

113TH CONGRESS  
1ST SESSION

# H. R. 3120

To improve access to oral health care for vulnerable and underserved populations.

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## IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 18, 2013

Mr. CUMMINGS (for himself and Ms. SCHAKOWSKY) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, the Judiciary, Natural Resources, Veterans' Affairs, and Armed Services, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To improve access to oral health care for vulnerable and underserved populations.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the "Comprehensive Dental  
5 Reform Act of 2013".

6 **SEC. 2. TABLE OF CONTENTS.**

7 The table of contents of this Act is as follows:

Sec. 1. Short title.

Sec. 2. Table of contents.

Sec. 3. Findings.

TITLE I—MEDICARE AND MEDICAID

Subtitle A—Medicare

Sec. 101. Coverage of dental services under the Medicare program.

Subtitle B—Medicaid

Sec. 111. Coverage of dental services under the Medicaid program.

TITLE II—PUBLIC HEALTH PROGRAMS

Subtitle A—National Health Service Corps

Sec. 201. National Health Service Corps.

Sec. 202. Community based dental residencies.

Subtitle B—Oral Health Education

Sec. 211. Authorization of appropriations for oral health education for medical providers.

Sec. 212. Oral health education for other non-health professionals.

Sec. 213. Dental education.

Sec. 214. Oral health professional student loans.

Subtitle C—Other Oral Health Programs

Sec. 221. Access points.

Sec. 222. Dental clinics in schools.

Sec. 223. Emergency room care coordination.

Sec. 224. Research funding.

Sec. 225. Mobile and portable dental services.

Subtitle D—Oral Health Services as an Essential Health Benefit

Sec. 231. Oral health services as an essential health benefit.

TITLE III—DEPARTMENT OF VETERANS AFFAIRS AND  
DEPARTMENT OF DEFENSE MATTERS

Subtitle A—Department of Veterans Affairs Matters

Sec. 301. Requiring the Secretary of Veterans Affairs to furnish dental care in the same manner as any other medical service.

Sec. 302. Demonstration program on training and employment of alternative dental health care providers for dental health care services for veterans in rural and other underserved communities.

Subtitle B—Department of Defense Matters

Sec. 311. Demonstration program on training and employment of alternative dental health care providers for dental health care services for members of the Armed Forces and dependents lacking ready access to such services.

TITLE IV—FEDERAL BUREAU OF PRISONS

Sec. 401. Demonstration program on training and employment of alternative dental health care providers for dental health care services for prisoners within the custody of the Bureau of Prisons.

TITLE V—INDIAN HEALTH SERVICE

Sec. 501. Demonstration program on training and employment of alternative dental health care providers for dental health care services under the Indian Health Service.

TITLE VI—REPORTS TO CONGRESS

Sec. 601. Evaluation of expansion of coverage for dental services.

1 **SEC. 3. FINDINGS.**

2 Congress makes the following findings:

3 (1) The United States must establish a nation-  
4 wide and comprehensive approach to address the  
5 lack of access to needed dental care and reduce oral  
6 health disparities.

7 (2) Since 2000, when the Surgeon General of  
8 the United States called dental disease a “silent epi-  
9 demic”, there has been increasing but still insuffi-  
10 cient attention given to addressing oral health  
11 issues. The Healthy People 2020 initiative includes  
12 oral health as a leading health indicator for the first  
13 time in the history of the Healthy People program,  
14 and in 2011, the Institute of Medicine published 2  
15 reports, “Improving Access to Oral Health Care for  
16 Vulnerable and Underserved Populations” and “Ad-  
17 vancing Oral Health in America”, that focused on  
18 oral health.

19 (3) Dental caries, commonly known as cavities,  
20 are the most common chronic disease for children in

1 the United States. Additionally, 25 percent of Amer-  
2 ican adults who have attained 65 years of age have  
3 lost all of their teeth.

4 (4) Untreated oral health problems contribute  
5 to an increased risk for serious medical conditions  
6 such as diabetes, hospital-acquired pneumonia, and  
7 poor birth outcomes.

8 (5) According to a report by the Surgeon Gen-  
9 eral of the United States, students miss more than  
10 51,000,000 hours of school and employed adults lose  
11 more than 164,000,000 hours of work each year due  
12 to dental disease and dental visits.

13 (6) While the lack of access to oral health serv-  
14 ices is a national problem, those who are most likely  
15 to remain underserved are individuals with low in-  
16 comes, racial and ethnic minorities, pregnant  
17 women, older adults, individuals with special needs,  
18 and individuals living in rural communities.

19 (7) More than 1 in 4 Americans do not have  
20 dental health insurance which is far greater than the  
21 number of individuals who lack general health insur-  
22 ance.

23 (8) The Medicare program and the Department  
24 of Veterans Affairs do not provide dental coverage to  
25 the majority of their beneficiaries, and States can

1 elect whether to provide dental coverage to adults  
2 under the Medicaid program.

3 (9) Only 20 percent of practicing dentists in the  
4 United States provide care to individuals enrolled in  
5 Medicaid, and a very small percentage of dentists  
6 devote a substantial part of their practice towards  
7 caring for individuals who are underserved.

8 (10) The United States spends more than  
9 \$100,000,000,000 on dental care and that number  
10 is expected to rise to \$170,000,000,000 by 2020.  
11 Over \$30,000,000,000 dollars was spent out-of-pock-  
12 et for dental services in 2008.

13 (11) The lack of access to oral health services  
14 results in higher health care expenditures. In 2009,  
15 there were over 830,000 visits to emergency rooms  
16 across the United States for preventable dental con-  
17 ditions, which is 16 percent higher than in 2006.  
18 The treatment of dental conditions in hospital emer-  
19 gency rooms in 2010 cost as much as  
20 \$2,100,000,000.

1                   **TITLE I—MEDICARE AND**  
2                                   **MEDICAID**

3                                   **Subtitle A—Medicare**

4   **SEC. 101. COVERAGE OF DENTAL SERVICES UNDER THE**  
5                                   **MEDICARE PROGRAM.**

6           (a) **COVERAGE.**—Section 1861(s)(2) of the Social Se-  
7   curity Act (42 U.S.C. 1395x(s)(2)) is amended—

8                   (1) in subparagraph (EE), by striking “and”  
9           after the semicolon at the end;

10                   (2) in subparagraph (FF), by adding “and”  
11           after the semicolon at the end; and

12                   (3) by adding at the end the following new sub-  
13           paragraph:

14                   “(GG) dental services (as defined in subsection  
15           (iii));”.

