduction of federal legislation to address the shortages of dentists in rural areas.

Range: The introduction of one to two bills to address the shortages of dentists in rural areas.

Outcome: Success measure met. The Maximizing Outcomes through Better Investments in Lifesaving Equipment (MOBILE) Health Care Act passed Congress and was signed into law in October 2022. This legislation expands the use of the Health Resources and Services Administration's (HRSA) grant program for community health centers. It allows the health centers to set up a mobile unit regardless of whether the health center also sets up a permanent health care site. The law helps address the shortages of dentists in rural areas by expanding care into those areas through mobile units.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Medicare medically necessary dental care.

Success Measure: A finalized regulation that expands coverage for Medicare beneficiaries who need dental care before certain medical procedures.

Target: Proposed regulation on Medicare medically necessary dental care.

Range: One to two regulations on Medicare medically necessary dental care.

Outcome: Success measure met. The Centers for Medicare and Medicaid Services (CMS) finalized a regulation that expands Medicare medically necessary dental care to beneficiaries before an organ transplant, cardiac valve replacement, or valvuloplasty.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Medicare Advantage (MA) dental benefits.

Success Measure: A finalized regulation that improves the transparency of MA dental benefits.

Target: Proposed regulation to improve the transparency of MA dental benefits.

Range: One to two proposed regulations to improve the transparency of MA dental benefits.

Outcome: Success measure met. CMS finalized a regulation that requires more transparency in the marketing of MA dental benefits, including the TV commercials where celebrities sell MA plans to seniors

by promising them dental benefits. Several of the ADA's recommendations to CMS were included in the final regulation, including prohibiting the advertising of dental benefits if none of the plans offered in the area provide such a benefit. CMS is also no longer allowing the advertising of plans with a large dental benefit when the plans offered in the area only provide a benefit of a much lesser value.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Medicaid dental care.

Success Measure: Finalized regulation expanding Medicaid dental care.

Target: The introduction of federal legislation or regulation on Medicaid dental care.

Range: The introduction of two to three federal bills or regulations on Medicaid dental care.

Outcome: Success measure met. CMS announced that all states would now cover dental care for Medicaid beneficiaries for 60 days postpartum. Additionally, the ADA worked with dentist Congressman Mike Simpson (R-ID) to introduce the Strengthening Medicaid Incentives for Licensees Enrolled in Dental (SMILED) Act for the first time. This bill would reduce administrative burdens for Medicaid dentists, including audits and credentialing. The ADA also supported the introduction of the Medicaid Dental Benefit Act, which would require all states to provide comprehensive adult dental benefits to their Medicaid beneficiaries.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Dental Loss Ratio (DLR).

Success Measure: Passage of federal legislation or finalized regulation on DLR for Medicaid managed care plans.

Target: The introduction of federal legislation or administration proposals on DLR for Medicaid managed care plans.

Range: The introduction of one to two federal bills or administration proposals on DLR for Medicaid managed care plans.

Outcome: Target met. President Biden included in his Fiscal Year 2024 budget a proposal to require Medicaid managed care dental plans meet a DLR of 85%.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Oral health equity for people with disabilities.

Success Measure: The establishment of a facility fee billing code for dental surgeries in hospitals and ambulatory surgical centers.

Target: A regulation establishing a facility fee billing code for dental surgeries in hospitals.

Range: One to two regulations on dental surgeries in hospitals and ambulatory surgical centers.

Outcome: Target met. In the Hospital Outpatient and Prospective Payment System final rule, CMS established a new G code for dental surgeries in hospitals. This code increases the facility fee from $203 to more than $1,700. The increased fee helps to increase access to dental surgeries for people with

disabilities who need to have their surgeries performed under anesthesia in an operating room. The ADA also continues to advocate for the inclusion of the new code in the ambulatory surgical center covered procedures list.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Medical-dental integration.

Success Measure: Finalized federal regulation allowing dentists to vaccinate.

Target: Proposed federal regulation on dentists and vaccination.

Range: One to two proposed regulations on dentists and vaccination.

Outcome: Success measure met. The Department of Health and Human Services (HHS) amended a Public Readiness and Emergency Preparedness Act declaration to authorize dentists and dental students to vaccinate patients against mpox (formerly known as monkeypox).

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Licensure reform for dentists and hygienists.

Success Measure: The passage of federal legislation that would allow for licensure reciprocity for dentists and hygienists.

Target: The introduction of federal legislation that would allow for dental licensure reciprocity.

Range: One to two introduced federal bills on dental licensure reciprocity.

Outcome: Success measure met. The ADA supported the Military Spouse Licensing Relief Act, which allows dentists or hygienists who are military spouses to have licensure reciprocity in the state in which their spouse is stationed. Additionally, it gives members of the military licensure reciprocity. This bill passed Congress and was signed into law as part of the Veterans Auto and Education Improvement Act.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Licensure reform for dentists and hygienists.

