HOUSE CONCURRENT 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 rate of children with orofacial disorders is estimated to be one in every five hundred; and

WHEREAS, the rate of children in Hawaii with orofacial disorders is higher among the Asian, Pacific Islander, and Filipino populations that comprise the majority of the population of the State; and

WHEREAS, the more commonly known orofacial anomalies include cleft lip or cleft palate; and

WHEREAS, three hundred fifty two babies were born with cleft lip and/or cleft palate in Hawaii between 1986 and 2005; and

WHEREAS, orthodontics are the medically necessary treatments needed to proceed with subsequent reconstructive surgeries for these disorders; and

WHEREAS, orthodontics has been a covered medical benefit of the Hawaii Medicaid program for several years, and medically necessary orthodontics are included as an essential health benefit under pediatric oral health in the State's healthcare benefits package; and

WHEREAS, orthodontics are not included as a benefit of commercial health insurance; and

WHEREAS, without appropriate orthodontic care, reconstructive surgical outcomes are compromised and result in functional deficiencies in chewing, swallowing, respiration,

speech, unstable or malpositioned oral structures, premature tooth loss, and adverse psychosocial effects; and

WHEREAS, these compromised surgical outcomes can create disparities in quality of care, quality of life, and functional outcomes for children with orofacial disorders; and

WHEREAS, California, Colorado, Connecticut, Florida, Indiana, Louisiana, Maryland, Massachusetts, Minnesota, New York, North Carolina, Oregon, South Carolina, Texas, Vermont, Virginia, and Wisconsin have mandated health benefits, including orthodontic care coverage for orofacial and related disorders; and

WHEREAS, mandated health benefits that include orthodontic care coverage for orofacial and related disorders aid in the average lifetime cost of \$10,250 for orthodontic care; and

WHEREAS, section 23-51, Hawaii Revised Statutes, requires that "[b]efore any legislative measure that mandates health insurance coverage for specific health services, specific diseases, or certain providers of health care services as part of individual or group health insurance policies, can be considered, there shall be concurrent resolutions passed requesting the auditor to prepare and submit to the legislature a report that assesses both the social and financial effects of the proposed mandated coverage"; and

WHEREAS, section 23-51, Hawaii Revised Statutes, further provides that "[t]he concurrent resolutions shall designate a specific legislative bill that:

- (1) Has been introduced in the legislature; and
- (2) Includes, at minimum, information identifying the:
 - (A) Specific health service, disease, or provider that would be covered;
 - (B) Extent of the coverage;
 - (C) Target groups that would be covered;
 - (D) Limits on utilization, if any; and
 - (E) Standards of care.

For purposes of this part, mandated health insurance coverage shall not include mandated optionals"; and

WHEREAS, section 23-52, Hawaii Revised Statutes, further specifies the minimum information required for assessing the

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social and financial impact of the proposed health coverage mandate in the Auditor's report; and

WHEREAS, No. , introduced in the Regular Session of , mandates health insurance coverage for the treatment of orofacial anomalies for individuals, performed to correct or repair abnormal structures of the body, including but not limited to teeth, jaw, and related oral structures; ensure good health and adequate dental structures; and improve function of the affected structures and systems 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, ; and

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, reduce compromised surgical outcomes, and assist in good health for children born with orofacial abnormalities in Hawaii; now, therefore,

BE IT RESOLVED by the House of Representatives of the Twenty-seventh Legislature of the State of Hawaii, Regular Session of 2013, the Senate concurring, that the Auditor is requested to conduct an impact assessment in accordance with sections 23-51 and 23-52, Hawaii Revised Statutes, on the mandatory health insurance coverage of orofacial anomalies proposed by

No. ; and

BE IT FURTHER RESOLVED that the Auditor is requested to submit findings and recommendations to the Legislature, including any necessary implementing legislation, no later than twenty days prior to the convening of the Regular Session of 2014; 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, and to the Children with Special Needs Branch of the Department of Health, State Council on Developmental

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1	Disabilities, Lifetime of Smiles Support Group, Kapi'olani Cleft
2	and Craniofacial Center, Kaiser Cleft Palate Clinic, Tripler
3	Army Medical Center Craniofacial Center, Hawaii Maternal & Child
4	Health Leadership Education in Neurodevelopmental & Related
5	Disabilities Program, Hilopa'a Family to Family Health
6	Information Center, and American Academy of Pediatrics - Hawaii
7	Chapter.

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OFFERED BY:

Mel Camel

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