16           (b) **DENTAL SERVICES DEFINED.**—Section 1861(s)  
17   of the Social Security Act (42 U.S.C. 1395x(s)) is amend-  
18   ed by adding at the end the following new subsection:

19                                   “Dental Services

20                   “(iii)(1) The term ‘dental services’ means oral health  
21   services (as defined by the Secretary) provided by a li-  
22   censed oral health care provider that are necessary to pre-  
23   vent disease and promote oral health, restore oral struc-  
24   tures to health and function, and treat emergency condi-  
25   tions.

1 “(2) For purposes of paragraph (1), such term shall  
2 include mobile and portable oral health services (as de-  
3 fined by the Secretary) that—

4 “(A) are provided for the purpose of over-  
5 coming mobility, transportation, and access barriers  
6 for individuals; and

7 “(B) satisfy the standards and certification re-  
8 quirements established under section 1902(a)(84)(B)  
9 for the State in which the services are provided.”.

10 (c) PAYMENT AND COINSURANCE.—Section  
11 1833(a)(1) of the Social Security Act (42 U.S.C.  
12 1395l(a)(1)) is amended—

13 (1) by striking “and” before “(Z)”; and

14 (2) by inserting before the semicolon at the end  
15 the following: “, and (AA) with respect to dental  
16 services (as defined in section 1861(iii)), the amount  
17 paid shall be (i) in the case of such services that are  
18 dental health preventive services described in para-  
19 graph (1)(D) of such section, 100 percent of the  
20 lesser of the actual charge for the services or the  
21 amount determined under the payment basis deter-  
22 mined under section 1848, and (ii) in the case of all  
23 other such services, 80 percent of the lesser of the  
24 actual charge for the services or the amount deter-

1 mined under the payment basis determined under  
2 section 1848”.

3 (d) PAYMENT UNDER PHYSICIAN FEE SCHEDULE.—  
4 Section 1848(j)(3) of the Social Security Act (42 U.S.C.  
5 1395w-4(j)(3)) is amended by inserting “(2)(GG),” after  
6 “risk assessment),”.

7 (e) DENTURES.—Section 1861(s)(8) of the Social Se-  
8 curity Act (42 U.S.C. 1395x(s)(8)) is amended—

9 (1) by striking “(other than dental)” and in-  
10 serting “(including dentures)”;

11 (2) by striking “internal body”.

12 (f) REPEAL OF GROUND FOR EXCLUSION.—Section  
13 1862(a) of the Social Security Act (42 U.S.C. 1395y) is  
14 amended by striking paragraph (12).

15 (g) EFFECTIVE DATE.—The amendments made by  
16 this section shall apply to services furnished on or after  
17 January 1, 2014.

## 18 **Subtitle B—Medicaid**

### 19 **SEC. 111. COVERAGE OF DENTAL SERVICES UNDER THE** 20 **MEDICAID PROGRAM.**

21 (a) IN GENERAL.—Section 1905 of the Social Secu-  
22 rity Act (42 U.S.C. 1396d) is amended—

23 (1) in subsection (a)(10), by adding “(as de-  
24 scribed in subsection (ee)(1))” after “dental serv-  
25 ices”; and



1 (2) by adding at the end the following:

2 “(ee)(1) Subject to paragraphs (2) and (3), for pur-  
3 poses of this title, the term ‘dental services’ means oral  
4 health services (as defined by the Secretary) provided by  
5 a licensed oral health care provider that are necessary to  
6 prevent disease and promote oral health, restore oral  
7 structures to health and function, and treat emergency  
8 conditions.

9 “(2) For purposes of paragraph (1), such term shall  
10 include—

11 “(A) dentures; and

12 “(B) mobile and portable oral health services  
13 (as defined by the Secretary) that—

14 “(i) are provided for the purpose of over-  
15 coming mobility, transportation, and access bar-  
16 riers for individuals; and

17 “(ii) satisfy the standards and certification  
18 requirements established under section  
19 1902(a)(82)(C) for the State in which the serv-  
20 ices are provided.

21 “(3) For purposes of paragraph (1), such term shall  
22 not apply to dental care or services provided to individuals  
23 under the age of 21 under subsection (r)(3).”.

24 (b) CONFORMING AMENDMENTS.—

1           (1) STATE PLAN REQUIREMENTS.—Section  
2           1902(a) of such Act (42 U.S.C. 1396a(a)) is amend-  
3           ed—

4                   (A) in paragraph (10)(A), in the matter  
5           preceding clause (i), by inserting “(10),” after  
6           “(5),”;

7                   (B) in paragraph (80), by striking “and”  
8           at the end;

9                   (C) in paragraph (81), by striking the pe-  
10          riod at the end and inserting “; and”; and

11                  (D) by inserting after paragraph (81) the  
12          following:

13          “(82) provide for—

14                   “(A) informing, in writing, all individuals  
15          who have been determined to be eligible for  
16          medical assistance of the availability of dental  
17          services (as defined in section 1905(ee));

18                   “(B) conducting targeted outreach to preg-  
19          nant women who have been determined to be el-  
20          igible for medical assistance about the avail-  
21          ability of medical assistance for such dental  
22          services and the importance of receiving dental  
23          care while pregnant; and

24                   “(C) establishing and maintaining stand-  
25          ards for and certification of mobile and portable

1 oral health services (as described in subsections  
2 (r)(3)(C) and (ee)(2)(B) of section 1905).”.

