Ensuring Lasting Smiles Act (S. 560/H.R. 1379)

Frequently Asked Questions

What is the Ensuring Lasting Smiles Act?

The Ensuring Lasting Smiles Act (ELSA) is federal legislation that would

- ensure all private group and individual health plans cover medically necessary services, including needed dental procedures, as a result of congenital anomalies;
- stipulate that coverage include services and procedures that functionally repair or restore any
 missing or abnormal body part that is medically necessary to achieve normal body functioning
 or appearance, and clarifies that this includes adjunctive dental, orthodontic or prosthodontic
 support; and
- exclude cosmetic procedures or surgery to reshape normal structures of body to improve appearance or self-esteem.

What is a congenital anomaly?

According to the World Health Organization, congenital anomalies are also known as birth defects, congenital disorders or congenital malformations. Congenital anomalies can be defined as structural or functional anomalies (e.g. metabolic disorders) that occur during intrauterine life and can be identified prenatally, at birth or later in life. Congenital anomalies can be caused by single gene defects, chromosomal disorders, multifactorial inheritance, environmental teratogens and micronutrient deficiencies. For example, patients with congenital craniofacial anomalies suffer from oral and facial defects such as cleft lip or palate, skeletal and maxillofacial anomalies, facial paralysis, hypodontia (absence of teeth), microtia, craniosynostosis, and enamel hypoplasia. Their condition often impedes daily functioning, particularly that of the nose and mouth area, which can affect a person's ability to breathe, eat and speak properly.

Why is the Ensuring Lasting Smiles Act necessary?

About four percent of children in the U.S. are born with congenital anomalies or birth defects that affect the way they look, develop, or function – often for the rest of their lives.

Most private health plans provide coverage for the surgical treatment of congenital anomalies and many states require insurers to provide coverage of any health services related to congenital anomalies or birth defects. Despite this, health plans often deny claims and appeals for oral or dental related procedures – like orthodontia and dental implants – or other procedures, which are often crucial to the overall success of treatment, claiming these services are cosmetic.

Severe dental anomalies are a common symptom of many craniofacial anomaly conditions requiring serious medical treatment that is outside the scope of procedures covered by dental plans. As a result, patients are forced to incur significant out-of-pocket costs on medically necessary reconstructive dental care related to their disorder during their lifetime. When private insurance denies a child's reconstructive surgery, families many times end up turning to Medicaid, SCHIP, or other state-sponsored programs for coverage.

The Ensuring Lasting Smiles Act would address these coverage denials and ensure that all patients with birth defects or anomalies get the treatment they need.

Why is federal legislation necessary?

Approximately 25 states require some level of coverage for patients with a congenital or craniofacial anomaly or birth defect. These laws vary in their requirements. Some are very extensive and virtually mirror the Ensuring Lasting Smiles Act while others are more limiting and may only apply to patients with certain conditions, such as patients with a cleft lip and/or palate. Regardless, none of these state laws apply to ERISA plans.

Is this bill disease specific?

No. The bill ensures coverage for any/all medical treatments needed as a result of a congenital anomaly or birth defect (including craniofacial, congenital heart defect, etc.).

Would state laws be pre-empted?

The Ensuring Lasting Smiles Act would provide a floor to ensure minimum coverage by private group and individual insurance plans, including ERISA plans. States would be able to enact more generous laws related to coverage of congenital anomalies.

What is the cost of the bill?

The Congressional Budget Office (CBO) has not yet released an analysis of the bill. However, it should be noted that many states already have enacted legislation to ensure coverage of treatment for congenital anomalies and have seen minimal cost impacts. This legislation would ensure minimum coverage regardless of your state of residence. In addition, many health plans already include coverage for congenital anomalies and this bill would primarily close gaps in coverage that result in denials or delays. This is critical to address so that medically necessary treatment is performed in a timely manner and does not adversely impact a child's developmental milestones, which when delayed, could increase the cost of care long-term. Furthermore, ensuring dependable private insurance coverage helps prevent unnecessary strain on federal health programs such as Medicaid or the Children's Health Insurance Program.

Does this bill have bi-partisan support?

Yes! The lead Senate sponsors are Senators Tammy Baldwin (D-WI) and Joni Ernst (R-IA), and the lead House sponsors are Representatives Collin Peterson (D-MN) and Denver Riggleman (R-VA).

What organizations support the bill?

The bill has support from more than 30 provider and patient advocacy organizations. Please see the support letter for a full list.

Who do I contact with questions or to cosponsor the Ensuring Lasting Smiles Act?

To cosponsor S. 560, please contact <u>Kathleen_Laird@baldwin.senate.gov</u> (Sen. Baldwin) or <u>Hyder_Chowdhry@ernst.senate.gov</u> (Sen. Ernst). To cosponsor H.R. 1379 please contact <u>Adam.Durand@mail.house.gov</u> (Rep. Peterson) or <u>Eli.Woerpel@mail.house.gov</u> (Rep. Riggleman).