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Subject: AAOMS Advocacy Insider



Welcome to the inaugural edition of the AAOMS Advocacy Insider, the exclusive publication for members of AAOMS's grassroots program, the OMS Action Network. This resource delivers essential updates on state and federal legislative issues impacting oral and maxillofacial surgery. Each edition provides timely insights into advocacy efforts, recent policy developments and opportunities to engage in legislative actions that shape the future of the specialty. Visit AAOMS.org/Action for more information on the OMS Action Network and past editions of the AAOMS Advocacy Insider.

Items of Note

Represent your state at Day on the Hill

If you have not yet registered to attend the March 25-26 Day on the Hill, it is not too late to do so. With over 50 new members taking office in the 119th Congress, the importance of this opportunity to represent the specialty and ensure these new members are educated on issues relevant to the specialty cannot be overstated. More than 70 of your colleagues are already registered to attend, but there are still 21 states lacking representation, meaning members of Congress from those states may not hear directly from the specialty. Please consider attending yourself or recruiting a colleague if you are from one of the following states: Alaska, Arizona, Arkansas, Connecticut, Hawaii, Idaho, Illinois, Indiana, Kentucky, Missouri, New Mexico, Nevada, North Dakota, Oklahoma, Rhode Island, South Carolina, South Dakota, Utah, Vermont, West Virginia or Wyoming.

AAOMS welcomes first-time attendees and will ensure that all are effectively prepared for their congressional meetings. No prior experience is necessary. [Watch](#) what AAOMS Fellow Dr. Claudine Cafferata and ROAAOMS member Dr. Praveen Kumar R. Guntaka had to say following their experiences attending this annual advocacy event.

Complimentary roundtrip airfare and one-night hotel accommodations will be offered on a first-come, first-served basis to a limited number of AAOMS members who have not attended an in-person Day on the Hill within the past five years. The housing block closes March 3; if you plan to attend, [register](#) and make your hotel reservations soon.

Visit [the website](#) for more information.



Provide input on AAOMS's federal advocacy agenda

The AAOMS Board of Trustees and Committee on Governmental Affairs are seeking member input to ensure AAOMS understands the federal advocacy-related issues of greatest concern to OMSs and prioritizes those, if feasible, for discussion during Day on the Hill congressional meetings scheduled for March 26. Please complete this brief, two-question [survey](#) if you haven't already done so. Your input will help guide the specialty's advocacy efforts in Washington, D.C.

[Complete the Survey](#)

State Updates

State legislative sessions kick off

The 2025 legislative sessions are underway, with 12 states in regular session and all 50 states scheduled to meet sometime in the upcoming year.

As the legislatures reconvene, be sure to utilize AAOMS resources to stay up-to-date with developments. Reference the [State Tracking Map](#) to see what bills are being considered in states. Also, be sure to view the monthly [Advocacy Flash Update](#) for a quick update on the latest developments at the state and federal levels.

Questions? Contact the [AAOMS Government Affairs Department](#).

N.H. regulation implementation delayed

During a Dec. 19 meeting of the Joint Legislative Committee on Administrative Rules (JLCAR), legislators voted to object to regulations that would restrict

OMSs from administering deep sedation or general anesthesia to patients ages 0-8 without a separate anesthesia provider, among other anesthesia and sedation restrictions, placing implementation on hold and requiring the state dental board to respond within 45 days to JLCAR's concerns, though the board has requested additional time to respond.

The New Hampshire Society of OMS and AAOMS support this move as both groups consider the original proposal scientifically unfounded and continue to oppose implementation. Efforts remain ongoing, and updates will be provided when available.

Mass. passes OBS bill

In the final hours of 2024, the General Court of the Commonwealth of Massachusetts passed a bill ([H 5159](#)) that would address healthcare consolidation and private equity efforts. Prompted by the Steward Healthcare bankruptcy and subsequent hospital closings, the bill seeks to provide more state oversight to such arrangements. Included within the bill is a provision that would require all facilities administering deep sedation or general anesthesia to be licensed by the state.

The Massachusetts Society of OMS (MSOMS) and Massachusetts Dental Society (MDS) have worked most of the year to have dental and OMS offices explicitly removed from the language. While this did not occur on paper, the state has made assurances that dental facilities will not be included in the implementation of this new law. MSOMS and MDS continue to look for ways to explicitly exempt dental offices from these requirements while also working with administrative offices to ensure they follow through on the legislature's promises.

The bill now heads to the desk of Gov. Maura Healey (D-Mass.).

CRNA bill introduced in Ind.

Indiana introduced a bill ([HB 1040](#)) that would allow for CRNAs to practice in dental offices without the need for the dentist to secure a sedation permit. The Indiana Society of OMS is aware and is working to oppose the effort. AAOMS is expecting several CRNA-related bills to be introduced in the coming legislative session.