3 (2) DEFINITION OF MEDICAL ASSISTANCE.—

4 Section 1905(a)(12) of such Act (42 U.S.C.  
5 1396d(a)(12)) is amended by striking “, dentures,”.

6 (c) MOBILE AND PORTABLE ORAL HEALTH SERV-  
7 ICES UNDER EPSDT.—Section 1905(r)(3) of the Social  
8 Security Act (42 U.S.C. 1396d(r)(3)) is amended—

9 (1) in subparagraph (A)(ii), by striking “; and”  
10 and inserting a semicolon;

11 (2) in subparagraph (B), by striking the period  
12 at the end and inserting “; and”; and

13 (3) by adding at the end the following new sub-  
14 paragraph:

15 “(C) which shall include mobile and portable  
16 oral health services (as defined by the Secretary)  
17 that—

18 “(i) are provided for the purpose of over-  
19 coming mobility, transportation, or access bar-  
20 riers for children; and

21 “(ii) satisfy the standards and certification  
22 requirements established under section  
23 1902(a)(82)(C) for the State in which the serv-  
24 ices are provided.”.

1 (d) INCREASED FEDERAL FUNDING FOR DENTAL  
2 SERVICES.—

3 (1) IN GENERAL.—Section 1905 of the Social  
4 Security Act (42 U.S.C. 1396d), as amended by sub-  
5 section (a), is amended—

6 (A) in subsection (b), in the first sentence,  
7 by striking “and (aa)” and inserting “(aa), and  
8 (ff)”; and

9 (B) by adding at the end the following new  
10 subsection:

11 “(ff) INCREASED FMAP FOR DENTAL SERVICES.—

12 “(1) IN GENERAL.—Notwithstanding subsection  
13 (b) and section 1903(a)(7) and subject to the re-  
14 quirements described in paragraphs (3) and (4),  
15 with respect to amounts expended on or after Janu-  
16 ary 1, 2014, for covered dental expenses (as de-  
17 scribed in paragraph (2)), the Federal medical as-  
18 sistance percentage for a State that is one of the 50  
19 States or the District of Columbia for such expenses  
20 shall be equal to the Federal medical assistance per-  
21 centage that would otherwise apply to the State for  
22 the fiscal year, as determined under subsection (b)  
23 or section 1903(a)(7), increased by 15 percentage  
24 points.

1           “(2) COVERED DENTAL EXPENSES.—For pur-  
2           poses of paragraph (1), the term ‘covered dental ex-  
3           penses’ means the amounts expended for medical as-  
4           sistance for dental services (as described in sub-  
5           section (ee)) and amounts expended for the proper  
6           and efficient administration of the provision of such  
7           dental services under the State plan.

8           “(3) REQUIREMENTS.—For purposes of para-  
9           graph (1), the Federal medical assistance percentage  
10          applicable to covered dental expenses under this sub-  
11          section shall not apply to a State unless—

12                   “(A) the State plan for medical assistance  
13                   provides payment for dental services (as so de-  
14                   fined) furnished by a dental provider at a rate  
15                   that is not less than 70 percent of the usual  
16                   and customary fee for such services in the  
17                   State; and

18                   “(B) the State satisfies such additional re-  
19                   quirements as are established by the Secretary,  
20                   which shall include—

21                           “(i) streamlining of administrative  
22                           procedures for purposes of ensuring ade-  
23                           quate provider participation and increasing  
24                           patient utilization of dental services; and

1           “(ii) the provision of technical assist-  
2           ance to dental providers designed to reduce  
3           the number of missed patient appoint-  
4           ments and reduce other barriers to the de-  
5           livery of oral health services.

6           “(4) LIMITATION.—For purposes of amounts  
7           expended for covered dental services, in no case shall  
8           any increase under this subsection result in a Fed-  
9           eral medical assistance percentage that exceeds 100  
10          percent.”.

11          (2) CONFORMING AMENDMENT.—Section  
12          1903(a)(7) of the Social Security Act (42 U.S.C.  
13          1396b(a)(7)) is amended by striking “section  
14          1919(g)(3)(B)” and inserting “sections 1905(ff) and  
15          1919(g)(3)(B)”.

16          (e) SECRETARIAL RESPONSIBILITIES.—

17          (1) TECHNICAL ASSISTANCE AND OUTREACH.—  
18          The Secretary of Health and Human Services, act-  
19          ing through the Administrator of the Centers for  
20          Medicare & Medicaid Services, shall provide tech-  
21          nical assistance to States and conduct outreach to  
22          States for purposes of educating and encouraging  
23          States to utilize and provide payment under each  
24          State Medicaid program for telehealth-enabled den-  
25          tal services in order to provide dental services to tra-

1       ditionally underserved populations in need of such  
2       services.

3               (2) DATABASE AND ANNUAL REPORT ON DEN-  
4       TAL BENEFITS FOR ADULT MEDICAID ENROLLEES.—

5               (A) MEDICAID DENTAL BENEFITS DATA-

6       BASE.—The Secretary of Health and Human

7       Services, acting through the Administrator of

8       the Centers for Medicare & Medicaid Services,

9       shall maintain, as accurately and up-to-date as

10       possible, a database that contains with respect

11       to the each State (as defined for purposes of

12       title XIX of the Social Security Act (42 U.S.C.

13       1396 et seq.)) information regarding the dental

14       benefits available for adults enrolled in the

15       State Medicaid program, including any limits

16       on such benefits and the amount of reimburse-

17       ment provided under the State Medicaid pro-

18       gram for such benefits. The database also shall

19       include a separate description of the dental ben-

20       efits, benefit limits, and amount of reimburse-

21       ment provided under each State Medicaid pro-

22       gram for pregnant women, if such benefits are

23       not provided to the woman as part of early and

24       periodic screening, diagnostic, and treatment

25       services (as defined in section 1905(r) of the

1 Social Security Act (42 U.S.C. 1396d(r))), and  
2 a description of the use of dental services by  
3 children and adults enrolled in the State Med-  
4 icaid program.

5 (B) ANNUAL REPORT.—The Secretary of  
6 Health and Human Services shall make avail-  
7 able to the public an annual report regarding  
8 the information collected in the database re-  
9 quired under subparagraph (A). Each annual  
10 report under this subparagraph shall include for  
11 each State Medicaid program and with respect  
12 to the most recent year for which data are  
13 available the yearly dental service utilization  
14 rates for children and adults enrolled in the  
15 State Medicaid program.

16 (f) EFFECTIVE DATE.—

17 (1) IN GENERAL.—Except as provided in para-  
18 graph (2), the amendments made by this section  
19 shall apply to calendar quarters beginning on or  
20 after January 1, 2014, without regard to whether or  
21 not final regulations to carry out such amendments  
22 have been promulgated by such date.

