

DENTAL EMERGENCY RESPONDER ACT OF 2010

SEPTEMBER 28, 2010.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. WAXMAN, from the Committee on Energy and Commerce, submitted the following

R E P O R T

[To accompany H.R. 903]

[Including cost estimate of the Congressional Budget Office]

The Committee on Energy and Commerce, to whom was referred the bill (H.R. 903) to amend the Public Health Service Act to enhance the roles of dentists and allied dental personnel in the Nation’s disaster response framework, and for other purposes, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.

CONTENTS

	Page
Amendment .....	1
Purpose and Summary .....	2
Background and Need for Legislation .....	2
Committee Consideration .....	2
Committee Votes .....	3
Committee Oversight Findings and Recommendations .....	3
New Budget Authority, Entitlement Authority, and Tax Expenditures .....	3
Statement of General Performance Goals and Objectives .....	3
Constitutional Authority Statement .....	3
Earmarks and Tax and Tariff Benefits .....	3
Federal Advisory Committee Statement .....	4
Applicability of Law to Legislative Branch .....	4
Federal Mandates Statement .....	4
Committee Cost Estimate .....	4
Congressional Budget Office Cost Estimate .....	4
Section-by-Section Analysis of the Legislation .....	5
Explanation of Amendment .....	5
Changes in Existing Law Made by the Bill, as Reported .....	6

AMENDMENT

The amendment is as follows:

Strike all after the enacting clause and insert the following:

**SECTION 1. SHORT TITLE.**

This Act may be cited as the “Dental Emergency Responder Act of 2010”.

**SEC. 2. DENTAL EMERGENCY RESPONDERS: PUBLIC HEALTH AND MEDICAL RESPONSE.**

(a) NATIONAL HEALTH SECURITY STRATEGY.—Section 2802(b)(3) of the Public Health Service Act (42 U.S.C. 300hh–1(b)(3)) is amended—

(1) in the matter preceding subparagraph (A), by inserting “and which may include dental health facilities” after “mental health facilities”; and

(2) in subparagraph (D), by inserting “(which may include such dental health assets)” after “medical assets”.

(b) ALL-HAZARDS PUBLIC HEALTH AND MEDICAL RESPONSE CURRICULA AND TRAINING.—Section 319F(a)(5)(B) of the Public Health Service Act (42 U.S.C. 247d–6(a)(5)(B)) is amended by striking “public health or medical” and inserting “public health, medical, or dental”.

**SEC. 3. DENTAL EMERGENCY RESPONDERS: HOMELAND SECURITY.**

(a) NATIONAL RESPONSE FRAMEWORK.—Paragraph (6) of section 2 of the Homeland Security Act of 2002 (6 U.S.C. 101) is amended by inserting “and dental” after “emergency medical”.

(b) NATIONAL PREPAREDNESS SYSTEM.—Subparagraph (B) of section 653(b)(4) of the Post-Katrina Emergency Management Reform Act of 2006 (6 U.S.C. 753(b)(4)) is amended by striking “public health and medical” and inserting “public health, medical, and dental”.

(c) CHIEF MEDICAL OFFICER.—Paragraph (5) of section 516(c) of the Homeland Security Act of 2002 (6 U.S.C. 321e(c)) is amended by striking “medical community” and inserting “medical and dental communities”.

PURPOSE AND SUMMARY

H.R. 903, the “Dental Emergency Responder Act of 2010”, was introduced on February 4, 2009, by Rep. Bart Stupak (D–MI) and subsequently referred to the Committee on Energy and Commerce.

The goal of H.R. 903 is to include dental professionals and facilities into various components of the nation’s emergency response preparedness framework.

BACKGROUND AND NEED FOR LEGISLATION

Recent disasters—the terrorist attacks of September 11, 2001, and Hurricanes Katrina and Rita—have made clear the critical need for a prepared, robust national medical response structure. Currently, however, the term “medical responder” (as used in relevant disaster-related federal law) does not include an important part of such a structure—dentists, allied dental personnel, and dental facilities. These individuals and offices are both eager and willing to participate and otherwise assist in supporting medical and public health responses to disasters. The purpose of this legislation is to provide them with the statutory authority to do so. With minimal additional training, they could readily fit into an all-hazards emergency healthcare response effort.

COMMITTEE CONSIDERATION

H.R. 903, the “Dental Emergency Responder Act of 2010”, was introduced by Rep. Stupak (D–MI) on February 4, 2009, and referred to the Committee on Energy and Commerce. The bill was subsequently referred to the Subcommittee on Health on February 9, 2009. The Subcommittee met in open markup session to consider H.R. 903 on July 22, 2010. An amendment in the nature of a substitute (manager’s amendment) by Subcommittee Chairman

Pallone was adopted by a voice vote. Subsequently, H.R. 903 was forwarded to the full Committee, amended, by a voice vote.

