

ANOHC Federal Policy Update

July 2026 Edition (June 12 – July 10)

July At-a-Glance

- New Federal student loan limits take effect for dental students
- Two new national surveys show health care affordability is a defining Midterm issue
- States challenge new Medicaid work requirement rules
- Both parties continue to put forth health care visions ahead of elections
- Upcoming hearings for several HHS leadership nominees
- HHS Secretary plans to overhaul US Preventive Services Task Force
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Federal Policy News

New Federal Student Loan Limits Take Effect for Dental Students

Significant changes to federal student aid for graduate and professional students took effect July 1 under the One Big Beautiful Bill Act. The changes eliminate new federal Grad PLUS loans and cap federal borrowing for professional students at \$50,000 per year, \$200,000 in aggregate professional-student debt, and \$257,500 in lifetime federal borrowing. Students who received federal loans for their current degree programs before June 30 are temporarily exempt until they complete those programs.

The law also creates a new repayment assistance plan that will replace several existing income-driven repayment options, including SAVE and PAYE. Borrowers may qualify for forgiveness after 30 years of payments under the new plan, while Public Service Loan Forgiveness remains available after 10 years of qualifying public-service employment. The ADA released a new resource guide to help dental students evaluate scholarships, military programs, private loans, and other financing options. ([ADA News](#))

Two New Surveys: Health Care Affordability Continues to Be a Defining Midterm Issue

Two new national surveys show that [rising health care costs are placing significant financial pressure on Americans](#) and increasingly [shaping voter priorities ahead of the 2026 midterm elections](#).

Key Poll Findings

- More than half of voters reported delaying or avoiding care, taking on medical debt, or using credit cards to manage health care costs over the past year.
- Among voters with employer-sponsored insurance, 74% experienced at least one cost increase, reduction in coverage, or other insurance-related difficulty over the past two years.
- 36% reported higher premiums, 31% faced increased copays, and 27% saw their deductibles or out-of-pocket limits rise.
- 72% of Americans said they are concerned their insurance costs will increase this year.

- More than 6 in 10 supported restoring the enhanced Affordable Care Act subsidies that expired at the end of 2025.
- 54% said they would be more likely to support a candidate who favors expanding prescription drug discount platforms.
- Only 1 in 5 voters said the Trump Administration's health care policies have improved the system and should be maintained.
- 30% supported adding new government coverage options alongside private insurance, while 36% said the healthcare system needs a complete overhaul.

Why This Matters: Rising healthcare costs and coverage instability have direct implications for dental public health. When families face higher premiums, deductibles, and copays, preventive dental care is often delayed or forgone, increasing the risk of untreated disease and more costly emergency care. The growing focus on health care affordability creates an important opportunity to reinforce that oral health cannot be treated as an afterthought in broader coverage and cost debates.

States Challenge CMS Medicaid Work Requirement Rules

Democratic attorneys general and governors from 25 states and the District of Columbia filed a lawsuit challenging the Trump Administration's implementation of new Medicaid work requirements. The lawsuit argues that an interim final rule issued by CMS exceeds the authority granted under the 2025 law and could improperly prevent eligible individuals from maintaining coverage.

Beginning January 1, 2027, many Medicaid expansion enrollees ages 19–64 will generally be required to document at least 80 hours per month of work or community service, or attend school at least half time, unless they qualify for an exemption. The states specifically object to CMS's interpretation of the medical frailty exemption, which requires an individual's condition to significantly impair their ability to meet the participation requirements. States argue that the narrower standard differs from the statute and from earlier federal guidance they relied on when developing their implementation systems.

The plaintiffs warn that unclear documentation requirements and added administrative burdens could cause people with disabilities, serious health conditions, substance use disorders, or ongoing cancer treatment to lose coverage despite remaining eligible. The Administration has defended the requirements as a way to preserve Medicaid resources and strengthen program integrity. ([AP News](#))

Why This Matters: Medicaid is an important source of dental coverage for lower-income adults, and coverage losses can interrupt access to preventive services, treatment, and ongoing care. The lawsuit highlights concerns that administrative requirements (not changes in underlying eligibility) could cause eligible individuals to lose both medical and dental coverage.

Congressional Happenings

More Health Care Visions Emerge Ahead of Midterms

As health care affordability becomes a more prominent voter concern, Republicans and Democrats are advancing sharply different approaches to addressing rising costs and dissatisfaction with the health care system.

GOP Approach: A group of House Republicans is urging Congress to advance the [Great American Healthcare Plan](#), introduced by Rep. Eric Burlison (R-MO), potentially through another reconciliation bill. The proposal would expand access to health savings accounts, strengthen federal price-transparency requirements, broaden access to alternatives to traditional insurance, and allow HSA funds to be used for additional preventive and

wellness expenses. Republicans have also supported redirecting federal insurance subsidies more directly to individuals.

Democratic Approach: Recent progressive primary victories have renewed interest in [Medicare for All](#) and other sweeping health care reforms. Progressive candidates argue that incremental changes have failed to adequately address insurance premiums, prescription drug prices, medical debt, and long-term care costs. While enactment of a single-payer system remains unlikely under the current Republican-controlled federal government, Medicare for All is increasingly serving as a broader expression of voter frustration and pressure on Democrats to pursue more ambitious affordability and coverage reforms.

