



An Independent Licensee of the Blue Cross and Blue Shield Association

February 26, 2013

The Honorable David Y. Ige, Chair The Honorable Michelle N. Kidani, Vice Chair

Senate Committee on Ways and Means

Re: SB 1240, SD1 – Relating to Pediatric Dental Health Coverage

Dear Chair Ige, Vice Chair Kidani and Members of the Committee:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 1240, SD1, which require all individuals under 19-years of age to purchase dental health coverage through the Hawaii Health Connector. HMSA supports this Bill.

The Center for Disease Control found that childhood tooth decay, despite being preventable, remains the most common chronic disease among American children. In light of this, the US Surgeon General called for increased attention to oral health as a core component of overall health and for the need to reduce oral health disparities.

Better oral health outcomes can be achieved at lower cost if dentally-necessary care is initiated early in childhood, and the Affordable Care Act (ACA) provides an unprecedented opportunity to address the oral health needs of our keiki. The single most significant step toward achieving this is the inclusion of a mandated pediatric dental benefit as part of the essential benefits package. The potential benefit of this mandate includes:

- better overall health at lower cost;
- greater health equity;
- enhanced capacity for millions of children to grow, eat, play, and learn;
- improved general health throughout the lifespan; and
- potential reductions in premature births.

In mandating coverage for pediatric dental services, Congress fully recognized that a child's overall health was not at the exclusion of the child's oral health. We now need to ensure that the ACA is implemented in a way that maximizes the opportunity to realize improved oral health for our keiki.

Unfortunately, recent federal guidance on the ACA provides a challenge to achieving that goal. While pediatric dental benefits are required to be <u>offered</u> in the health exchange, there is not mandate to <u>purchase</u> those benefits through the exchange. Those regulations, however, conversely mandate pediatric dental benefits to be embedded in a health plans sold outside of the exchange. This creates an inequity between plans offered within the exchange and plans offered outside of the exchange.

SB 1240, SD1, ensures that any individual under the age of 19-years who purchases medical coverage through the Connector also purchases a dental health plan. That oral health plan may be purchased as part of the medical plan or in conjunction with a medical plan via a stand-alone dental health plan.

Thank you for the opportunity to offer our support for SB 1240, SD1.

Sincerely,

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