HOUSE CONCURRENT RESOLUTION

REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL EFFECTS OF REQUIRING HEALTH INSURERS TO OFFER COVERAGE FOR CERTAIN TYPES OF RECONSTRUCTIVE SURGERY, INCLUDING CRANIOFACIAL SURGERY.

WHEREAS, about 100,000 children are born each year with some degree of craniofacial disfigurement, and children as well as adults can develop such conditions through trauma and disease; and

WHEREAS, these and other individuals would greatly benefit from reconstructive surgery to correct or repair abnormal structures of their bodies; and

WHEREAS, "reconstructive surgery" means any medically necessary and appropriate surgery performed to correct or repair abnormal structures of the body caused by congenital defects, developmental abnormalities, trauma, infection, tumors, or disease, such as craniofacial surgery, to improve functions or give the patient a normal appearance, to the extent possible, in the judgment of the physician performing the surgery; and

WHEREAS, "cosmetic surgery" means surgery that is performed to alter or reshape normal structures of the body to improve appearance; and

WHEREAS, insurance companies will sometimes incorrectly label needed reconstructive care as "cosmetic" and deny coverage for this and other reasons; and

WHEREAS, it is reported that when this denial of coverage is challenged legally, insurers generally settle and pay for the coverage, but due to the financial burdens associated with craniofacial conditions, many families are unable to afford legal representation and either forego the surgery or incur significant financial debt; and

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WHEREAS, the American Medical Association has already developed clear guidelines regarding the differences between cosmetic and reconstructive surgeries; and

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WHEREAS, the Reconstructive Surgery Act of 2005, H.R. 4022, which incorporates these definitions and is similar to language in federal law requiring coverage for reconstruction after mastectomies, was introduced in Congress to guarantee insurance coverage for craniofacial and other patients; and

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WHEREAS, at least 16 other states have passed some degree of legislation to require insurers to cover reconstructive surgeries, and no evidence has been presented to suggest that this has resulted in significant premium increases; and

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WHEREAS, the Legislature believes that mandatory health insurance coverage for certain types of reconstructive surgery, including craniofacial surgery, as provided in H.B. No. (2006), will assist in the maintenance of good health for the people of this State; now, therefore,

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BE IT RESOLVED by the House of Representatives of the Twenty-third Legislature of the State of Hawaii, Regular Session of 2006, the Senate concurring, that the Auditor is requested to conduct an impact assessment report, pursuant to sections 23-51 and 23-52, Hawaii Revised Statutes, of the social and financial impacts of mandating coverage for certain types of reconstructive surgery, including craniofacial surgery, for all policies and contracts, hospital and medical service plan contracts, medical service corporation contracts, and health maintenance organization plans and contracts issued after (2006); and December 31, 2006, as provided in H.B. No.

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BE IT FURTHER RESOLVED that the Auditor is requested to submit findings and recommendations to the Legislature, including any necessary implementing legislation, at least twenty days prior to the convening of the Regular Session of 2007; and

BE IT FURTHER RESOLVED that certified copies of this Concurrent Resolution be transmitted to the Auditor and to the Insurance Commissioner, who in turn is requested to transmit copies to each insurer in the state that issues health insurance policies.

OFFERED BY:

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