
A BILL FOR AN ACT

RELATING TO HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The rate of children with orofacial anomalies
2 such as a cleft lip or cleft palate in the State is estimated to
3 be one in five hundred births. Orthodontic services for the
4 treatment of orofacial anomalies are not included as a benefit
5 in commercial health plans. Without orthodontic treatment,
6 appropriate care and reconstructive surgical outcomes are
7 compromised and this has resulted in functional deficiencies in
8 chewing, swallowing, respiration, and speech, unstable or
9 malpositioned oral structures, premature tooth loss, and adverse
10 psychosocial effects.

11 Orthodontic services have for several years been a covered
12 medical benefit of the Hawaii medicaid program and are a part of
13 the benchmark plan for pediatric oral health for the essential
14 health benefits package for the State.

15 Requiring insurance coverage for medically necessary
16 orthodontic treatment of orofacial anomalies will enable
17 individuals to obtain treatment and proceed with reconstructive
18 surgery. However, the legislature recognizes that before



1 statutorily mandating this coverage, it is necessary to obtain
2 an assessment of the effects of this mandated coverage.

3 The purpose of this Act is to require the auditor to assess
4 the social and financial effects of proposed mandatory health
5 insurance coverage for orthodontic services for the treatment of
6 orofacial anomalies for individuals in the State who are under
7 twenty-six years of age.

8 SECTION 2. (a) The auditor shall assess the social and
9 financial effects of making health insurance coverage for
10 medically necessary orthodontic services for the treatment of
11 orofacial anomalies a mandatory benefit in all policies,
12 contracts, plans, or agreements issued or renewed in the State
13 after December 31, 2015. The mandatory benefit shall be limited
14 to policyholders and covered individuals in the State who are
15 under twenty-six years of age.

16 (b) The mandatory benefit shall cover treatment performed
17 to:

18 (1) Correct or repair abnormal oral structures of the body
19 including, but not limited to, teeth, jaw, and related
20 oral structures;

21 (2) Ensure good health and adequate dental structures; and



1 (3) Improve function of the affected structures and
2 systems;
3 provided that treatment shall not be denied on the basis that
4 treatment is habilitative or non-restorative in nature.

5 (c) The mandatory benefit for orthodontic services for
6 treatment of orofacial anomalies shall be subject to a maximum
7 benefit amount of \$5,000 per treatment phase, but not subject to
8 limits on the number of visits to an orthodontist; provided that
9 payments made by an insurer on behalf of a covered individual
10 for any care, treatment, intervention, or service other than
11 orthodontic services shall not be applied toward any maximum
12 benefit.

13 (d) As of January 1, 2016, to the extent that the
14 mandatory benefit requires benefits that exceed the essential
15 health benefits specified under section 1302(b) of the Patient
16 Protection and Affordable Care Act of 2010 (P.L. 111-148), the
17 specific benefits that exceed the specified essential health
18 benefits shall not be required of a qualified health plan when
19 the plan is offered in this State through the Hawaii health
20 insurance exchange by a health carrier. Nothing in this Act
21 shall nullify the application of the mandatory benefit to plans
22 offered outside the Hawaii health insurance exchange.



1 (e) The auditor shall submit a report on the assessment
2 specified in this Act to the legislature no later than twenty
3 days before the convening of the regular session of 2015, and
4 shall include findings, recommendations, and any implementing
5 legislation.

6 SECTION 3. This Act shall take effect on July 1, 2050.



Report Title:

Mandatory Insurance Coverage; Orthodontic Treatment; Orofacial Anomalies; Auditor Assessment

Description:

Requires the Auditor to assess the social and financial impact of mandatory health insurance coverage for orthodontic services for the treatment of orofacial anomalies for individuals in the State who are under 26 years of age. Effective July 1, 2050.
(HB2522 HD1)

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