

106TH CONGRESS  
2D SESSION

# H. R. 4821

To authorize the Secretary of Health and Human Services to make grants to the States with respect to dental health programs for children.

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## IN THE HOUSE OF REPRESENTATIVES

JULY 11, 2000

Mrs. CAPPS (for herself, Mr. NORWOOD, Ms. CARSON, Mr. ROMERO-BARCELO, Mr. FROST, Mr. INSLEE, Mr. PAYNE, Mr. TOWNS, Mr. McNULTY, Mr. BARRETT of Wisconsin, Mr. MCGOVERN, Mr. MARKEY, Mr. UPTON, Mr. BAIRD, Ms. DANNER, Ms. KILPATRICK, Mrs. MEEK of Florida, Ms. LEE, Mr. BALDACCI, Mr. GILCHREST, Mr. WYNN, Ms. ROYBAL-ALLARD, Ms. MILLENDER-McDONALD, Mr. GONZALEZ, Ms. DELAURO, Mr. HASTINGS of Florida, Mrs. MALONEY of New York, Mrs. THURMAN, Mr. DAVIS of Illinois, Mrs. CLAYTON, Mr. PASTOR, and Mr. HOYER) introduced the following bill; which was referred to the Committee on Commerce

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## A BILL

To authorize the Secretary of Health and Human Services to make grants to the States with respect to dental health programs for children.

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 “Children’s Dental  
5 Health Preservation Act of 2000”.

1 **SEC. 2. FINDINGS.**

2 The Congress finds as follows:

3 (1) Dental disease in very young children is a  
4 significant public health problem affecting nearly  
5 one in five children.

6 (2) Children from low income families are much  
7 more likely to experience dental and oral disease.

8 (3) Children from rural areas are much more  
9 likely to experience difficulties in obtaining adequate  
10 access to oral health care.

11 (4) Most oral and dental diseases of pre-school  
12 children could be prevented or more effectively man-  
13 aged with an increased focus on their oral health.

14 (5) Significant numbers of pre-school children  
15 have inadequate oral health prevention available to  
16 them or they are unable to access existing programs.

17 (6) Public health prevention methods and oral  
18 health promotion programs have been successful in  
19 some States, but there are few if any successful  
20 comprehensive national oral health preventive and/or  
21 health programs.

22 (7) Use of screening, triage, health promotion,  
23 targeted disease prevention and disease management  
24 can limit or prevent most common oral and dental  
25 disease.

1           (8) Pre-school children who experience early  
2           dental disease are susceptible to painful symptoms,  
3           and are at a much higher risk for recurring dental  
4           diseases throughout life.

5 **SEC. 3. DENTAL HEALTH PROGRAMS FOR CHILDREN.**

6           The Secretary of Health and Human Services (re-  
7           ferred to in this section as the “Secretary”), acting  
8           through the Administrator of the Health Resources and  
9           Services Administration, shall make grants to States for  
10          the purpose of—

11           (1) identifying children eligible for Federal pro-  
12           grams at risk of developing dental caries and for  
13           provision of preventative and therapeutic services in  
14           accordance with State practice acts to reduce oral  
15           disease occurrence; and

16           (2) training of health care professionals to edu-  
17           cate parents on oral disease prevention.

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