March 2012 Bulletin

U.S. Supreme Court Takes Up the ACA

This week, the U.S. Supreme Court held three days of oral arguments on the states’ challenge to the Affordable Care Act (ACA). Virginia (along with twenty-five other states) is included in this legal challenge. The arguments this week mark the first time in forty years that the Court held hearings on more than one day for a single legal challenge. VaOHC is particularly interested in this because Pediatric Dental Benefits are mandated as part of the ACA.

On day one, the Court heard arguments about the Anti-Injunction Act, which is a 19th century law that prohibits federal courts from ruling against tax provisions until they have taken effect. This was a debate about whether the Court has the authority to rule on the Affordable Care Act before the penalties for not buying health insurance go into effect in 2014. Initial indications are that all the parties want the Court to rule sooner rather than later on the Affordable Care Act.

The second day was the main event of the week, as the subject was the individual mandate. This provision of the law requires people who do not have health insurance through an employer or through Medicaid or Medicare to purchase insurance. The Affordable Care Act (ACA), in many ways, hinges on all Americans purchasing insurance in order to keep insurance costs as low as possible and to enforce provisions, such as eliminating pre-existing conditions.

On the third and final day of arguments, two subjects were discussed. First, the Court heard arguments about the severability of the law. If the Court were to rule the individual mandate within the ACA is unconstitutional, it would have to determine which, if any, of the other provisions of the law would remain in effect. The second argument related to the Medicaid expansion provision of the ACA. The law expands eligibility for the Medicaid program to all adults whose income is lower than 133% of the Federal Poverty Level. Under the current law, 100% of the cost of the expansion population would be covered by the federal government in 2014, and the federal payment rate would be reduced to 90% by 2017. The parties argued about whether the requirement to add more adults to the Medicaid program amounts to coercion of the states to pay more money to expand Medicaid.
The Court expected to rule on all these arguments in June of this year. To read the transcripts of the Supreme Court arguments or to listen to the oral arguments, please visit the following links:

Monday, March 26
Tuesday, March 27
Wednesday, March 28

This article was adapted from the Oral Health Kansas Weekly Wednesday Update on March 28, 2012.

VDH Dental Clinics: A Funding Update

Both the House and the Senate have passed their respective budgets to restore funding to the Virginia Department of Health (VDH) dental clinics and the health safety net, however their language and funding terms differ. The House included one year of funding, while the Senate restored both years of funding. Both bodies included language that would direct a stakeholder group to make recommendations about the ongoing operation of the dental clinics. The House language indicates a provider-only stakeholder group and a transition to a prevention-only model, and the Senate language directs the VDH to convene a broader stakeholder group that includes non-providers, like VaOHC. The budget language is currently being reviewed in conference committee.

VaOHC played an integral role in advocating to restore these funds as well as crafting the Senate's study language. The Coalition will continue its work to ensure restoration of funding stays in the current budget and that we are included in a prospective stakeholder group.

Of Interest

Oral Health and Overall Health

Oral health and overall health are fundamentally intertwined. The following links present current information on how oral health affects other conditions in the body, including:

- Periodontitis and diabetes
- GERD (chronic heartburn) and severe tooth damage
- Poor oral health and aspirational pneumonia
- Dental plaque bacteria and blood clots

Report: Dental Crisis in America: The Need to Expand Access

Senator Bernie Sanders (I-VT) issued a report earlier this month on the nation's dental crisis. In the report, Senator Sanders summarizes several solutions to the country's growing oral health access problems, including increasing
the number of dentists and dental assistants, expanding Medicaid dental coverage to adults and boosting preventative services and education.

Read "Dental Crisis in America"

Residents of Poorer Neighborhoods More Likely to Have Chronic Pain

A recent study in the Journal of Pain looked at incidence of chronic pain in people aged 18-49 and found significantly higher rates in lower income areas as compared with more affluent areas. As the accompanying article points out, dental visits closely track socioeconomic status, with higher visits among employees of knowledge, professional or creative work, and a lower number of visits among the working class.

Read the article from The Atlantic Cities

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www.vaoralhealth.org