Federal Updates

Congress passes slim year-end package

Just hours before a federal shutdown was set to take effect, Congress passed on Dec. 20 – and President Biden signed into law the next day – legislation ([H.R. 10515](#)) to keep the government operating at fiscal year 2024 levels through March 14. The new law also temporarily extends several healthcare

programs that were set to expire such as telehealth flexibilities; the Geographic Practice Cost Index floor, which adjusts payments meant to reflect regional differences in the cost of doing business; as well as funding for community health centers, the National Health Service Corps and teaching health centers with graduate medical programs.

The enacted bill was significantly narrower than the version negotiated earlier in the week, which was ultimately abandoned. That original proposal included several provisions important to AAOMS, such as averting most of the 2.8 percent Medicare physician payment cut that began Jan. 1, a temporary delay to filing requirements stemming from the Corporate Transparency Act, as well as reauthorizing both the Dr. Lorna Breen Health Care Provider Protection Act – which provides funding to ensure healthcare workers have access to mental and behavioral health support and treatment – and the Action for Dental Health program, which provides grants for innovative dental workforce programs at HRSA.

AAOMS will continue to encourage Congress to act on these issues, most notably the Medicare payment cuts. Although lawmakers pledged to retroactively address the Medicare payment cuts, AAOMS has launched a [grassroots campaign](#) urging Congress to act swiftly to prevent further financial strain on Medicare providers.

[Join our efforts](#) to advocate for a resolution to these cuts.

Take Action Now!

119th Congress kicks off

The 119th Congress convened on Jan. 3, and the House reelected Mike Johnson (R-La.) as Speaker after two Republicans switched their votes in his favor. Republicans won a 220-215 seat majority in the 2024 elections but begin Congress with 219 members as former Rep. Matt Gaetz (R-Fla.) resigned last year and opted not to reclaim his seat in the 119th Congress.

The Republican majority will soon decline by two more members as Reps. Michael Waltz of Florida and Elise Stefanik of New York were nominated by President-elect Trump to serve as national security adviser and United Nations ambassador, respectively. Those seats will take several months to fill.

The House also passed a rules package that raised the threshold for initiating a motion to vacate the speaker to nine members of the same party, compared to the one-member threshold from the 118th Congress.

Republicans aim to advance an ambitious agenda in the first few months of the new Congress. In addition to finalizing fiscal year 2025 funding that was extended until March 14, they also plan to use the reconciliation process, which only requires a simple majority, to pass Trump's policy agenda that includes

immigration and border security, tax reform and repealing tax credits for energy-efficient items provided in the 2021 Inflation Reduction Act. Besides Medicare physician payment cuts, Congress may try to tackle healthcare items such as new guidelines for the role of artificial intelligence in healthcare, examining new eligibility requirements for ACA tax credits and Medicaid eligibility, and partnering with HHS Secretary nominee Robert F. Kennedy Jr. on chronic health concerns.

ELSA update

The Ensuring Lasting Smiles Act (ELSA) was not reintroduced during the 118th Congress, largely at the request of dental provider organizations. Late last year, the bill sponsors provided stakeholders with an opportunity to review a draft of the bill with the goal of reintroducing it before the end of the year. As anticipated, the bill's scope was limited to the craniofacial area (eyes, ears, and mouth) to address previous scope concerns. However, AAOMS noticed new language in the draft that raised concerns. Specifically, the draft prohibited out-of-network (OON) providers who deliver services covered under ELSA (e.g., congenital anomalies and birth defects involving the eyes, ears, teeth, mouth, and jaw) from balance billing patients beyond the in-network amount, even if there is an available in-network provider and the appropriate notice and consent requirements are met. This exceeded the restrictions of the No Surprises Act (NSA), which permits OON providers to balance bill under such conditions.

Further, while the NSA's balance billing prohibitions apply only to treatments provided at in-network facilities by OON providers, the draft ELSA bill extended these restrictions to office-based settings. The result would have been that OON services provided under ELSA would have been treated differently from those provided outside ELSA's scope.

The National Foundation for Ectodermal Dysplasias (NFED) confirmed that the additional language was not included at their request, and they did not want it to divide the coalition. Staff for the bill's sponsors clarified the intent with the new language was to ensure patients have robust benefits and limited out-of-pocket costs due to the limited number of dental providers in-network with health plans. They acknowledged provider concerns and asked AAOMS to work with them to craft language for introduction in the 119th Congress that ideally satisfies all stakeholders.

AAOMS will continue to share updates as they occur.

Veterans' health access bill signed into law

Congress passed – and President Biden signed into law on Jan. 2 – the bipartisan, bicameral Senator Elizabeth Dole 21st Century Veterans Healthcare and Benefits Improvement Act ([S 141](#)). The new law includes a number of provisions aimed at improving dental care for the nation's veterans. More specifically, it allows the VA Secretary to raise the pay limits for dentists as well

as other healthcare providers employed by the VA, requires assessment reports on dental and oral health care programs furnished by the department, and calls for the creation of a new two-year pilot program in up to four states for veterans currently ineligible for VA dental benefits to receive VA dental care if they have been diagnosed with ischemic heart disease.

Legislative Sessions

States currently in regular session

California, Idaho, Illinois, Kentucky, Maine, Massachusetts, Mississippi, Montana, North Dakota, Ohio, Pennsylvania, Wisconsin



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