

114TH CONGRESS
1ST SESSION

H. R. 3463

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 HOUSE OF REPRESENTATIVES

SEPTEMBER 9, 2015

Mr. GRIFFITH (for himself and Ms. DEGETTE) introduced the following bill;
which was referred to the Committee on Energy and Commerce

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 the indi-
17 vidual or small group market in a State and the issuer
18 of such plan certifies to the State that the plan offers pedi-
19 atric dental benefits meeting the requirements of section
20 1302(b)(1)(J) of the Patient Protection and Affordable
21 Care Act, any other health insurance coverage or group
22 health plan offered in such market in such State shall not
23 fail to be treated as satisfying the requirements of sub-
24 section (a) solely because the coverage or health plan does
25 not offer coverage of benefits offered through the stand-

1 alone 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 through an Ex-
12 change (or in the case of a plan not offered through
13 an Exchange, offered in the individual or small
14 group market in a State), another health plan of-
15 fered through such Exchange (or, in such individual
16 or small group market in the State, as applicable)”.

17 (c) EFFECTIVE DATE.—The amendments made by
18 this section shall apply as if included in the enactment
19 of the Patient Protection and Affordable Care Act.

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