23 (2) DELAY PERMITTED FOR STATE PLAN  
24 AMENDMENT.—In the case of a State plan for med-  
25 ical assistance under title XIX of the Social Security



1 Act which the Secretary of Health and Human Serv-  
2 ices determines requires State legislation (other than  
3 legislation appropriating funds) in order for the plan  
4 to meet the additional requirements imposed by the  
5 amendments made by this section, the State plan  
6 shall not be regarded as failing to comply with the  
7 requirements of such title solely on the basis of its  
8 failure to meet these additional requirements before  
9 the first day of the first calendar quarter beginning  
10 after the close of the first regular session of the  
11 State legislature that begins after the date of enact-  
12 ment of this Act. For purposes of the previous sen-  
13 tence, in the case of a State that has a 2-year legis-  
14 lative session, each year of such session shall be  
15 deemed to be a separate regular session of the State  
16 legislature.

17 **TITLE II—PUBLIC HEALTH**  
18 **PROGRAMS**

19 **Subtitle A—National Health**  
20 **Service Corps**

21 **SEC. 201. NATIONAL HEALTH SERVICE CORPS.**

22 (a) IN GENERAL.—Section 331 of the Public Health  
23 Service Act (42 U.S.C. 254d) is amended—

24 (1) in subsection (a)(3), by adding at the end  
25 the following:

1           “(F) The term ‘dental therapist’ means,  
2           with respect to a State that licenses such dental  
3           therapists, a mid-level dental practitioner who is  
4           licensed to practice under the law of the State  
5           and who provides preventive and restorative  
6           services directly to the public, commensurate  
7           with the scope of the practice.”; and

8           (2) in subsection (b)—

9                   (A) in paragraph (1), by inserting “, den-  
10           tal therapy,” after “dental”; and

11                   (B) in paragraph (2), by inserting “dental  
12           therapists,” after “dentists,”.

13           (b) FACILITATION OF EFFECTIVE PROVISION OF  
14   CORPS SERVICES.—Section 336(f)(3) of the Public Health  
15   Service Act (42 U.S.C. 254h-1(f)(3)) is amended by in-  
16   serting “dental therapists” after “midwives,”.

17           (c) SCHOLARSHIP PROGRAM AND LOAN REPAYMENT  
18   PROGRAM.—

19                   (1) SCHOLARSHIP PROGRAM.—Section 338A of  
20   the Public Health Service Act (42 U.S.C. 254l) is  
21   amended—

22                   (A) in subsection (a)(1), by inserting “den-  
23   tal therapists,” after “dentists,”; and

1 (B) in subsection (b)(1), by inserting “in-  
2 cluding dental therapy,” after “or other health  
3 profession,”.

4 (2) LOAN REPAYMENT PROGRAM.—Section  
5 338B of the Public Health Service Act (42 U.S.C.  
6 254l–1) is amended—

7 (A) in subsection (a)(1), by inserting “den-  
8 tal therapists,” after “dentists,”; and

9 (B) in subsection (b)(1)—

10 (i) in subparagraph (A), by inserting  
11 “dental therapist,” after “nurse practi-  
12 tioner,”;

13 (ii) in subparagraph (B), by inserting  
14 “dental therapy,” after “mental health,”;  
15 and

16 (iii) in subparagraph (C)(ii), by in-  
17 serting “, including dental therapy,” after  
18 “health profession”.

19 (3) AUTHORIZATION OF APPROPRIATIONS.—  
20 Section 338H of the Public Health Service Act (42  
21 U.S.C. 254q) is amended—

22 (A) in subsection (a), by striking “this sec-  
23 tion” and inserting “this subpart”; and

24 (B) by adding at the end the following:

1       “(d) AUTHORIZATION OF APPROPRIATIONS WITH  
2 RESPECT TO ORAL HEALTH PROFESSIONALS.—To carry  
3 out this subpart with respect to dentists, dental therapists,  
4 and dental hygienists, in addition to the amounts author-  
5 ized under subsection (a), there is authorized to be appro-  
6 priated such sums as may be necessary for fiscal years  
7 2014 through 2017, which shall be used to provide an  
8 emergency expansion for scholarships to, and loan repay-  
9 ments on behalf of, such oral health professionals.”.

10 **SEC. 202. COMMUNITY BASED DENTAL RESIDENCIES.**

11       Section 340H of the Public Health Service Act (42  
12 U.S.C. 256h) is amended by adding at the ending the fol-  
13 lowing:

14       “(k) ADDITIONAL FUNDING.—For the purpose of ex-  
15 panding the program under this section, there is author-  
16 ized to be appropriated such sums as may be necessary  
17 for the 5-year period beginning with the fiscal year that  
18 begins not less than 1 year and not more than 2 years  
19 after the date of enactment of the Comprehensive Dental  
20 Reform Act of 2013”.

1 **Subtitle B—Oral Health Education**

2 **SEC. 211. AUTHORIZATION OF APPROPRIATIONS FOR ORAL**  
3 **HEALTH EDUCATION FOR MEDICAL PRO-**  
4 **VIDERS.**

5 Section 747(c) of the Public Health Service Act (42  
6 U.S.C. 293k(c)) is amended by adding at the end the fol-  
7 lowing:

8 “(4) ORAL HEALTH EDUCATION.—In addition  
9 to other amounts authorized under this subsection  
10 for purposes of carrying out this section, there is au-  
11 thORIZED to be appropriated such sums as may be  
12 necessary for fiscal years 2014 through 2017 for the  
13 purpose of educating nondental medical profes-  
14 sionals, including physicians, nurses, nurse practi-  
15 tioners, physician assistants, and pharmacists, about  
16 oral health, including issues such as oral hygiene in-  
17 struction, topical application of fluoride, and oral  
18 health screenings, with the goal of integrating oral  
19 health care into overall health care.”.

