

Capitol Hill Briefing on Dental Health

- How can dental health best be included in the larger health reform debate?
- How best can payment to dental health providers be improved?
- How can workforce shortage issues be addressed?

These were some of the questions posed at a well-attended briefing on Capitol Hill on July 25 to Mr. **Jack Bresch**, Associate Executive Director and Director of the Center for Public Policy and Advocacy at the American Dental Education Association; Dr. **Harry Goodman**, the Maryland State dental director at the Maryland Department of Health and Mental Hygiene; Dr. **Burton Edelstein**, Professor at Columbia University and Founder and President of the Children's Dental Health Project; Mr. **Bill Prentice**, Associate Executive Director for Government Affairs and Director of the ADA's Washington Office; and Dr. **John Luther**, Senior Vice President of the ADA Division of Dental Practice/Professional Affairs

"Dental Health: Nurturing the Health Care System's Neglected Stepchild" was the latest health policy forum for Congressional staff conducted by the Alliance for Health Reform with support from the Kaiser Commission on Medicaid and the Uninsured. The Alliance is a nonpartisan, nonprofit group founded by Senator **Jay Rockefeller** (D-WV). Senator Rockefeller serves as the honorary chairman, and Senator **Susan M. Collins** (R-ME) of Maine serves as honorary co-chairman. Since 1991, the Alliance has organized more than 200 forums in Washington and around the nation. It has published five highly regarded guides for journalists on covering health issues, with a sixth scheduled to appear this fall.

With the health reform discussion in full swing, organizers of the event believed it was important to include oral health in the broader conversation about improving quality and expanding access. As the recent deaths of children in Maryland and Mississippi tragically illustrated, dental health is a vital part of maintaining overall health. Yet many low-income children and adults do not receive adequate dental treatment. While Medicaid and the State Children's Health Insurance Program (SCHIP) provide coverage for eligible low-income individuals, reimbursement levels are often so low that many dentists will not participate in these programs. Nearly 130 million Americans have no insurance to help cover dental needs.

Speaking from his professional perspective and on behalf of his organization, each panelist made a short presentation and then entertained a variety of questions from the audience. ADEA representative Jack Bresch focused his comments on academic dental institutions as safety-net providers; an overview of one of the emerging allied dental workforce models, the Advanced Dental Hygiene Practitioner (ADHP); and the ADEA Board-approved core values and public policy statement on health care reform.

ADEA has been urging the Alliance for Health Reform for years to highlight oral health. The interest the briefing drew from the organizers and Congressional staff demonstrates that awareness of oral health has been raised among policymakers in Washington and on Capitol Hill.

Comprehensive Oral Health Proposal in the Works

Senator **Jeff Bingaman** (D-NM), a long-time supporter of oral health issues, is currently drafting comprehensive legislation aimed at increasing access to oral health services. His ambitious bill would take a number of steps to ensure that low-income adults and children who live in underserved communities, both urban and rural, have increased access to oral health services.

The New Mexico Democrat has invited a limited number of dental and oral health care organizations to meet with his staff and to identify best practices and models that are currently being used in states and communities across the nation that have increased access. Additionally, he is looking at new ideas that have not yet been implemented but show promise with regard to innovative ways to expand access and coverage.

Senator Bingaman is keen to examine ways that the Federal government could assist dental schools and dental residency programs to enable more students and residents to provide services for underserved populations. Staff of the ADEA Center for Public Policy and Advocacy have met frequently with his Congressional staff to explain how academic dental institutions act as safety-net providers and how new initiatives could foster the community service mission of U.S. dental schools.

ADEA has provided data and historical analysis on a variety of Federal programs, and has offered several recommendations to improve Title VII Health Professions Programs. Among the recommendations: eliminate the three-year rolling average and one-year IME lag provisions for GME-funded dental residency programs in non-hospital settings and establish a dental disproportionate share (DDS) payment for qualified dental schools that serve a disproportionate number of Medicaid, State Children's Health Insurance Program (SCHIP), and uninsured children.

