

**(3) Risk adjustment**

The Secretary shall utilize appropriate risk adjustment measures to determine eligible hospitals.

**(b) Report to the Secretary**

As determined appropriate by the Secretary, eligible hospitals and patient safety organizations working with those hospitals shall report to the Secretary on the processes employed by the hospital to improve readmission rates and the impact of such processes on readmission rates.

(July 1, 1944, ch. 373, title III, §399KK, as added Pub. L. 111-148, title III, §3025(b), Mar. 23, 2010, 124 Stat. 412.)

PART T—ORAL HEALTHCARE PREVENTION  
ACTIVITIES

**§ 280k. Oral healthcare prevention education campaign****(a) Establishment**

The Secretary, acting through the Director of the Centers for Disease Control and Prevention and in consultation with professional oral health organizations, shall, subject to the availability of appropriations, establish a 5-year national, public education campaign (referred to in this section as the “campaign”) that is focused on oral healthcare prevention and education, including prevention of oral disease such as early childhood and other caries, periodontal disease, and oral cancer.

**(b) Requirements**

In establishing the campaign, the Secretary shall—

(1) ensure that activities are targeted towards specific populations such as children, pregnant women, parents, the elderly, individuals with disabilities, and ethnic and racial minority populations, including Indians, Alaska Natives and Native Hawaiians (as defined in section 1603(c)<sup>1</sup> of title 25) in a culturally and linguistically appropriate manner; and

(2) utilize science-based strategies to convey oral health prevention messages that include, but are not limited to, community water fluoridation and dental sealants.

**(c) Planning and implementation**

Not later than 2 years after March 23, 2010, the Secretary shall begin implementing the 5-year campaign. During the 2-year period referred to in the previous sentence, the Secretary shall conduct planning activities with respect to the campaign.

(July 1, 1944, ch. 373, title III, §399LL, as added Pub. L. 111-148, title IV, §4102(a), Mar. 23, 2010, 124 Stat. 550.)

## REFERENCES IN TEXT

Section 1603(c) of title 25, referred to in subsec. (b)(1), which defines “Indians”, was redesignated section 1603(13) of title 25 by Pub. L. 111-148, title X, §10221(a), Mar. 23, 2010, 124 Stat. 935.

<sup>1</sup> See References in Text note below.

**§ 280k-1. Research-based dental caries disease management****(a) In general**

The Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall award demonstration grants to eligible entities to demonstrate the effectiveness of research-based dental caries disease management activities.

**(b) Eligibility**

To be eligible for a grant under this section, an entity shall—

(1) be a community-based provider of dental services (as defined by the Secretary), including a Federally-qualified health center, a clinic of a hospital owned or operated by a State (or by an instrumentality or a unit of government within a State), a State or local department of health, a dental program of the Indian Health Service, an Indian tribe or tribal organization, or an urban Indian organization (as such terms are defined in section 1603 of title 25), a health system provider, a private provider of dental services, medical, dental, public health, nursing, nutrition educational institutions, or national organizations involved in improving children’s oral health; and

(2) submit to the Secretary an application at such time, in such manner, and containing such information as the Secretary may require.

**(c) Use of funds**

A grantee shall use amounts received under a grant under this section to demonstrate the effectiveness of research-based dental caries disease management activities.

**(d) Use of information**

The Secretary shall utilize information generated from grantees under this section in planning and implementing the public education campaign under section 280k of this title.

(July 1, 1944, ch. 373, title III, §399LL-1, as added Pub. L. 111-148, title IV, §4102(a), Mar. 23, 2010, 124 Stat. 551.)

**§ 280k-2. Authorization of appropriations**

There is authorized to be appropriated to carry out this part, such sums as may be necessary.

(July 1, 1944, ch. 373, title III, §399LL-2, as added Pub. L. 111-148, title IV, §4102(a), Mar. 23, 2010, 124 Stat. 551.)

**§ 280k-3. Updating national oral healthcare surveillance activities****(1) PRAMS****(A) In general**

The Secretary of Health and Human Services (referred to in this section as the “Secretary”) shall carry out activities to update and improve the Pregnancy Risk Assessment Monitoring System (referred to in this section as “PRAMS”) as it relates to oral healthcare.

**(B) State reports and mandatory measurements****(i) In general**

Not later than 5 years after March 23, 2010, and every 5 years thereafter, a State shall