20 **SEC. 212. ORAL HEALTH EDUCATION FOR OTHER NON-**  
21 **HEALTH PROFESSIONALS.**

22 Subpart I of part C of title VII of the Public Health  
23 Service Act (42 U.S.C. 293k et seq.) is amended by insert-  
24 ing after section 748 the following:

1 **“SEC. 748A. ORAL HEALTH EDUCATION FOR OTHER NON-**  
2 **ORAL HEALTH PROFESSIONALS.**

3 “(a) IN GENERAL.—The Secretary may make grants  
4 to, or enter into contracts with, an accredited public or  
5 nonprofit private hospital, an educational institution, or  
6 a public or private nonprofit entity which the Secretary  
7 has determined is capable of carrying out such grant or  
8 contract to educate individuals, such as community health  
9 workers, social workers, nutritionists, health educators,  
10 occupational therapists, and psychologists, to promote oral  
11 health education and literacy and to provide support for  
12 behavior change and assistance with care coordination  
13 with respect to oral health.

14 “(b) AUTHORIZATION OF APPROPRIATIONS.—To  
15 carry out this section, there is authorized to be appro-  
16 priated such sums as may be necessary for fiscal years  
17 2014 through 2017.”.

18 **SEC. 213. DENTAL EDUCATION.**

19 Section 748 of the Public Health Service Act (42  
20 U.S.C. 293k–2) is amended—

21 (1) in subsection (a)(1)(H), by striking “pedi-  
22 atric training programs” and inserting “pediatric  
23 dental training programs”; and

24 (2) in subsection (c)—

25 (A) by striking the subsection heading and  
26 inserting “REQUIREMENTS FOR AWARD.—”;

1 (B) by amending the matter preceding  
2 paragraph (1) to read as follows: “With respect  
3 to training provided for under this section, the  
4 Secretary shall award grants or contracts only  
5 to eligible entities that meet at least 7 of the  
6 following criteria.”;

7 (C) in paragraph (2), by striking “have a  
8 record of training the greatest percentage of  
9 providers, or that have demonstrated significant  
10 improvements in the percentage of providers,  
11 who enter and” and inserting “train significant  
12 numbers of providers who”;

13 (D) in paragraph (3)—

14 (i) by striking “have a record of train-  
15 ing” and inserting “intent to train”; and

16 (ii) by striking the period at the end  
17 and inserting “and have faculty with expe-  
18 rience in treating underserved popu-  
19 lations.”;

20 (E) in paragraph (8), by inserting “or  
21 have established” after “establish”; and

22 (F) by adding at the end the following:

23 “(9) Qualified applicants that require not less  
24 than 200 hours of community-based education rota-  
25 tions.”.

1 **SEC. 214. ORAL HEALTH PROFESSIONAL STUDENT LOANS.**

2 Part F of title VII of the Public Health Service Act  
3 (42 U.S.C. 295j) is amended by adding at the end the  
4 following:

5 **“SEC. 799C. ORAL HEALTH PROFESSIONAL STUDENT**  
6 **LOANS.**

7 “(a) IN GENERAL.—The Secretary shall establish  
8 and operate a student loan fund for oral health profes-  
9 sional students, including dental hygienists, dental thera-  
10 pists, and dentists.

11 “(b) CONTENT.—The Secretary shall establish and  
12 operate the student loan fund program under subsection  
13 (a) in the same manner and subject to the same terms  
14 as the loan fund program established with schools of nurs-  
15 ing under section 835.

16 “(c) AUTHORIZATION OF APPROPRIATIONS.—To  
17 carry out this section, there are authorized to be appro-  
18 priated such sums as may be necessary for fiscal years  
19 2014 through 2017.”.

20 **Subtitle C—Other Oral Health**  
21 **Programs**

22 **SEC. 221. ACCESS POINTS.**

23 Subpart X of part D of title III of the Public Health  
24 Service Act (42 U.S.C. 256f et seq.) is amended by adding  
25 at the end the following:



1 **“SEC. 340G-2. FUNDING FOR ORAL HEALTH SERVICES.**

2       “(a) IN GENERAL.—The Secretary, acting through  
3 the Administrator of the Health Resources and Services  
4 Administration, shall establish a program to award grants  
5 to eligible entities to provide oral health services, or to con-  
6 tract with private dental practices to provide comprehen-  
7 sive oral health services, to low income individuals and in-  
8 dividuals who are underserved with respect to oral health  
9 care.

10       “(b) TECHNICAL ASSISTANCE.—The Secretary shall  
11 provide technical assistance to entities receiving grants  
12 under subsection (a) to provide technical assistance to  
13 such entities in order to—

14               “(1) with respect to oral health care services,  
15 increase utilization and efficiency and minimize  
16 missed appointments, contract with offsite providers,  
17 recruit providers (including oral health specialists),  
18 and operate programs outside the physical facilities  
19 to take advantage of new systems to improve access  
20 to oral health services;

21               “(2) address barriers to access to such services  
22 and conduct targeted outreach to special populations  
23 such as pregnant women, individuals with disabili-  
24 ties, individuals with chronic conditions such as dia-  
25 betes, and individuals residing in long-term care fa-  
26 cilities; or

1           “(3) contract with private dental practices that  
2 will provide oral health services other than preven-  
3 tive oral health care, including restoration and main-  
4 tenance of oral health, in order to meet the need for  
5 oral health services in the community.

6           “(c) ELIGIBLE ENTITIES.—To be eligible to receive  
7 a grant under subsection (a), an entity shall—

8           “(1) be—

9           “(A) a Federally qualified health center  
10 (as defined in section 1861(aa) of the Social  
11 Security Act);

12           “(B) a safety net clinic or a free clinic (as  
13 defined by the Secretary);

14           “(C) a health care clinic that provides  
15 services to tribal organizations or urban Indian  
16 organizations (as such terms are defined in sec-  
17 tion 4 of the Indian Health Care Improvement  
18 Act); or

19           “(D) any other interested public or private  
20 sector health care provider or organization that  
21 the Secretary determines has a demonstrated  
22 history in serving a high number of uninsured  
23 and or low-income individuals or those who lack  
24 ready access to oral health services; and

1           “(2) demonstrate a clear need to expand oral  
2           health care services beyond preventive oral health  
3           care.

4           “(d) ALLOCATION FOR HIRING ORAL HEALTH CARE  
5           SPECIALISTS.—A portion of the funds available under this  
6           section shall be allocated toward hiring oral health care  
7           specialists, such as oral surgeons and endodontists, at en-  
8           tities receiving grants under this section.