Administration Updates

Agency Personnel Updates

Senate Prepares to Consider Key HHS Leadership Nominees

Several senior federal health positions remain vacant as the Trump Administration works to rebuild agency leadership following last year's staffing reductions. The CDC and FDA currently lack permanent political leaders, and the Surgeon General position also remains unfilled.

The Senate HELP Committee plans to hold July confirmation hearings for:

- Dr. Erica Schwartz, nominee for CDC Director (scheduled for July 15)
- Dr. Nicole Saphier, nominee for U.S. Surgeon General (not yet scheduled)
- Sean Kaufman, nominee for Assistant Secretary for Preparedness and Response (scheduled for July 15)

Senate Finance is separately expected to consider Chris Klomp, the nominee for HHS Deputy Secretary. President Trump has not yet named a new FDA Commissioner.

Senate HELP Committee Chair Bill Cassidy has indicated that the committee is moving forward with the nominations and has spoken positively about Schwartz and Saphier. The nominees are generally viewed as having more traditional health and medical backgrounds and as being less closely associated with controversial vaccine positions than some previous Administration selections. ([Axios](#)) ([Reuters](#))

RFK Jr. Signals Changes to Federal Preventive Services Panel

HHS Secretary Robert F. Kennedy Jr. is preparing to reshape the U.S. Preventive Services Task Force, the independent expert panel that evaluates evidence and recommends which preventive services should be routinely offered and covered by most private health plans without cost-sharing.

Kennedy has criticized the task force for not recommending broader screening for conditions such as Alzheimer's disease and has expressed interest in expanding access to additional preventive testing, including screenings related to kidney disease and colon cancer. The prospect of expanded recommendations has drawn support from some patient organizations and diagnostic-test manufacturers.

However, former task force leaders and other public health experts warn that expanding screening without sufficient evidence could expose patients to false-positive results, unnecessary follow-up procedures, added costs, and potential conflicts of interest. They have emphasized that the task force's recommendations should continue to be based on rigorous reviews of both the benefits and potential harms of preventive services. The panel's work has already been disrupted by canceled meetings, leadership dismissals, and unfilled vacancies, delaying updates to several screening recommendations. ([Politico](#))

ICYMI: Recent Dental Headlines

- [Axios](#): Millions in U.S. travel abroad for cheaper dental care
- [Center for Medicare Advocacy](#): Study Backs Link Between Oral Health and Overall Health
- [Axios](#): Exclusive: FDA allows ZYN to sell pouches on health benefits
- [Axios](#): Exclusive: GOP think tank pushes heavy health spending cuts

What's Ahead

- July 3 – 12 and July 24 – August 30: House Recess
- June 20 – July 10 and August 10 – September 11: Senate Recess

Federal Bill Tracker | Oral Health Issues

NEW Actions! H.R. 2001 - Action for Dental Health Act

Introduced by Reps. Robin Kelly (D-IL) and Mike Simpson (R-ID) in 2025, the bipartisan bill would reauthorize HRSA's Action for Dental Health program through FY 2030. The program supports grants to address dental workforce needs and improve access to oral health care in dental health professional shortage areas. The bill was formally reported by the House Energy and Commerce Committee and placed on the House calendar. A House committee report was issued, and additional cosponsors were added through July 2. It is now eligible for consideration by the full House, although no floor vote has been scheduled.

Actions:

- Introduced in the House on March 3, 2025
- Referred to the House Committee on Energy and Commerce.
- Committee Consideration and Mark-up Session Held on May 21, 2026
- Bill advanced to Full House by unanimous voice vote on May 21, 2026
- Reported by House Committee on Energy and Commerce on July 2, 2026
- Placed on Union calendar on July 2, 2026

NEW! S. 4370 – Primary Care Team Education Centers Act

Introduced by Sen. Tim Kaine (D-VA), the bill would establish and expand primary care team education centers that provide educational and clinical training opportunities for health professionals, including dental hygienists and dental assistants. The centers would build on the community-based Teaching Health Center model and help prepare health professionals to practice in rural and underserved areas facing workforce shortages.

Actions:

- Introduced in the Senate on April 22, 2026
- Referred to the Senate HELP Committee

S. 4008 - Promoting Dental Health Act

Introduced by Sen. Dick Durbin (D-IL), this bill would reauthorize federal oral health promotion and disease-prevention programs, including support for the CDC's Oral Health program, through 2031. The CDC Oral Health program is currently funded at \$20.25 million annually and supports state-based activities such as oral health surveillance, dental education, school sealant programs for low-income children, workforce development, and efforts to prevent cavities, gum disease, and other oral health conditions. ([Full Press Release](#))

Actions:

- Introduced in the Senate on March 5, 2026
- Referred to the Senate HELP Committee

H.R. 7931 - Improving Dental Administration Act of 2026

Introduced by Reps. Jeff Van Drew (R-NJ) and Herb Conaway (D-NJ), this bill would amend Employee Retirement Income Security Act (ERISA) to require self-funded dental plans to adhere to state-level consumer protection and insurance laws, increasing accountability and transparency for patients and providers. ([ADA News](#))

Actions:

- Introduced in the House on March 12, 2026
- Referred to the House Committee on Education and Workforce