

2022 Accomplishments



ADA Priorities in the Congressional Omnibus Legislation

The Fiscal Year 2023 omnibus passed Congress and was signed into law by the President in December 2022. The omnibus included the following provisions advocated for by the ADA.

Funding for Oral Health

- An increase of 3.5% for oral health across the board with significant increases in dental research and Indian dental health.
- Over \$5 million in community projects to support dental and oral health programs.
- An increase for oral health training with designated funding for pediatric and general dentistry.

Medicaid and the Children's Health Insurance Program (CHIP)

- An extension of Puerto Rico's higher federal Medicaid match of 76% through fiscal year 2027.
- A permanent extension of a higher federal Medicaid match of 83% for American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, and the U.S. Virgin Islands.
- A funding extension for CHIP for two years through fiscal year 2029, with a requirement of 12 months of continuous coverage for children in Medicaid and CHIP effective January 1, 2024, and a permanent state option to allow states to provide 12 months of continuous coverage during the postpartum period in Medicaid or CHIP.

Indian Health Service (IHS)

- An advanced appropriation for the IHS of \$5.129 billion for fiscal year 2024 to provide budget certainty for a healthcare system that provides health services to 2.5 million individuals across Indian Country.

Opioids

- The MATE (Medication Access and Training Expansion) Act was included in the omnibus. The MATE Act requires dentists to complete eight hours of training before receiving or renewing a Drug Enforcement Administration (DEA) registration.
- ADA successfully lobbied Congress to amend provisions of the MATE Act to comport with ADA policy. Unlike the original bill:
 - Dentists will no longer have to complete 3 hours of training specific to prescribing buprenorphine, which is outside the scope of dental practice.
 - Continuing Education (CE) credits accepted for state licensure will apply toward the federally required training, as well as courses taken through ADA CERP providers.
 - Dental school courses will count toward the federally required training for those who are less than five years out of dental school.

Bio-Preparedness Workforce

- This program that was included in the omnibus would provide student loan repayment to healthcare professionals, including dentists, who undertake careers in infectious disease in underserved areas. For example, dentists who provide care to patients with HIV/AIDS through the Ryan White program could receive student loan repayment.

Other Congressional Lobbying Accomplishments

Medicare Part B Proposal

- The ADA helped defeat a Congressional proposal to add a dental benefit to the Medicare Part B program. The ADA lobbied for any expansion of Medicare including dental benefits to be through a separate and new program dedicated to providing comprehensive dental care for low-income seniors up to 300% of the Federal Poverty Level (FPL).

MOBILE Health Care Act

- The Maximizing Outcomes through Better Investments in Lifesaving Equipment for Health Care Act, or MOBILE Health Care Act, would expand the use of the Health Resources and Services Administration's (HRSA) New Access Points grant program for community health centers. It would allow health centers to use this grant program to set up a mobile unit regardless of whether the health center also sets up a permanent health care site. In alignment with the ADA's values, the aim of the bill is to expand access to health care for underserved communities.
- The MOBILE Health Care Act passed the Senate unanimously and the House of Representatives by a vote of 414-7. The President signed it into law on October 17.
- The ADA supported the MOBILE Act, and sent letters to Congress asking that they pass the bill. The ADA also specifically asked that these grants be used for mobile dental, as well as medical, vans.

Ensuring Lasting Smiles Act

- The ADA advocated for the Ensuring Lasting Smiles Act (ELSA), which would require that all private group and individual health plans cover medically necessary services resulting from a congenital anomaly or birth defect. The services covered under ELSA would include inpatient and outpatient care and reconstructive services and procedures, as well as adjunctive dental, orthodontic, or prosthodontic support.
- In April, ELSA passed the House of Representatives with 310 bipartisan votes.

Military

- Based on contacts with ADA members and a survey of ADA members who have worked with the TRICARE Dental Program (TDP), the ADA joined the American Academy of Pediatric Dentistry (AAPD) and nine military and veteran service organizations in sending a letter to Congress calling for changes to TDP that would increase access to dental care for military families.
- Congress responded in the 2023 National Defense Authorization Act by requiring functions such as enrollment, eligibility, and premium payment processing to be handled by a third-party administrator, and ensuring beneficiaries have three dental insurance enrollment options from several carriers. These improvements are intended to address the problems the ADA identified with TRICARE provider network adequacy, delayed payments, and lack of access.

