H.R. NO.**74**

HOUSE RESOLUTION

REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL EFFECTS OF REQUIRING HEALTH INSURERS TO PROVIDE COVERAGE FOR MEDICALLY NECESSARY TREATMENT OF OROFACIAL ANOMALIES.

WHEREAS, in Hawaii, the percentage of children with 1 orofacial anomalies is estimated to be one in every 500; and 2 3 WHEREAS, the percentage of children in Hawaii with 4 orofacial anomalies is higher among Asians, Pacific Islanders, 5 and Filipinos, who constitute the majority of the State's 6 7 population; and 8 9 WHEREAS, the more commonly known orofacial anomalies include cleft lip or cleft palate; and 10 11 WHEREAS, 352 babies were born with cleft lip or cleft 12 palate in Hawaii between 1986 and 2005; and 13 14 15 WHEREAS, orthodontics provides the medically necessary 16 treatment needed to proceed with subsequent reconstructive surgeries for these disorders; and 17 18 19 WHEREAS, orthodontics has been a covered medical benefit of the Medicaid program in Hawaii for several years, and medically 20 necessary orthodontics is included as an essential health 21 benefit under pediatric oral health in the State's healthcare 22 benefits package; and 23 24 WHEREAS, orthodontics is not included as a benefit of 25 commercial health insurance; and 26 27 WHEREAS, without appropriate orthodontic care, 28 reconstructive surgical outcomes are compromised and result in 29 functional deficiencies in chewing, swallowing, respiration, 30 speech, unstable or malpositioned oral structures, premature 31 tooth loss, and adverse psychological effects; and 32 33



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1 WHEREAS, these compromised surgical outcomes can create disparities in quality of care, quality of life, and functional 2 outcomes for children with orofacial disorders; and 3 4 WHEREAS, California, Colorado, Connecticut, Florida, 5 Indiana, Louisiana, Maryland, Massachusetts, Minnesota, New 6 York, North Carolina, Oregon, South Carolina, Texas, Vermont, 7 Virginia, and Wisconsin have mandated health benefits, including 8 orthodontic care coverage for orofacial and related disorders; 9 10 anđ 11 WHEREAS, mandated health benefits that include orthodontic 12 care coverage for orofacial and related disorders offset the 13 14 average lifetime cost of \$10,250 for orthodontic care; and 15 WHEREAS, section 23-51, Hawaii Revised Statutes, requires 16 17 that "[b]efore any legislative measure that mandates health insurance coverage for specific health services, specific 18 diseases, or certain providers of health care services as part 19 20 of individual or group health insurance policies, can be considered, there shall be Resolutions passed requesting the 21 auditor to prepare and submit to the legislature a report that 22 assesses both the social and financial effects of the proposed 23 mandated coverage"; and 24 · 25 WHEREAS, section 23-51, Hawaii Revised Statutes, further 26 27 provides that "[t]he Resolutions shall designate a specific legislative bill that: 28 29 (1)Has been introduced in the legislature; and 30 31 (2) Includes, at a minimum, information identifying the: 32 33 (A) Specific health service, disease, or provider 34 that would be covered; 35 36 37 (B) Extent of the coverage; 38 (C) Target groups that would be covered; 39



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1	(D) Limits on utilization, if any; and
2 3	(E) Standards of care.
4 5	For purposes of this part, mandated health insurance coverage
6 7	shall not include mandated optionals."; and
8	WHEREAS, section 23-52, Hawaii Revised Statutes, further
9 10	specifies the minimum information required for assessing the social and financial impact of the proposed health coverage
11 12	mandate in the State Auditor's report; and
13 14 15	WHEREAS, House Bill No. 2522, introduced in the Regular Session of 2014, mandates health insurance coverage for the treatment of orofacial anomalies for individuals performed to:
16 17 18 19	 Correct or repair abnormal structures of the body, including but not limited to teeth, jaws, and related oral structures;
20 21 22	(2) Ensure good health and adequate dental structures; and
23 24 25	(3) Improve the function of the affected structures and systems,
23 26 27 28 29 30	for all policies and contracts, hospital and medical service plan contracts, medical service corporation contracts, and health maintenance organization plans and contracts issued on or after December 31, 2014; and
31 32 33 34	WHEREAS, the Legislature believes that mandatory health insurance coverage for medically necessary treatment of orofacial anomalies will substantially offset the financial hardship on families needing treatment for their children,
35 36 37 38	reduce compromised surgical outcomes, and assist in good health for children born with orofacial abnormalities in Hawaii; now, therefore,
39 40 41	BE IT RESOLVED by the House of Representatives of the Twenty-seventh Legislature of the State of Hawaii, Regular Session of 2014, that the Auditor is requested to conduct an

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23-52, Hawaii Revised Statutes, of mandating health insurance 2 3 coverage of orofacial anomalies as proposed by House Bill No. 4 2522 (Regular Session of 2014); and 5 BE IT FURTHER RESOLVED that the Auditor is requested to 6 submit a report on the Auditor's findings and recommendations, 7 including any necessary implementing legislation, to the 8 Legislature no later than 20 days prior to the convening of the 9 Regular Session of 2015; and 10 11 BE IT FURTHER RESOLVED that certified copies of this 12 13 Resolution be transmitted to: 14 (1)15 The Auditor; 16 (2)The Insurance Commissioner, who is requested to 17 transmit copies to each insurer in the State that 18 issues health insurance policies; and 19 20 (3) The Director of Health, who is requested to transmit 21 copies to the Children with Special Health Needs 22 Branch of the Department of Health, Hawaii State 23 Council on Developmental Disabilities, Lifetime of 24 Smiles Family Support Group, Kapi'olani Cleft and 25 Craniofacial Center, Kaiser Permanente Cleft Palate 26 Clinic, Tripler Army Medical Center Craniofacial 27 Center, Hawaii Maternal & Child Health Leadership 28 Education in Neurodevelopmental & Related Disabilities 29 Program, Hilopa'a Family to Family Health Information 30 Center, and American Academy of Pediatrics - Hawaii 31 32 Chapter. 33 34 35 OFFERED BY: HMS 2014-2429

impact assessment report in accordance with sections 23-51 and

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