

March 17, 2022

The Honorable Diana DeGette  
U.S. House of Representatives  
2111 Rayburn House Office Building  
Washington, D.C. 20515

The Honorable Fred Upton  
U.S. House of Representatives  
2183 Rayburn House Office Building  
Washington, D.C. 20515

Dear Representatives DeGette and Upton:

On behalf of the 162,000 members of the American Dental Association (ADA), we are writing to thank you for introducing H.R. 6000, the Cures 2.0 Act. We are glad to see that many of the sections we supported in the draft bill are also included in H.R. 6000.

As Congress considers H.R. 6000, we offer the following additional comments.

Sec. 102, National Strategy to Prevent and Respond to Pandemics

It is important to develop a strategy to prepare for the next pandemic. Such a strategy should include ways to ensure that the problems that occurred during the COVID response do not happen again, including issues with testing and vaccine administration.

It is critical that dentistry be recognized as a viable resource in expanding the nation's medical surge capacity. For example, early in the COVID pandemic, federal officials granted pharmacists the ability to order and administer tests. Dentists were never granted that authority by the federal government, even though 24 states and the District of Columbia did so. In order to avoid these types of problems in the future, dentists need to be included in the Cures 2.0 Act as an essential part of the response strategy for future pandemics.

Additionally, dentists can administer vaccines, and this role should also be recognized in the Cures 2.0 Act. The Pandemic and All-Hazards Preparedness Act and the Federal Emergency Management Agency's National Response Framework both identify dentistry *by name* as a vital medical countermeasure. Having dentistry at the planning table early on—and being there in a *codified* way in the Cures 2.0 Act—will help ensure that this vital national resource is not overlooked.

Sec. 104, Vaccine and Immunization Programs

The ADA has worked to help dentists educate their patients about the need for vaccination against COVID. The public awareness campaign on vaccination described in this section would assist with that effort. This campaign should also raise awareness of the importance of vaccination against other diseases such as flu and HPV, as well as future pandemics.

Sec. 105, Developing Antibacterial Innovations

The ADA supports the prudent use of antibiotics to minimize the risk of adverse effects and the development of drug-resistant bacteria. Sec. 105 asks the Director of the Centers for

Disease Control and Prevention (CDC) to release a report on antibacterial prophylactics. Prophylactic antibiotics prior to dental treatment should be reserved for patients at high risk for post-treatment complications. We ask that the CDC include information on prophylactic antibiotics prior to dental procedures in this report.

Sec. 201, Educational Programs and Training for Caregivers

It is important to train caregivers on providing good oral health care to their aging, seriously ill, or disabled family member or friend. Congress should recognize the critical role caregivers play in oral health care by including oral health care in the list of training programs provided to caregivers under Sec. 201. This training should be provided to caregivers by Community Dental Health Coordinators (CDHCs). CDHCs are Community Health Workers who focus on oral health education and disease prevention.

Sec. 202, Increasing Health Literacy to Promote Better Outcomes for Patients

Identifying culturally competent, evidence-based interventions is critical to improving oral health. Congress should encourage the Centers for Medicare and Medicaid Services (CMS) to work with the ADA to develop best practices for oral health literacy, especially for the vulnerable populations served by Medicare, Medicaid, and Children's Health Insurance Program (CHIP).

Sec. 402, Strategies to Increase Access to Telehealth Under Medicaid and the Children's Health Insurance Program

Examinations performed using teledentistry can be an effective way to extend the reach of dental professionals and increase access to care. But the care must be consistent with that provided in person. The Medicaid and CHIP Payment and Access Commission should study teledentistry—including its effects on dental access, quality of care, and outcomes—in the report on telehealth required under Sec. 402.

Sec. 410, Generally Accepted Standard for Electronic Prescribing

The ADA requests that the standards maintenance organization designated in Sec. 410 consult with the ADA on the development of the standard for electronic prescribing. The ADA should be included in the multi-stakeholder forum led by the standards maintenance organization to ensure that the organization addresses dentists' questions and concerns when it comes to electronic prescribing.

Sec. 502, Research Investment to Spark the Economy

The ADA is a science-driven organization that agrees that scientific research and innovation are key to growing the economy. The funding provided in this section to the National Institutes of Health (NIH) will continue research that was disrupted by COVID, including oral health research at the National Institute of Dental and Craniofacial Research (NIDCR).

Thank you again for your efforts on the Cures 2.0 Act. The ADA looks forward to continuing to work with you on this legislation. Should you have any questions, please do not hesitate to contact Mr. Chris Tampio at [tampioc@ada.org](mailto:tampioc@ada.org).

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Sincerely,

Cesar R. Sabates, D.D.S.  
President

Raymond A. Cohlma, D.D.S.  
Executive Director

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