

2021

Federal

PRIORITY ISSUES



Medicare Dental Benefits

AAOMS agrees with Congress that some seniors lack access to affordable dental care. However, AAOMS disagrees a significant expansion of dental benefits under Medicare Part B is the best solution to this problem and, therefore, opposes any legislation to expand Medicare Part B to include dental services. AAOMS advocates that Congress consider alternative approaches to expand access to dental care for seniors that: 1) mandate CMS expand the circumstances in which Medicare Part B will cover dental procedures related to a Medicare-covered medical procedure; 2) provide additional federal funding to allow states to provide consistent Medicaid dental coverage for low-income seniors; 3) incentivize more MA plans to offer dental benefits to their enrollees; and 4) explore a Medicare dental benefit outside Part B.

STATUS: Congressional Democrats are seeking to expand the types of dental services covered under Medicare Part B. AAOMS has been actively advocating against the inclusion of an expanded Part B dental benefit in any legislation that advances in Congress.

Craniofacial Anomalies Coverage

AAOMS has worked with a bipartisan group of members of Congress, health professionals and patient advocacy groups to reintroduce and build support for the Ensuring Lasting Smiles Act (S 754/HR 1916). The bill would require health plans, including ERISA plans, to cover medically necessary services, including dental-related treatment, for patients with congenital craniofacial anomalies.

STATUS: The bill has more than 285 bipartisan cosponsors in the House and 36 bipartisan cosponsors in the Senate.

Student Loan Reform

AAOMS secured reintroduction of the Resident Education Deferred Interest "REDI" Act (HR 4122), which would allow medical and dental residents to qualify for interest-free deferment, saving them tens of thousands of dollars in interest. AAOMS is leading a coalition of more than 30 physician and dentist provider groups to increase support for this bill.

STATUS: The bipartisan bill was reintroduced in July.

Drug and Supply Shortages

OMs have been particularly prone to pharmaceutical and supply shortages, including personal protective equipment (PPE), given their unique skillset and largely independent practice status. AAOMS has been advocating in support for legislation to address by drug and PPE shortages that include, among many other solutions, additional coordination between federal agencies to address controlled substances in short supply, mechanisms for the federal government to incentivize manufacturers to produce critical drugs – which often have a small profit margin as well as national efforts to secure the supply chain by incentivizing domestic manufacturing and developing an early notification system for supply shortages (similar to the FDA pharmaceutical program).

STATUS: With bipartisan consensus in Congress on the need to address drug shortages, several legislative solutions have been introduced but have yet to move beyond committee introduction.

Prescription Drug Abuse

OMs are very aware of the opioid abuse epidemic and its unfortunate and unintended consequences on some patients. AAOMS advocates against the creation of federal prescribing guidelines or continuing education mandates that conflict with state-level requirements as well as dosage limitations that do not allow prescriber discretion to account for variants in procedure and patient pain tolerance.

STATUS: Congress has yet to advance any legislation in 2021 that imposes prescribing guidelines or CE mandates. AAOMS continues to highlight the educational efforts it has undertaken to successfully reduce OMS opioid prescribing.

Please support AAOMS by joining the OMS Action Network, attending Day on the Hill and/or contributing to OMSPAC.
More information is available at AAOMS.org/action.

*These accomplishments were the result of the efforts from many organizations, including AAOMS.

Contributions are completely voluntary and you may give more or less than what is suggested. Contributions to OMSPAC are not deductible for federal income tax purposes and OMSPAC cannot accept contributions from foreign nationals. Federal law prohibits OMSPAC from using corporate contributions for federal candidates. Contributions from corporate accounts will be deposited into the OMSPAC Administrative Account not the Federal Election Account. The Administrative Account can be used to cover administrative expenses such as OMSPAC staff salaries, printing costs, and mailing costs.

2020 Federal VICTORIES



COVID-19 Issues

Since the onset of the pandemic, AAOMS has been focused on issues impacting OMSs. AAOMS successfully advocated alongside other stakeholders for access to affordable personal protective equipment (PPE), student loan repayment relief, greater flexibility with the Paycheck Protection Program (PPP) and expansion of the Employee Retention Tax Credit (ERTC). Some specific victories included the ability for PPP funds to be used for PPE and infection control mitigation expenses; the ability for expenses paid with PPP funds to be tax-deductible; a simplified forgiveness process for PPP loans under \$150,000; flexibility for PPP and Economic Injury Disaster Loan (EIDL) borrowers; the ability for PPP borrowers to take advantage of the ERTC; an extension of the ERTC through Dec. 31; and an extension of tax credits for employers for COVID-19-related paid sick and family leave through Sept. 30.

Surprise Billing

Congress enacted the No Surprises Act in December 2020. The legislation holds the patient harmless for unanticipated out-of-network costs. AAOMS advocated alongside other healthcare providers to secure provider-friendly provisions that include an efficient arbitration process, a prohibition against arbitrators basing billing decisions on Medicare and Medicaid program rates and, most importantly, a requirement that the insurer pay the out-of-network provider directly rather than send payment to the patient, who may never pass it along to the provider.

Antitrust Reform

Alongside others in the dental community, AAOMS advocated in support of antitrust reform for more than 10 years. The Competitive Health Insurance Reform Act (S 350/HR 1418), which would remove the exemption from federal antitrust laws enjoyed by health and dental insurance companies, was finally passed by Congress in late 2020 and signed into law Jan. 13, 2021.

Medicare Physician Reimbursement

OMSs were scheduled to receive a 5 percent cut for Medicare services in 2021 due to the scheduled increase of payment for evaluation and management (E/M) codes. AAOMS participated in a coalition that successfully lobbied Congress to intervene to prevent the payment cuts.

Please support AAOMS by joining the OMS Action Network, attending Day on the Hill and/or contributing to OMSPAC.
More information is available at AAOMS.org/action.

*These accomplishments were the result of the efforts from many organizations, including AAOMS.

Contributions are completely voluntary and you may give more or less than what is suggested. Contributions to OMSPAC are not deductible for federal income tax purposes and OMSPAC cannot accept contributions from foreign nationals. Federal law prohibits OMSPAC from using corporate contributions for federal candidates. Contributions from corporate accounts will be deposited into the OMSPAC Administrative Account not the Federal Election Account. The Administrative Account can be used to cover administrative expenses such as OMSPAC staff salaries, printing costs, and mailing costs.