H. R. 539

To amend part B of title III of the Public Health Service Act to improve essential oral health care for lower income individuals by breaking down barriers to care, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JANUARY 27, 2015

Ms. KELLY of Illinois (for herself and Mr. SIMPSON) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend part B of title III of the Public Health Service Act to improve essential oral health care for lower income individuals by breaking down barriers to care, and for other purposes.

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 “Action for Dental
5 Health Act of 2015”.

6 SEC. 2. FINDINGS.

7 Congress finds the following:
(1) More than 181 million Americans will not visit a dentist even though nearly half of people over 30 suffer from some form of gum disease and nearly one in four children under the age of five already have cavities.

(2) Many volunteer dental projects sponsored by national, State, and local dental societies provide free care now to those most in need. Annually, dentists deliver an estimated $2.6 billion in free and discounted care according to the America’s Dentists Care Foundation.

(3) It is estimated that emergency department (ED) charges for dental complaints totaled up to $2.1 billion in 2010. Nearly 80 percent of the dental emergency room visits were nonurgent and could have been seen in a dental office. Shifting those ED visits to a dental office translates into potential cost savings of up to $1.7 billion a year and offers the possibility of establishing a “dental home” for these individuals.

(4) Seniors, especially those in nursing homes and long-term care facilities, often have special dental needs and complicated medical histories that require consultation between dentists and fellow med-
ical professionals in providing an interdisciplinary
approach to their overall health needs.

SEC. 3. VOLUNTEER DENTAL PROJECTS AND ACTION FOR
DENTAL HEALTH PROGRAM.

Part B of title III of the Public Health Service Act
is revised by amending section 317M (42 U.S.C. 247b–
14) as follows:

(1) by redesignating subsections (e) and (f) as
(g) and (h), respectively;

(2) by inserting after subsection (d), the fol-
lowing:

“(e) GRANTS TO SUPPORT VOLUNTEER DENTAL
PROJECTS.—

“(1) IN GENERAL.—The Secretary, acting
through the Director of the Centers for Disease
Control and Prevention, may award grants to or
enter into contracts with eligible entities to obtain
portable or mobile dental equipment, and pay for ap-
propriate operational costs, for the provision of free
dental services to underserved populations that are
delivered in a manner consistent with State licensing
laws.

“(2) ELIGIBLE ENTITY.—In this subsection, the
term ‘eligible entity’ includes a State or local dental
association, a State oral health program, a dental
education, dental hygiene education, or postdoctoral dental education program accredited by the Commission on Dental Accreditation, and a community-based organization that partners with an academic institution, that—

“(A) is exempt from tax under section 501(c) of the Internal Revenue Code of 1986; and

“(B) offers a free dental services program for underserved populations.

“(f) ACTION FOR DENTAL HEALTH PROGRAM.—

“(1) IN GENERAL.—The Secretary, acting through the Director of the Centers for Disease Control and Prevention, may award grants to or enter into contracts with eligible entities to collaborate with State, county, or local public officials and other stakeholders to develop and implement initiatives to accomplish any of the following goals:

“(A) To improve oral health education and dental disease prevention, including community-wide prevention programs, use of dental sealants and fluoride varnish, and increasing oral health literacy.

“(B) To make the health care delivery system providing dental services more accessible
and efficient through the development and ex-
pansion of outreach programs that will facili-
tate the establishment of dental homes for chil-
dren and adults, including the aged, blind, and
disabled populations.

“(C) To reduce geographic, language, cul-
tural, and similar barriers in the provision of
dental services.

“(D) To help reduce the use of emergency
deptments by those who seek dental services
more appropriately delivered in a dental pri-
mary care setting.

“(E) To facilitate the provision of dental
care to nursing home residents who are dis-
proportionately affected by lack of care.

“(2) ELIGIBLE ENTITY.—In this subsection, the
term ‘eligible entity’ includes a State or local dental
association, a State oral health program, or a dental
education, dental hygiene, or postdoctoral dental
education program accredited by the Commission on
Dental Accreditation, and a community-based orga-
nization that partners with an academic institution,
that—
“(A) is exempt from tax under section 501(c) of the Internal Revenue Code of 1986; and

“(B) partners with public and private stakeholders to facilitate the provision of dental services for underserved populations.”; and

(3) in subsection (h), as redesignated by paragraph (1), by striking “fiscal years 2001 through 2005” and inserting “fiscal years 2016 through 2020”.

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