The Bingaman bill is a work in progress. Be assured that we will keep readers of the **ADEA Washington Update** informed with regard to its policy development and political viability.

A Fond Farewell to Gina Luke

It was with a mixture of happiness and regret that the American Dental Education Association recently said a fond adieu to Ms. **Gina Luke**, who left after 11 years to become Assistant Director of the Government Relations Division at the American Veterinary Medical Association (AVMA) in Washington, DC.

We in the ADEA Center for Public Policy and Advocacy (CPPA), who counted Gina as a valued colleague, will especially miss her. She was an indispensable member of our team and a stalwart in our efforts to advocate more effectively on behalf of dental education, dental research, and oral health. Her institutional knowledge of and contributions to AADS/ADEA will be sorely missed. However, we recognize that Gina's new position will afford her a much desired opportunity to broaden her professional experience and challenge her to apply her considerable competencies to new health professions issues as successfully as she applied them at ADEA. We are happy because Gina's pursuit of continued professional growth, in spite of the potential risk that comes with any change, is truly admirable and cause for celebration. Our best wishes go with her in the knowledge that Gina will continue to grow professionally and will prosper personally.

On July 14, Ms. **Monette McKinnon**, formerly ADEA Director of Grassroots Advocacy and State Issues, assumed Gina's responsibilities. She is now the ADEA Director of Legislative Policy Development.

Congress Places Moratorium on CMS Regulations

Dental and health care advocates achieved a significant victory when both the U.S. House of Representatives and the U.S. Senate included language in the Iraq supplemental spending bill that would halt implementation of harmful Medicaid regulations proposed by the Centers for Medicare and Medicaid Services (CMS). The \$161.8 billion war supplemental spending bill that President **George Bush** signed into law included a moratorium on six of the seven controversial Medicaid regulations. The law delays regulatory changes to Medicaid coverage of:

- Graduate Medical Education (the rule would have prohibited Medicaid payment for GME)

- Rehabilitative services (the rule would have eliminated payment for rehabilitation services for children in foster care or for people with mental illness)
- Intergovernmental transfers (the rule would have placed strict limits on Medicaid payments to nursing homes)
- Provider taxes (the rule would have redefined allowable provider tax)
- Case management (the rule would have fragmented services for children with disabilities and restricted Medicaid's ability to coordinate and manage care of a child)
- School-based services (the rule would have prohibited all Medicaid funding of specialized medical transportation for children with disabilities)

During negotiations on the bill, Democrats were forced to accept the CMS moratorium on Medicaid outpatient services that was included in previous House and Senate versions of the bill.

FY 2009 Appropriations

The Senate Appropriations Committee completed its mark-up and provides:

- \$195.5 million for Title VII Health Professions Programs, a \$1.6 million (0.8%) increase over FY 2008. This includes a slight increase for the Primary Care Medicine and Dentistry programs and an increase for the Public Health, Preventive Medicine, and Dental Public Health programs.
- Funding at FY 2008 levels for all other Title VII programs
- As in FY 2008, \$5 million within the Allied Health programs for the Dental Health Improvement Act (DHIA)

The House Appropriations Committee was scheduled to vote on its Labor-HHS-Ed subcommittee bill, but the vote was cancelled due to partisan bickering over a peripheral issue. The Committee may take up the bill in September when Congress returns from its recess and national conventions.

It is very likely there will be a Continuing Resolution (CR) that will last through the remainder of 2008 and possibly even through the first quarter of 2009.