On July 28, 2010, the Committee on Energy and Commerce met in open markup session and considered H.R. 903 as approved by the Subcommittee. There were no amendments offered in full Committee and subsequently the Committee ordered H.R. 903 favorably reported to the House, as amended by the Subcommittee on Health, by a voice vote.

#### COMMITTEE VOTES

Clause 3(b) of rule XIII of the Rules of the House of Representatives requires the Committee to list each record vote on the motion to report legislation and amendments thereto. A motion by Mr. Waxman ordering H.R. 903 reported to the House, as amended, was approved by a voice vote. There were no record votes taken during consideration of this bill.

#### COMMITTEE OVERSIGHT FINDINGS AND RECOMMENDATIONS

In compliance with clause 3(c)(1) of rule XIII and clause 2(b)(1) of rule X of the Rules of the House of Representatives, the oversight findings and recommendations of the Committee are reflected in the descriptive portions of this report, including the finding that dentists, allied dental personnel, and dental facilities should be incorporated into the nation's emergency response preparedness framework.

#### NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

Regarding compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee adopts as its own the analysis of H.R. 903 prepared by the Director of the Congressional Budget Office.

#### STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

In accordance with clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the performance goals and objectives of the Committee are reflected in the descriptive portions of this report, including the goal to incorporate dentists, allied dental personnel, and dental facilities into the nation's emergency response preparedness framework.

#### CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 3(d)(1) of rule XIII of the Rules of the House of Representatives, the Committee finds that the constitutional authority for H.R. 903 is provided under Article I, section 8, clauses 3 and 18 of the Constitution of the United States.

#### EARMARKS AND TAX AND TARIFF BENEFITS

H.R. 903 does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9(d), 9(e), or 9(f) of rule XXI of the Rules of the House of Representatives.

## FEDERAL ADVISORY COMMITTEE STATEMENT

The Committee finds that the legislation does not establish or authorize the establishment of an advisory committee within the definition of 5 U.S.C. App., section 5(b) of the Federal Advisory Committee Act.

## APPLICABILITY OF LAW TO THE LEGISLATIVE BRANCH

Section 102(b)(3) of Public Law 104–1 requires a description of the application of this bill to the legislative branch where the bill relates to terms and conditions of employment or access to public services and accommodations. H.R. 903 contains no such provisions.

## FEDERAL MANDATES STATEMENT

Section 423 of the Congressional Budget and Impoundment Control Act of 1974 (as amended by section 101(a)(2) of the Unfunded Mandates Reform Act, P.L. 104–4) requires a statement on whether the provisions of the report include unfunded mandates. In compliance with this requirement the Committee adopts as its own the estimates of federal mandates prepared by the Director of the Congressional Budget Office.

## COMMITTEE COST ESTIMATE

Pursuant to clause 3(d)(2) of rule XIII of the Rules of the House of Representatives, the Committee adopts as its own the cost estimate of H.R. 903 prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

## CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

With respect to the requirements of clause 3(c)(3) of rule XIII of the Rules of the House of Representatives and section 402 of the Congressional Budget Act of 1974, the Committee has received the following cost estimate for H.R. 903 from the Director of Congressional Budget Office:

AUGUST 27, 2010.

Hon. HENRY A. WAXMAN,  
*Chairman, Committee on Energy and Commerce,*  
*House of Representatives, Washington, DC.*

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 903, the Dental Emergency Responder Act of 2010.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Lisa Ramirez-Branum.  
Sincerely,

DOUGLAS W. ELMENDORF.

Enclosure.

*H.R. 903—Dental Emergency Responder Act of 2010*

H.R. 903 would amend responsibilities of federal agencies that are tasked with developing and implementing the National Health Security Strategy under the Public Health Service Act and the Na-

tional Response Plan under the Homeland Security Act of 2002. The bill would direct the Secretary of Health and Human Services to include, under the preparedness goals of the National Health Security Strategy, dental health facilities as entities to prepare for and respond to public health emergencies. The bill also would include dental personnel within the definition of emergency response provider and require federal agencies with responsibilities under the National Response Plan to address the preparedness and deployment of dental resources.

Based on the cost of similar requirements, CBO estimates that implementing H.R. 903 would have a negligible impact on federal spending over the next five years; any additional spending would be subject to the availability of appropriated funds. Enacting this legislation would not affect direct spending or revenues; therefore, pay-as-you-go procedures do not apply.

