September 6, 2022

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1770-P
P.O. Box 8016
Baltimore, MD 21244-8016

RE: CMS-1770-P: Proposals and Request for Information on Medicare Parts A and B Payment for Dental Services

Dear Sir or Madam,

The National Forum of ESRD Networks (“the Forum”) would like to offer its appreciation to CMS for its very thoughtful consideration in providing Medicare beneficiaries coverage for medically necessary dental care. The CMS-proposed rule for CY 2023 includes policy amendments to §411.15(i)(3) to specify that “payment under Medicare Parts A and B can be made for an oral or dental examination, and medically necessary diagnostic and treatment services to eliminate an oral or dental infection, prior to an organ transplant, cardiac valve replacement, or valvuloplasty procedure.” The patient population of dialysis-dependent and immunosuppression-requiring transplant and chronic kidney disease patients represented by the Forum are prime examples of those individuals who rely upon the ability to maintain adequate nutrition as well as infection prevention that is supported by the services of consistent and reliable dental care. Too often, we hear concerns from our patients with delays in kidney transplantation listing or declining nutritional status from the unmet needs of oral healthcare.

In addition to the above-described CMS proposal, the Forum believes that there may be other clinical scenarios where dental services may not be in connection with the care, treatment, filling, removal, or replacement of teeth or structures directly supporting teeth, but instead are inextricably linked to, and substantially related and integral to the clinical success of, certain other covered medical services. In order to ensure equitable oral healthcare access for all patients in the at-risk kidney disease population, the Forum would like to strongly urge CMS to include all beneficiaries who are immunocompromised by end stage renal disease (ESRD), chronic kidney disease (CKD), and other renal diseases, as well as kidney transplant candidates and recipients maintained on immunosuppressive medications. All are at increased risk of infection complications and malnutrition from dentally sourced pathogens.

The Forum would like to thank you for your time and consideration.
Sincerely,

David E. Henner, DO
President, Forum of ESRD Networks

Daniel Landry, DO
Chair, Forum Medical Advisory Council