The House Appropriations subcommittee bill provides:

- \$244.1 million for Title VII programs, a \$50.2 million (25.9 percent) increase over last year
- A \$15 million increase for the Centers of Excellence (COE)
- An \$18 million increase for the Health Careers Opportunity Program (HCOP)
- An \$8 million increase for Area Health Education Centers (AHEC)
- \$10 million for the Dental Health Improvement Act grants
- A \$2 million increase for The Ryan White Dental Reimbursement Program (DRB)
- \$403 million for the National Institute of Dental and Craniofacial Research (NIDCR), an increase of \$13 million over FY 2008

\$5.2 Billion Additional Boost Proposed for NIH Budget

Senators **Tom Harkin** (D-Iowa) and **Arlen Specter** (R-Pa.), respectively the Chairman and Ranking Member of the Senate Appropriations Labor, Health and Human Services, Education, and Related Agencies Subcommittee, are seeking an additional \$5.2 billion for the National Institutes of Health (NIH) for fiscal year 2008, which ends September 30. The two long-time NIH supporters introduced a supplemental bill (S. 3272) to provide an additional \$1.2 billion for the National Cancer Institute (NCI) and an additional \$4 billion to other NIH Institutes. It is the boldest funding proposal for NIH since Congress and the White House completed a five-year doubling of the NIH budget in 2003. It is unclear, however, whether that this proposal will pass, given the current inability of lawmakers to approve the majority of appropriations bills for Federal agencies and programs.

Senate Appropriations Committee Chairman Senator **Robert Byrd** (D-WV) announced he would postpone until September consideration of a second FY 2008 supplemental spending package that reportedly includes an additional \$500 million for the National Institutes of Health (NIH). The additional funding, also championed by Senators **Harkin** and **Specter**, would be distributed to NIH Institutes and Centers on a pro-rata basis.

Senate Approves NHSC Reauthorization

The Senate approved by unanimous consent a bill (S. 901) that reauthorizes the National Health Service Corps (NHSC) through FY 2012. The bill authorizes funding beginning at \$131.5 million, increasing each year to \$185.6 million in FY 2012.

The reauthorization bill requires that each qualifying site demonstrate "willingness to support or facilitate mentorship, professional development, and training opportunities for Corps members," and directs the Secretary of Health and Human Services (HHS) to facilitate professional relationships among Corps members and other health professionals. Specifically, the measure emphasizes faculty appointments at health professions schools, and relationships with hospitals, academic medical centers, and Title VII Area Health Education Centers (AHEC) and Health Education Training Centers (HETC).

The NHSC reauthorization is part of a package that also includes a reauthorization of the Community Health Centers Program and the Rural Health Care Programs. In June, the House approved a similar measure (H.R. 1343), but it did not include the NHSC reauthorization.

Dental Access Bill Introduced

Representative **John Conyers** (D-MI), Chairman of the House Judiciary Committee, introduced the Improving Dental Access in Underserved Communities Act of 2008 (HR 6613).

This legislation would increase the current funding for the National Health Service Corps (NHSC) to \$300 million for each of the fiscal years 2009 through 2013, with \$100 million earmarked each year for students pursuing careers in dentistry.

The legislation would also reestablish programs that would increase the representation of minority and disadvantaged students in the health professions. HR 6613 would provide \$33.6 million for Centers of Excellence (COE) for each of the fiscal years 2009 to 2013. Centers of Excellence are designed to support programs in health professions education for underrepresented minority (URM) individuals in designated health professions schools.

Lastly, this Conyers legislation would provide \$35.7 million for the Health Career Opportunities Program (HCOP), which funds programs at postsecondary institutions that encourage individuals from disadvantaged backgrounds to enter and graduate from medical and other allied health profession schools. The bill currently has 10 co-sponsors and has been referred to the House Energy and Commerce Committee.

Howard University Receives Foundation Grant

The United Health Foundation announced a \$300,000 grant from the Foundation to establish a model “program in dental excellence” at Howard University College of Dentistry that will expand access to quality dental care for low-income children and families who reside in Washington, DC, and Prince George’s County, Maryland.

The agreement to launch the new program was prompted by the tragic death of Deamonte Driver, a 12-year old Maryland boy, who died after an infection from an abscessed tooth spread to his brain. According to the agreement, which was reached with input from Congressman **Elijah J. Cummings** (D-MD) and former members of Congress **Albert Wynn** and **Louis Stokes**, the Foundation will provide the College of Dentistry with funds to enact new services and programs designed to reduce barriers for children to receive dental care.