9           “(e) AUTHORIZATION OF APPROPRIATIONS.—To  
10          carry out this section, there is authorized to be appro-  
11          priated such sums as may be necessary for each of fiscal  
12          years 2014 through 2017.”.

13       **SEC. 222. DENTAL CLINICS IN SCHOOLS.**

14          Part Q of title III of the Public Health Service Act  
15          (42 U.S.C. 280h et seq.) is amended by adding at the end  
16          the following:

17       **“SEC. 399Z-2. DENTAL CLINICS IN SCHOOLS.**

18          “(a) IN GENERAL.—The Secretary shall award  
19          grants to qualified entities for the purpose of funding the  
20          building, operation, or expansion of dental clinics in  
21          schools.

22          “(b) QUALIFIED ENTITIES.—To receive a grant  
23          under this section, a qualified entity shall submit an appli-  
24          cation to the Secretary at such time, in such manner, and  
25          containing such information as the Secretary may require.

1       “(c) REQUIREMENTS.—An entity receiving a grant  
2 under this section shall—

3           “(1) provide comprehensive oral health services  
4 at a dental clinic based at a school, including oral  
5 health education, oral screening, fluoride application,  
6 prophylaxis, sealants, and basic restorative services;

7           “(2) develop a coordinated system of care by re-  
8 ferring patients to an available qualified oral health  
9 provider in the community for any required oral  
10 health services not provided in the dental clinic in  
11 the school, including restorative services, to ensure  
12 that all the oral health needs of students are met;  
13 and

14           “(3) maintain clinic hours that extend beyond  
15 school hours.

16       “(d) AUTHORIZATION OF APPROPRIATIONS.—For  
17 purposes of carrying out this section, there is authorized  
18 to be appropriated such sums as may be necessary for fis-  
19 cal years 2014 through 2017.”.

20 **SEC. 223. EMERGENCY ROOM CARE COORDINATION.**

21       Part B of title III of the Public Health Service Act  
22 (42 U.S.C. 243 et seq.) is amended by adding at the end  
23 the following:

1 **“SEC. 320B. EMERGENCY ROOM CARE COORDINATION WITH**  
2 **RESPECT TO DENTAL CARE.**

3 “(a) IN GENERAL.—The Secretary, acting through  
4 the Administrator of the Health Resources and Services  
5 Administration, shall establish a grant program to enable  
6 individuals to receive dental care at a facility operated by  
7 a grant recipient rather than at a hospital emergency  
8 room.

9 “(b) ELIGIBLE ENTITIES.—To be eligible to receive  
10 a grant under this section an entity shall—

11 “(1) be—

12 “(A) a Federally qualified health center  
13 (as defined in paragraph (4) of section  
14 1861(aa) of the Social Security Act) or rural  
15 health clinic (as defined in paragraph (2) of  
16 such section);

17 “(B) a private dental practice; or

18 “(C) any other interested public or private  
19 sector health care provider or organization,  
20 such as a dental school, that the Secretary de-  
21 termines has the capacity to serve in a coordi-  
22 nated, cost-effective manner, a high number of  
23 individuals who lack access to oral health serv-  
24 ices; and

25 “(2) partner with a hospital or urgent care cen-  
26 ter.

1           “(c) ORAL HEALTH EDUCATION FOR PRIMARY CARE  
2 AND ER HEALTH CARE PROVIDERS.—The Secretary shall  
3 allocate a portion of the amounts appropriated under sub-  
4 section (e) toward medical education for primary care and  
5 emergency room physicians, nurses, nurse practitioners,  
6 physician assistants, and nurse practitioners to be trained  
7 in oral health.

8           “(d) REPORT.—Not later than January 1, 2017, the  
9 Secretary shall submit to Congress a report on the best  
10 practices determined by the program established under  
11 this section to address oral health needs of individuals who  
12 go to emergency rooms in need of oral health care.

13           “(e) AUTHORIZATION OF APPROPRIATIONS.—To  
14 carry out this section, there is authorized to be appro-  
15 priated such sums as may be necessary for fiscal years  
16 2014 through 2017.”.

17 **SEC. 224. RESEARCH FUNDING.**

18           For fiscal years 2014 through 2017, there is author-  
19 ized to be appropriated such sums as may be necessary  
20 to each of—

21                   (1) the Centers for Disease Control and Preven-  
22                   tion, for the purpose of conducting research on—

23                                   (A) the prevention of oral disease;

24                                   (B) oral disease management; and

1 (C) evidence-based strategies to prevent  
2 tooth decay;

3 (2) the Agency for Healthcare Research and  
4 Quality, for the purpose of conducting—

5 (A) research with respect to oral health  
6 services and the delivery of oral health services;  
7 and

8 (B) an evaluation of oral health service de-  
9 livery to underserved and vulnerable popu-  
10 lations;

11 (3) the National Institute of Dental and  
12 Craniofacial Research for the purpose of conducting  
13 research on oral health disease management includ-  
14 ing pharmaceutical-behavioral intervention; and

15 (4) the Maternal and Child Health Bureau for  
16 the purpose of conducting research on perinatal,  
17 postnatal, and childhood oral health issues.

18 **SEC. 225. MOBILE AND PORTABLE DENTAL SERVICES.**

19 Subpart X of part D of title III of the Public Health  
20 Service Act (42 U.S.C. 256f et seq.), as amended by sec-  
21 tion 221, is further amended by adding at the end the  
22 following:

23 **“SEC. 340G-3. MOBILE AND PORTABLE DENTAL SERVICES.**

24 “(a) IN GENERAL.—The Secretary shall award  
25 grants to Federally qualified health centers (as defined in

1 paragraph (4) of section 1861(aa) of the Social Security  
2 Act), rural health clinics (as defined in paragraph (2) of  
3 such section), nonprofit dental clinics, and dental schools  
4 to provide mobile and portable, comprehensive dental serv-  
5 ices that provide for the restoration or maintenance of oral  
6 health and function (including dental services provided by  
7 licensed providers through telehealth-enabled collaboration  
8 and supervision) and outreach for dental services to un-  
9 derserved populations. Eligible entities shall deliver such  
10 services at locations such as senior centers, nursing  
11 homes, assisted living facilities, schools, licensed day care  
12 centers that serve eligible individuals who receive benefits  
13 under the State Children’s Health Insurance Program  
14 under title XXI of the Social Security Act (42 U.S.C.  
15 1397aa et seq.) or the Medicaid program under title XIX  
16 of the Social Security Act (42 U.S.C. 1396 et seq.), and  
17 facilities that provide services under the Special Supple-  
18 mental Nutrition Program for Women, Infants, and Chil-  
19 dren (the WIC program) or the Head Start Act (42 U.S.C.  
20 9831 et seq.). The Secretary shall award the grants to  
21 entities that can provide coordinated care and continuity  
22 of care.