H.R. 903 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act and would impose no costs on state, local, or tribal governments.

The CBO staff contact for this estimate is Lisa Ramirez-Branum. The estimate was approved by Peter H. Fontaine, Assistant Director for Budget Analysis.

#### SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

##### *Section 1. Short title; table of contents*

Section 1 designates the short title of the Act as the “Dental Emergency Responder Act of 2010”.

##### *Section 2. Dental emergency responders: public health and medical response*

Section 2(a) amends section 2802(b)(3) of the Public Health Service Act to include dental health facilities in the National Health Security Strategy.

Section 2(b) amends section 319F(a)(5)(B) of the Public Health Service Act to include dental entities in the All-Hazards Public Health and Medical Response Curricula and Training.

##### *Section 3. Dental emergency responders: homeland security*

Section 3(a) amends paragraph 6 of section 2 of the Homeland Security Act of 2002 to include dental providers in the National Response Framework.

Section 3(b) amends subparagraph (B) of section 653(b)(4) of the Post-Katrina Emergency Management Reform Act of 2006 to include dental resources in the National Preparedness System.

Section 3(c) amends paragraph (5) of section 516(c) of the Homeland Security Act to include coordination with the dental community as a responsibility of the Chief Medical Officer of the Department of Homeland Security.

#### EXPLANATION OF AMENDMENT

Rep. Pallone (D–NJ) offered an amendment in the nature of a substitute during Subcommittee mark up. This amendment made two technical changes in the bill clarifying that the Department of Health and Human Services has the discretion, but is not required,

to include dentists and dental facilities in the national response framework. The amendment was adopted by voice vote.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

**PUBLIC HEALTH SERVICE ACT**

\* \* \* \* \*

**TITLE III—GENERAL POWERS AND DUTIES OF PUBLIC HEALTH SERVICE**

\* \* \* \* \*

**PART B—FEDERAL-STATE COOPERATION**

\* \* \* \* \*

**SEC. 319F. PUBLIC HEALTH COUNTERMEASURES TO A BIOTERRORIST ATTACK.**

(a) **ALL-HAZARDS PUBLIC HEALTH AND MEDICAL RESPONSE CURRICULA AND TRAINING.**—

(1) \* \* \*

\* \* \* \* \*

(5) **DISSEMINATION AND TRAINING.**—

(A) \* \* \*

(B) **CERTAIN ENTITIES.**—The education and training activities described in subparagraph (A) may be carried out by Federal [public health or medical] *public health, medical, or dental* entities, appropriate educational entities, professional organizations and societies, private accrediting organizations, and other nonprofit institutions or entities meeting criteria established by the Secretary.

\* \* \* \* \*

**TITLE XXVIII—NATIONAL ALL-HAZARDS PREPAREDNESS FOR PUBLIC HEALTH EMERGENCIES**

**Subtitle A—National All-Hazards Preparedness and Response Planning, Coordinating, and Reporting**

\* \* \* \* \*

**SEC. 2802. NATIONAL HEALTH SECURITY STRATEGY.**

(a) \* \* \*

(b) **PREPAREDNESS GOALS.**—The National Health Security Strategy shall include provisions in furtherance of the following:

(1) \* \* \*

\* \* \* \* \*

(3) **MEDICAL.**—Increasing the preparedness, response capabilities, and surge capacity of hospitals, other health care facilities (including mental health facilities *and which may include dental health facilities*), and trauma care and emergency medical service systems, with respect to public health emergencies, which shall include developing plans for the following:

(A) \* \* \*

\* \* \* \* \*

(D) Effective utilization of any available public and private mobile medical assets (*which may include such dental health assets*) and integration of other Federal assets.

\* \* \* \* \*

**HOMELAND SECURITY ACT OF 2002**

\* \* \* \* \*

**SEC. 2. DEFINITIONS.**

In this Act, the following definitions apply:

(1) \* \* \*

\* \* \* \* \*

(6) The term “emergency response providers” includes Federal, State, and local governmental and nongovernmental emergency public safety, fire, law enforcement, emergency response, emergency medical *and dental* (including hospital emergency facilities), and related personnel, agencies, and authorities.