United Health Foundation Board member **Reed Tuckson**, M. D., committed to erect a plaque and portrait in honor of Deamonte Driver within the newly renovated dental clinic. At a press conference, retiring Howard University President **Patrick Swygert** discussed how he received the lion’s share of his oral health care from the dental school while earning both his undergraduate and law degrees from the university. President Swygert went on to say that Howard University College of Dentistry is uniquely qualified for this grant due to its long-standing commitment to providing quality care to children and its national leadership in the training of dentists.

The funding will support the new United Health Foundation Community Dental Health Program of Excellence, which will aim to ensure children have a “dental home” where they can regularly receive basic dental services as well as emergency treatment. Additionally, Howard University will be supported in developing state-of-the-art performance measures to evaluate and track quality of care delivery in community-based clinics. The program also will provide a unique environment for the training of general dentists as they learn to address pediatric dental needs.

The Foundation grant will also support:

- Services of pediatric dentists providing on-site services for Medicaid beneficiaries
- On-site dental case management services for Medicaid beneficiaries
- Community outreach and dental health education for children receiving Medicaid and their family members and caregivers

“We are pleased to partner with the United Health Foundation on this very important mission,” said **Leo E. Rouse**, DDS, dean of the Howard University College of Dentistry. “Together, we will expand access to quality pediatric dental care by advancing the innovative model of family-oriented dentistry. Community oral health care support and advocacy for total health care is part of our strategic plan.” Founded in 1881, the College of Dentistry is the fifth oldest dental school in the country and one of only two located within historically black colleges and universities.

Funding Opportunities Update

www.GRANTS.gov

You must use www.GRANTS.gov to apply for a federal grant. The registration process can take up to one month. Assistance is available from www.Grants.gov help desk at support@grants.gov or 800-518-4726. To successfully register, it is necessary to do all of the following:

- Obtain an organizational Data Universal Number System (DUNS) number
- Register the organization with Central Contractor Registry (CCR)
- Identify the organization's E-Business Point of Contact (POC)
- Confirm the organization's CCR "Marketing Partner ID Number (M-PIN)" password
- Register an Authorized Organization Representative (AOR)

Agency for Health Care Research and Quality (AHRQ)

- **Notice of Intent to Publish Program Announcements for Health Information Technology to Improve Health Care Quality** (NOT-HS-08-011), <http://grants.nih.gov/grants/guide/notice-files/NOT-HS-08-011.html>

Centers for Medicare and Medicaid Services (CMS)

- **Historically Black Colleges and Universities (HBCU) Grant Program** for health services research. The purpose of the grant program is to support researchers in implementing health services research activities to meet the needs of diverse CMS beneficiary populations. The goals of the grant program are to: 1) encourage HBCU health services researchers to pursue research issues that impact the Medicare, Medicaid, and SCHIP programs, 2) assist CMS in implementing its mission focusing on health care quality and improvement for its beneficiaries, 3) assist HBCU researchers by supporting extramural research in health care capacity development activities for the African American communities, 4) increase the pool of HBCU researchers capable of implementing the research, demonstration, and evaluation activities of CMS, and 5) assist in fostering interuniversity communication and collaboration regarding African American health disparity issues. For information and the grant announcement, visit www.cms.hhs.gov/ResearchDemoGrantsOpt/02_Historically_Black_Colleges_and_Universities.asp. You may also contact Richard Bragg at 410-786-7250.
- **Hispanic Health Services Research Grant Program** for health services research affecting Hispanic American communities. This announcement seeks competitive applications for small applied research projects that relate to identifying and evaluating solutions for eliminating health disparities among Hispanic Americans. Investigators should be associated with a university, college, community-based health organization, or professional association that has a health services research component. Researchers are expected to become involved in the design, implementation, and operation of research projects that address health care issues such as financing, delivery, access, quality, and barriers affecting the Hispanic American community. CMS is seeking these types of research projects because of the importance in finding solutions to the many difficult health issues that have a significant impact on the health of Hispanic Americans. For information and the grant announcement, visit [www.cms.hhs.gov/ResearchDemoGrantsOpt/03_Hispanic_Serving_Institution_\(HSI\)_Health_Services.asp#TopOfPage](http://www.cms.hhs.gov/ResearchDemoGrantsOpt/03_Hispanic_Serving_Institution_(HSI)_Health_Services.asp#TopOfPage). You may also contact Richard Bragg at 410-786-7250.