Success Measure: Introduce and pass the dentist and hygienist licensure compact in seven states in order to activate the compact.

Target: The introduction of the licensure compact in seven states.

Range: The introduction of the licensure compact in three to seven states.

Outcome: Target met. The compact language was finalized in January of 2023, meaning that a number of states had already passed their bill filing deadlines, or had already decided on their agenda for the session. Nonetheless, as of this writing, three states—Washington, Iowa, and Tennessee—have passed the compact, and a further five have been introduced, with more to come. There has been significant interest in at least 10 states in pursuing the compact in 2024.

Objective 10: Dental benefit programs will be sufficiently funded and efficiently administered.

Initiative/Program: Fighting Insurance Interference Strategic Taskforce (FIIST).

Success Measure: Increase by 30% legislative and regulatory activity related to third party payer issues in State Public Affairs (SPA) states.

Target: Increase by 30% legislative and regulatory activity related to third party payer issues in SPA states.

Range: 20–30% of activity relating to third party payer issues in SPA states.

Outcome: The target was exceeded. Thirty-nine state dental societies received FIIST/SPA funding to engage in third party payer issues on the state level in the January-June 2023 SPA grant period. There were 33 proposed dental insurance reform laws put forward by 20 state societies receiving FIIST dedicated SPA funds, representing an increase in activity of 51% (20 of 39 states saw activity). To date, there are six new laws in two states in 2023 with the result of a 6% conversion rate (6 of 33 proposals became law). The State Government Affairs (SGA) staff also worked with a few state dental societies that did not request FIIST/SPA money but were engaged in third party payer legislation nonetheless. So far two state societies have been successful in passing laws without SPA funding but with SGA's assistance, resulting in three new laws. All told, there are nine new dental insurance reform laws in 2023 positively impacting dentists and patients.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Grassroots program.

Success Measure: Successfully grow grassroots network and ensure network can communicate to members of Congress and staff.

Outcome: In 2022, over 23,000 communications were sent to Capitol Hill.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: Tooth Talk Podcast.

Success Measure: Cover important advocacy-related topics through the podcast platform.

Outcome: Over 1,500 downloads for each episode.

Objective 9: The ADA will be the preeminent driver of trusted oral health information for the public and profession.

Initiative/Program: ADA Dentist and Student Lobby Day.

Success Measure: Educate dentists and students on pertinent issues before Congress. Assist dentists and students in advocating for these issues before members of Congress and staff.

Outcome: Lobby Day 2023 was held in-person on March 5-7. Over 700 students, dentists, and state staff attended and participated. More than 300 meetings were held with legislative offices to lobby for issues including 'ADA 101,' dental insurance reform, student loan reform, and Medicaid.

Emerging Issues and Trends

The 118th session of Congress is beginning to introduce bills and hold hearings. As this process continues, the ADA will continue to advocate for legislation that aligns with the goals of the public/professional group. In addition to the bills mentioned earlier in this report, these key bills include, but are not limited to:

- The Resident Education Deferred Interest (REDI) Act, which would allow borrowers to defer their student loans interest-free while serving in a medical or dental internship or residency.
- The Restoring America's Health Care Workforce and Readiness Act, which would double the funding for the National Health Service Corps' scholarship and loan repayment programs.
- The Action for Dental Health Act reauthorization, which would provide grants for innovative workforce and access to care programs.
- The Ensuring Lasting Smiles Act (ELSA), which would require private group and individual health plans to cover medically necessary services resulting from a congenital anomaly or birth defect.
- The Dental and Optometric Care (DOC) Access Act, which would ban non-covered services provisions in dental and vision insurance plans.
- The Oral Health Literacy and Awareness Act, which would authorize an oral health literacy campaign at HRSA.
- The PREVENT HPV Act, which would increase awareness of HPV-related cancers and educate the public on the need for HPV vaccination.

Responses to House of Delegates Resolutions

The 2022 House of Delegates referred Resolutions 502 and 502S-1 to the appropriate agency for further study. The Council will provide a response in a separate report.

Self-Assessment

The Council is next scheduled to conduct a self-assessment in 2025.

Policy Review

In accordance with Resolution 170H-2012, Regular Comprehensive Policy Review (*Trans.*2012:370), CGA reviewed the following Association policy and determined that it should be maintained.

General, Pediatric and Public Health Dental Residency Programs (*Trans.*2019:298)

The Council has submitted resolutions to amend or rescind other Association policies based on their adequacy (or obsolescence) in modern times, appropriateness of language and terminology, consistence with other Association policies, and the merits of any revision(s). Those recommendations are contained on separate worksheets.

Council Minutes

For more information on recent activities, see the Council's minutes on ADA.org.