

114TH CONGRESS
2D SESSION

S. 3244

To amend title XXVII of the Public Health Service Act to clarify the treatment of pediatric dental coverage in the individual and group markets outside of Exchanges established under the Patient Protection and Affordable Care Act, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JULY 14, 2016

Mr. ROBERTS (for himself and Mr. BENNET) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend title XXVII of the Public Health Service Act to clarify the treatment of pediatric dental coverage in the individual and group markets outside of Exchanges established under the Patient Protection and Affordable Care Act, 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 “Aligning Children’s
5 Dental Coverage Act”.

1 **SEC. 2. TREATMENT OF PEDIATRIC DENTAL COVERAGE**
 2 **OUTSIDE OF ACA EXCHANGES.**

3 (a) IN GENERAL.—Section 2707 of the Public Health
 4 Service Act (42 U.S.C. 300gg–6) is amended—

5 (1) in subsection (a), by striking “A health”
 6 and inserting “Subject to subsection (e), a health”;

7 (2) in subsection (d), by striking “section
 8 1302(d)(2)(B)(ii)(I)” and inserting “section
 9 1311(d)(2)(B)(ii) of the Patient Protection and Af-
 10 fordable Care Act”; and

11 (3) by adding at the end the following new sub-
 12 section:

13 “(e) TREATMENT OF PEDIATRIC DENTAL COV-
 14 ERAGE.—If a plan described in section 1311(d)(2)(B)(ii)
 15 of the Patient Protection and Affordable Care Act (relat-
 16 ing to standalone dental benefits) is offered in a service
 17 area in the individual or small group market in a State
 18 and the issuer of such plan certifies to the State that the
 19 plan offers pediatric dental benefits meeting the require-
 20 ments of section 1302(b)(1)(J) of the Patient Protection
 21 and Affordable Care Act, any other health insurance cov-
 22 erage or group health plan, to the extent offered in such
 23 service area in such market in such State, shall not fail
 24 to be treated as satisfying the requirements of subsection
 25 (a) solely because the coverage or health plan does not
 26 offer coverage of benefits offered through the standalone

1 plan that are otherwise required under such section
 2 1302(b)(1)(J).”.

3 (b) TECHNICAL CORRECTION TO TREATMENT OF
 4 ACA EXCHANGES COVERAGE.—Section 1302(b)(4)(F) of
 5 the Patient Protection and Affordable Care Act (42
 6 U.S.C.18022(b)(4)(F)) is amended—

7 (1) by striking “section 1311(b)(2)(B)(ii)” and
 8 inserting “section 1311(d)(2)(B)(ii)”; and

9 (2) by striking “is offered through an Ex-
 10 change, another health plan offered through such
 11 Exchange” and inserting “is offered in a service
 12 area through an Exchange (or in the case of a plan
 13 not offered through an Exchange, offered in a serv-
 14 ice area in the individual or small group market in
 15 a State), another health plan to the extent offered
 16 in such service area through such Exchange (or, to
 17 the extent offered in such service area in such indi-
 18 vidual or small group market in the State, as appli-
 19 cable)”.

20 (c) EFFECTIVE DATE.—The amendments made by
 21 this section shall apply to plan years beginning on or after
 22 January 1, 2018.

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