National Institutes of Health

- **Biomarkers of Infection-Associated Cancers (R01)** (PA-08-156), National Institute of Dental and Craniofacial Research and the National Cancer Institute, <http://grants.nih.gov/grants/guide/pa-files/PA-08-156.html>
- **Biomarkers of Infection-Associated Cancers (R21)**(PA-08-157), National Institute of Dental and Craniofacial Research and the National Cancer Institute, <http://grants.nih.gov/grants/guide/pa-files/PA-08-157.html>
- **Limited Competition: Renewal of Centers of Biomedical Research Excellence (COBRE) [P20]**(RFA-RR-08-007), National Center for Research Resources, Application Receipt Date: October 22, 2008, <http://grants.nih.gov/grants/guide/rfa-files/RFA-RR-08-007.html>
- **Harnessing Inflammation for Reconstruction of Oral and Craniofacial Tissues (R01)**, <http://www07.grants.gov/search/search.do?&mode=VIEW&flag2006=false&oppld=42195>
- **Harnessing Inflammation for Reconstruction of Oral and Craniofacial Tissues (R21)**, <http://www07.grants.gov/search/search.do?&mode=VIEW&flag2006=false&oppld=42197>

- **RFI What Role Might the NIH (Neuroscience Blueprint) Play in Developing Neuroscience-Related Educational Materials for the K-12 Community?** (NOT-MH-08-012), <http://grants.nih.gov/grants/guide/notice-files/NOT-MH-08-012.html>
- **Exploratory Collaborations with National Centers for Biomedical Computing** (R21) (PAR-08-183), NIH Roadmap Initiatives, <http://grants.nih.gov/grants/guide/pa-files/PAR-08-183.html>
- **Collaborations with National Centers for Biomedical Computing** (R01)(PAR-08-184), NIH Roadmap Initiatives, <http://grants.nih.gov/grants/guide/pa-files/PAR-08-184.html>
- **Immune Defense Mechanisms at the Mucosa** (R21), <http://www07.grants.gov/search/search.do?&mode=VIEW&flag2006=false&oppld=42216>
- **Measures and Determinants of Smokeless Tobacco Use, Prevention, and Cessation** (R01)(RFA-CA-08-024), Application Receipt Date: November 24, 2008, <http://grants.nih.gov/grants/guide/rfa-files/RFA-CA-08-024.html>
- **Measures and Determinants of Smokeless Tobacco Use, Prevention, and Cessation** (R21)(RFA-CA-08-025), Application Receipt Date: November 24, 2008, <http://grants.nih.gov/grants/guide/rfa-files/RFA-CA-08-025.html>

Upcoming Meetings and Conferences

- **August 25-28, 2008, "New Era, New Act," Ryan White HIV/AIDS Program Meeting** in Washington, DC. The Grantee Meeting (sponsored by the HHS HIV/AIDS Bureau) and the 11th Annual Clinical Update (sponsored by the International AIDS Society-USA) will take place simultaneously. The theme reflects a focus on implementing the 2006 Ryan White legislation as well as ongoing efforts to seek ever better ways to deliver HIV care. For the agenda, registration, and hotel information, visit www.ryanwhite2008.com.