\* \* \* \* \*

**TITLE V—NATIONAL EMERGENCY MANAGEMENT**

\* \* \* \* \*

**SEC. 516. CHIEF MEDICAL OFFICER.**

(a) \* \* \*

\* \* \* \* \*

(c) **RESPONSIBILITIES.**—The Chief Medical Officer shall have the primary responsibility within the Department for medical issues related to natural disasters, acts of terrorism, and other man-made disasters, including—

(1) \* \* \*

\* \* \* \* \*

(5) serving as the Department’s primary point of contact for State, local, and tribal governments, the **[medical community]** *medical and dental communities*, and others within and out-

side the Department, with respect to medical and public health matters;

\* \* \* \* \*

**POST-KATRINA EMERGENCY MANAGEMENT REFORM ACT OF 2006**

\* \* \* \* \*

**TITLE VI—NATIONAL EMERGENCY MANAGEMENT**

\* \* \* \* \*

**Subtitle C—Comprehensive Preparedness System**

**CHAPTER 1—NATIONAL PREPAREDNESS SYSTEM**

\* \* \* \* \*

**SEC. 653. FEDERAL PREPAREDNESS.**

(a) \* \* \*

(b) OPERATIONAL PLANS.—An operations plan developed under subsection (a)(4) shall meet the following requirements:

(1) \* \* \*

\* \* \* \* \*

(4) The operations plan shall address, as appropriate, the following matters:

(A) \* \* \*

(B) The preparedness and deployment of [public health and medical] *public health, medical, and dental* resources, including resources to address the needs of evacuees and populations with special needs.

\* \* \* \* \*



HENRY A. WAXMAN, CALIFORNIA  
CHAIRMAN

JOE BARTON, TEXAS  
RANKING MEMBER

ONE HUNDRED ELEVENTH CONGRESS  
**Congress of the United States**  
**House of Representatives**  
COMMITTEE ON ENERGY AND COMMERCE  
2125 RAYBURN HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-6115

Majority (202) 225-2927  
Minority (202) 225-3641  
September 24, 2010

The Honorable Bennie Thompson  
Chairman  
Committee on Homeland Security  
176 Ford House Office Building  
Washington, DC 20515

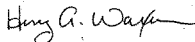
Dear Chairman Thompson:

Thank you for your letter regarding H.R. 903, the "Dental Emergency Responder Act." The Committee on Energy and Commerce recognizes that the Committee on Homeland Security has a jurisdictional interest in H.R. 903, and I appreciate your effort to facilitate consideration of this bill.

I also concur with you that forgoing action on the bill does not in any way prejudice the Committee on Homeland Security with respect to its jurisdictional prerogatives on this bill or similar legislation in the future, and I would support your effort to seek appointment of an appropriate number of conferees to any House-Senate conference involving this legislation.

I will include our letters on H.R. 903 in the Committee report on H.R. 903 and in the *Congressional Record* during floor consideration of the bill. Again, I appreciate your cooperation regarding this legislation and I look forward to working with the Committee on Homeland Security as the bill moves through the legislative process.

Sincerely,



Henry A. Waxman  
Chairman

cc: The Honorable Nancy Pelosi, Speaker  
The Honorable Steny Hoyer, Majority Leader  
The Honorable John Boehner, Minority Leader  
The Honorable Joe Barton  
The Honorable Peter T. King  
Mr. John Sullivan, Parliamentarian

BENNIE G. THOMPSON, MISSISSIPPI  
CHAIRMANPETER T. KING, NEW YORK  
RANKING MEMBER

One Hundred Eleventh Congress  
U.S. House of Representatives  
Committee on Homeland Security  
Washington, DC 20515

September 24, 2010

The Honorable Henry A. Waxman  
Chairman  
Committee on Energy and Commerce  
2125 Rayburn Bldg.  
U.S. House of Representatives  
Washington, DC 20515

Dear Chairman Waxman:

I write to you regarding H.R. 903, the "Dental Emergency Responder Act of 2009."

H.R. 903 contains provisions that fall within the jurisdiction of the Committee on Homeland Security. I recognize and appreciate your desire to bring this legislation before the House in an expeditious manner and, accordingly, I will not seek a sequential referral of the bill. However, agreeing to waive consideration of this bill should not be construed as the Committee on Homeland Security waiving, altering, or otherwise affecting its jurisdiction over subject matters contained in the bill which fall within its Rule X jurisdiction.

Further, I request your support for the appointment of Homeland Security conferees during any House-Senate conference convened on this or similar legislation. I also ask that a copy of this letter and your response be included in the legislative report on H.R. 903 and in the *Congressional Record* during floor consideration of this bill.

I look forward to working with you as we prepare to pass this important legislation.

Sincerely,

A handwritten signature in black ink that reads "Bennie G. Thompson".

Bennie G. Thompson  
Chairman

cc: The Honorable Nancy Pelosi, Speaker  
The Honorable Peter T. King, Ranking Member  
The Honorable John Sullivan, Parliamentarian