23 “(b) AUTHORIZATION OF APPROPRIATIONS.—To  
24 carry out this section, there are authorized to be appro-  
25 priated such sums as may be necessary.”.



1 **Subtitle D—Oral Health Services as**  
2 **an Essential Health Benefit**

3 **SEC. 231. ORAL HEALTH SERVICES AS AN ESSENTIAL**  
4 **HEALTH BENEFIT.**

5 Section 1302(b)(1) of the Patient Protection and Af-  
6 fordable Care Act (42 U.S.C. 18022(b)(1)) is amended by  
7 adding at the end the following:

8 “(K) Oral health services.”.

9 **TITLE III—DEPARTMENT OF**  
10 **VETERANS AFFAIRS AND DE-**  
11 **PARTMENT OF DEFENSE MAT-**  
12 **TERS**

13 **Subtitle A—Department of**  
14 **Veterans Affairs Matters**

15 **SEC. 301. REQUIRING THE SECRETARY OF VETERANS AF-**  
16 **FAIRS TO FURNISH DENTAL CARE IN THE**  
17 **SAME MANNER AS ANY OTHER MEDICAL**  
18 **SERVICE.**

19 (a) IN GENERAL.—Title 38, United States Code, is  
20 amended—

21 (1) in section 1701(6), by striking “as de-  
22 scribed in sections 1710 and 1712 of this title”;

23 (2) in section 1710(c), by striking the second  
24 sentence;

25 (3) in section 1712—

1 (A) by striking subsections (a) and (b);

2 (B) by redesignating subsections (c), (d),  
3 and (e) as subsections (a), (b), and (c), respec-  
4 tively; and

5 (C) in subsection (a), as redesignated by  
6 subparagraph (B)—

7 (i) by striking “Dental appliances”  
8 and inserting “The Secretary may furnish  
9 dentures, dental appliances”; and

10 (ii) by striking “to be furnished by the  
11 Secretary under this section may be pro-  
12 cured by the Secretary” and inserting  
13 “under this section and may procure such  
14 appliances”; and

15 (4) by striking section 2062.

16 (b) CONFORMING AMENDMENTS.—Such title is fur-  
17 ther amended—

18 (1) in section 1525(a), by striking “medicines  
19 under section 1712(d)” and inserting “medicines  
20 under section 1712(b)”; and

21 (2) in section 1703(a)(7), by striking “, for a  
22 veteran described in section 1712(a)(1)(F) of this  
23 title”.

24 (c) CLERICAL AMENDMENTS.—Such title is further  
25 amended—

1 (1) in section 1712, in the heading for such sec-  
2 tion, by striking “**Dental care**” and inserting  
3 “**Appliances**”;

4 (2) in the table of sections at the beginning of  
5 chapter 17, by striking the item relating to section  
6 1712 and inserting the following new item:

“1712. Appliances; drugs and medicines for certain disabled veterans; vac-  
cines.”;

7 and

8 (3) in the table of sections at the beginning of  
9 chapter 20, by striking the item relating to section  
10 2062.

11 **SEC. 302. DEMONSTRATION PROGRAM ON TRAINING AND**  
12 **EMPLOYMENT OF ALTERNATIVE DENTAL**  
13 **HEALTH CARE PROVIDERS FOR DENTAL**  
14 **HEALTH CARE SERVICES FOR VETERANS IN**  
15 **RURAL AND OTHER UNDERSERVED COMMU-**  
16 **NITIES.**

17 (a) DEMONSTRATION PROGRAM AUTHORIZED.—The  
18 Secretary of Veterans Affairs may carry out a demonstra-  
19 tion program to establish programs to train and employ  
20 alternative dental health care providers in order to in-  
21 crease access to dental health care services for veterans  
22 entitled to such services who reside in rural and other un-  
23 derserved communities.

1           (b) TELEHEALTH.—For purposes of alternative den-  
2 tal health care providers and any other dental care pro-  
3 viders who are licensed to provide clinical care, dental  
4 services provided under the demonstration program under  
5 this section may be administered by such providers  
6 through telehealth-enabled collaboration and supervision  
7 when deemed appropriate and feasible.

8           (c) ALTERNATIVE DENTAL HEALTH CARE PRO-  
9 VIDERS DEFINED.—In this section, the term “alternative  
10 dental health care providers” has the meaning given that  
11 term in section 340G–1(a)(2) of the Public Health Service  
12 Act (42 U.S.C. 256g–1(a)(2)).

13           (d) AUTHORIZATION OF APPROPRIATIONS.—There  
14 are authorized to be appropriated such sums as are nec-  
15 essary to carry out the demonstration program under this  
16 section.

1 **Subtitle B—Department of Defense**  
2 **Matters**

3 **SEC. 311. DEMONSTRATION PROGRAM ON TRAINING AND**  
4 **EMPLOYMENT OF ALTERNATIVE DENTAL**  
5 **HEALTH CARE PROVIDERS FOR DENTAL**  
6 **HEALTH CARE SERVICES FOR MEMBERS OF**  
7 **THE ARMED FORCES AND DEPENDENTS**  
8 **LACKING READY ACCESS TO SUCH SERVICES.**

9 (a) DEMONSTRATION PROGRAM AUTHORIZED.—The  
10 Secretary of Defense may carry out a demonstration pro-  
11 gram to establish programs to train and employ alter-  
12 native dental health care providers in order to increase ac-  
13 cess to dental health care services for members of the  
14 Armed Forces and their dependents who lack ready access  
15 to such services, including the following:

16 (1) Members and dependents who reside in  
17 rural areas or areas otherwise underserved by dental  
18 health care providers.