Resources, Recent Reports, and Items of Note

- **Older Americans 2008: Key Indicators of Well-Being** is the fourth chartbook prepared by the Federal Interagency Forum on Aging Related Statistics (Aging Forum) since 2000. It provides an updated, accessible compendium of indicators drawn from the most reliable official statistics about the well-being of Americans primarily age 65 and over. The indicators are categorized into five broad areas—population, economics, health status, health risks and behaviors, and health care. The 160-page report contains data on 38 key indicators and a one-time special feature on health literacy. The Forum—a consortium representing 15 agencies with responsibilities for Federal data collection or aging programs, including CMS—collects, interprets, and updates these data and makes them available to government agencies, policymakers, the media, and the public. Access the publication online at www.agingstats.gov. Single printed copies are available at no charge through the National Center for Health Statistics while supplies last. Requests may be made by calling 1-866-441-6247 or by sending an email to nchsquery@cdc.gov. For multiple print copies, contact Forum staff director Kristen Robinson at 301-458-4460 or send an email request to agingforum@cdc.gov.
- **Health Care Financing Review**, Spring 2008 edition, a Centers for Medicare and Medicaid Services publication containing information, analysis, and research on a range of health care financing and delivery issues. This issue includes a report on access and satisfaction among children in Georgia's Medicaid and State Children's Health Insurance programs as well as highlights from the ongoing Medicare Current Beneficiary Survey. Access it at www.cms.hhs.gov/HealthCareFinancingReview/downloads/2008spring.pdf. To request copies of the printed edition, please contact Patty Manger at 410-786-3253.

- **Medicare Current Beneficiary Survey (MCBS) – Access to Care 2006**, a continuous, multipurpose panel survey consisting of a representative sample of the Medicare population, including both aged and disabled enrollees. The Access to Care files contain a variety of information about Medicare beneficiaries' demographic characteristics, health status and functioning, access to care, insurance coverage, financial resources, and potential family support collected by the MCBS. Data files are also available for calendar years 1991-1995. For more information about MCBS, visit www.cms.hhs.gov/mcbs.
- **Medicare Current Beneficiary Survey (MCBS) Cost and Use 2005** data files. This is designed as a quick release file containing information directly reported in the survey. The MCBS Cost and Use data are put through a reconciliation process to compare health care services reported in the survey to CMS's administrative claims data. This process provides a file with a more complete and accurate picture of both covered and non-covered health services received by Medicare beneficiaries as well as the amounts paid and sources of payment for these services. Additional MCBS Cost and Use data are available for calendar years 1992-2004. For more information about MCBS, visit www.cms.hhs.gov/mcbs.

The next issue of the **Washington Update** will be published in September.

The 110th Congress will attempt to adjourn for its summer recess on Friday, August 1. The Democratic National Convention will take place in Denver from August 25 to 28, during which convention delegates will presumably nominate Senator **Barack Obama** of Illinois for the Presidency. From September 1 to 4, Republicans will meet in Minneapolis for their National Convention and presumably nominate Senator **John McCain** of Arizona as their Presidential candidate.

Quotable

“Of course I believe in luck.
How otherwise to explain the success of those you dislike?”
French writer Jean Cocteau

The **Washington Update** is published by the ADEA Center for Public Policy and Advocacy (CPPA) monthly when Congress is in session. Its purpose is to keep ADEA members abreast of Federal issues and events of interest to the academic dental and research communities.

© American Dental Education Association
1400 K Street, NW, Suite 1100, Washington, DC 20005
Telephone: 202-289-7201, Website: www.ADEA.org

Jack E. Bresch, Associate Executive Director and ADEA CPPA Director (BreschJ@ADEA.org)

Deborah Darcy, Director of Congressional Affairs (DarcyD@ADEA.org)

Monette D. McKinnon, Director of Legislative Policy Development (McKinnonM@ADEA.org)

Myla J. Moss, Director of Congressional Relations and Regulatory Affairs (MossM@ADEA.org)

Janet E. Leigh, B.S.D., D.M.D., 2008-09 ADEA/Sunstar Americas, Inc. Harry W. Bruce, Jr. Legislative Fellow