Regulatory Lobbying Accomplishments

Medicare Medically Necessary

- The Centers for Medicare and Medicaid Services (CMS) agreed with the ADA that dental services (including both examination and treatment) should be covered for Medicare beneficiaries prior to cardiac valve replacement, valvuloplasty, or organ transplant.
- CMS said that Medicare payment would be provided if these procedures were done on an outpatient or an inpatient basis. As requested by the ADA, CMS also said that ancillary services (such as X-rays, the administration of anesthesia, or the use of an operating room) for these procedures would be covered.
- CMS said that the statutory definition of a physician, as well as the definition of a physician in the Medicare manual, includes dentists.
- CMS did not expand the Medicare medically necessary benefit to include diabetes.

Operating Room Access

- After a strong advocacy campaign spearheaded by the ADA, the AAPD, the American Association of Oral and Maxillofacial Surgeons (AAOMS), and the disability community, CMS agreed to establish a new dental billing and payment arrangement to improve access for hospital dental operating room (OR) cases requiring care under general anesthesia. This care is especially important for young children and people with special needs and disabilities, but unfortunately their access to dental care was limited by hospitals that instead scheduled surgeries that had a higher facility payment rate.
- In a final rule released on November 1, CMS established a new Healthcare Common Procedure Coding System (HCPCS) G code and assigned that code to the Medicare Ambulatory Payment Classification (APC) 5871 (Dental Procedures) with a Medicare facility payment rate of approximately \$1,700. Previously, dental surgeries in hospitals had to use a miscellaneous code, which had a rate of only \$203.
- The ADA believes that a comprehensive fix to address OR access for dental surgeries also includes having ambulatory surgery centers (ASCs) provide these services. The ADA, AAPD, and AAOMS continue to advocate for allowing dental services to be billed as a covered procedure by ASCs. The G Code finalized in the rule takes a significant step forward at making ASC billing a reality, as the new code is eligible to be included on the ASC covered procedures list.

Monkeypox

- In October, dentists were given the nationwide authority under the Public Readiness and Emergency Preparedness (PREP) Act to administer monkeypox (now known as mpox) vaccines.

Health Resources and Services Administration

- Dr. Adam Barefoot was appointed in May as the HRSA Chief Dental Officer. HRSA oversees a range of programs that treat the underserved and train dentists, and the ADA had lobbied for the appointment of a Chief Dental Officer to oversee these important programs.

Postpartum Oral Health Coverage

- After lobbying by the ADA, CMS announced in September that people in all states who are enrolled in Medicaid will have dental coverage for 60 days postpartum.

State Government Affairs Accomplishments

- The ADA worked with Massachusetts Dental Society to secure a win on “Question 2,” which establishes an 83% medical loss ratio for dental plans along with a rebate if dental plans don’t meet that amount. The ADA staff was fully engaged in the support campaign, and shepherded the \$5.5 million dollar investment by the ADA to maximize effectiveness.
- Twenty-two state dental societies received State Public Affairs (SPA) funding to engage in third party payer issues on the state level. To date, there are 11 new laws in five states enacted in 2022 that improve the position of dentists and/or patients with regard to dental insurance.
- The Department of State Government Affairs provides technical assistance resources for state dental societies in several ways. For example, in 2022, at least 16 states sought DSGA’s feedback and advice on various provision of dental insurance reform bills. Almost half of these bills became law. Some of the issues in the bills were non-covered services, prior authorization, medical loss ratio/ rebates, and virtual credit cards.

American Dental Political Action Committee (ADPAC) Accomplishments

- Educated 400 dentists and students on advocacy and legislative issues during the 2022 ADA Dentist and Student Lobby Day.
- Held over 300 meetings with Members of Congress during the 2022 ADA Dentist and Student Lobby Day.
- In the 2022 Election Cycle, ADPAC spent \$1,750,000 and helped 283 candidates, including 42 first-time candidates.

Council on Advocacy for Access and Prevention (CAAP) Accomplishments

Prevention

- The ADA National Fluoridation Advisory Committee (NFAC) provided technical assistance in several states facing fluoridation challenges and also developed a formal media statement regarding perceived fluoridation “shortages” in summer 2022.

Access to Care Support

- ADA advocated for the Maryland House Bill 1082: Consumer Health Information Hub and Requirements which passed, making the University of Maryland Center for Health Literacy the state’s consumer health information hub.
- ADA assisted the IHS with integrating the Community Dental Health Coordinator (CDHC) program into their continuing education distance learning platform.