19 (2) Members of the National Guard and Re-  
20 serves in active status who are potentially  
21 deployable.

22 (b) TELEHEALTH.—For purposes of alternative den-  
23 tal health care providers and any other dental care pro-  
24 viders who are licensed to provide clinical care, dental  
25 services provided under the demonstration program under

1 this section may be administered by such providers  
2 through telehealth-enabled collaboration and supervision  
3 when deemed appropriate and feasible.

4 (c) ALTERNATIVE DENTAL HEALTH CARE PRO-  
5 VIDERS DEFINED.—In this section, the term “alternative  
6 dental health care providers” has the meaning given that  
7 term in section 340G–1(a)(2) of the Public Health Service  
8 Act (42 U.S.C. 256g–1(a)(2)).

9 (d) AUTHORIZATION OF APPROPRIATIONS.—There  
10 are authorized to be appropriated such sums as are nec-  
11 essary to carry out the demonstration program under this  
12 section.

## 13 **TITLE IV—FEDERAL BUREAU OF** 14 **PRISONS**

### 15 **SEC. 401. DEMONSTRATION PROGRAM ON TRAINING AND** 16 **EMPLOYMENT OF ALTERNATIVE DENTAL** 17 **HEALTH CARE PROVIDERS FOR DENTAL** 18 **HEALTH CARE SERVICES FOR PRISONERS** 19 **WITHIN THE CUSTODY OF THE BUREAU OF** 20 **PRISONS.**

21 (a) DEMONSTRATION PROGRAM AUTHORIZED.—The  
22 Attorney General, acting through the Director of the Bu-  
23 reau of Prisons, may carry out a demonstration program  
24 to establish programs to train and employ alternative den-  
25 tal health care providers in order to increase access to den-

1 tal health services for prisoners within the custody of the  
2 Bureau of Prisons.

3 (b) TELEHEALTH.—For purposes of alternative den-  
4 tal health care providers and any other dental care pro-  
5 viders who are licensed to provide clinical care, dental  
6 services provided under the demonstration program under  
7 this section may be administered by such providers  
8 through telehealth-enabled collaboration and supervision  
9 when deemed appropriate and feasible.

10 (c) ALTERNATIVE DENTAL HEALTH CARE PRO-  
11 VIDERS DEFINED.—In this section, the term “alternative  
12 dental health care providers” has the meaning given that  
13 term in section 340G–1(a)(2) of the Public Health Service  
14 Act (42 U.S.C. 256g–1(a)(2)).

15 (d) AUTHORIZATION OF APPROPRIATIONS.—There  
16 are authorized to be appropriated such sums as are nec-  
17 essary to carry out the demonstration program under this  
18 section.

1           **TITLE V—INDIAN HEALTH**  
2                           **SERVICE**

3 **SEC. 501. DEMONSTRATION PROGRAM ON TRAINING AND**  
4                           **EMPLOYMENT OF ALTERNATIVE DENTAL**  
5                           **HEALTH CARE PROVIDERS FOR DENTAL**  
6                           **HEALTH CARE SERVICES UNDER THE INDIAN**  
7                           **HEALTH SERVICE.**

8           (a) DEMONSTRATION PROGRAM AUTHORIZED.—The  
9 Secretary of Health and Human Services, acting through  
10 the Indian Health Service, may carry out a demonstration  
11 program to establish programs to train and employ alter-  
12 native dental health care providers in order to help elimi-  
13 nate oral health disparities and increase access to dental  
14 services through health programs operated by the Indian  
15 Health Service, Indian tribes, tribal organizations, and  
16 Urban Indian organizations (as those terms are defined  
17 in section 4 of the Indian Health Care Improvement Act  
18 (25 U.S.C. 1603)).

19           (b) TELEHEALTH.—For purposes of alternative den-  
20 tal health care providers and any other dental care pro-  
21 viders who are licensed to provide clinical care, dental  
22 services provided under the demonstration program under  
23 this section may be administered by such providers  
24 through telehealth-enabled collaboration and supervision  
25 when deemed appropriate and feasible.



1 (c) ALTERNATIVE DENTAL HEALTH CARE PRO-  
2 VIDERS DEFINED.—In this section, the term “alternative  
3 dental health care providers” has the meaning given that  
4 term in section 340G–1(a)(2) of the Public Health Service  
5 Act (42 U.S.C. 256g–1(a)(2)).

6 (d) AUTHORIZATION OF APPROPRIATIONS.—There  
7 are authorized to be appropriated such sums as are nec-  
8 essary to carry out the demonstration program under this  
9 section.

## 10 **TITLE VI—REPORTS TO** 11 **CONGRESS**

### 12 **SEC. 601. EVALUATION OF EXPANSION OF COVERAGE FOR** 13 **DENTAL SERVICES.**

14 (a) SECRETARY OF HEALTH AND HUMAN SERV-  
15 ICES.—Not later than October 1, 2017, the Secretary of  
16 Health and Human Services shall submit to Congress a  
17 report that provides a comprehensive cost-benefit analysis  
18 regarding the expansion of coverage for dental services  
19 pursuant to this Act, including whether the provision of  
20 such services resulted in a reduction in total health care  
21 costs for individuals under the Medicare and Medicaid  
22 programs.

23 (b) COMPTROLLER GENERAL.—

24 (1) MEDICAID AND MEDICARE.—Not later than  
25 January 1, 2017, the Comptroller General of the

1 United States shall submit to Congress a report that  
2 provides a comprehensive analysis and evaluation of  
3 the implementation and utilization of the expanded  
4 coverage for dental services pursuant to this Act for  
5 individuals enrolled in the Medicare and Medicaid  
6 programs.

7 (2) DEMONSTRATION PROGRAMS.—Not later  
8 than January 1, 2017, the Comptroller General of  
9 the United States shall submit to Congress a report  
10 that provides a comprehensive analysis and evalua-  
11 tion of the demonstration programs described in sec-  
12 tions 302, 311, 401, and 501, including—

13 (A) the extent to which the programs im-  
14 proved access to oral health care and increased  
15 utilization of oral health services; and

16 (B) an examination of the training pro-  
17 vided under the programs to alternative dental  
18 health care providers and the quality of care  
19 provided by such providers.

○