

October 19, 2020

The Honorable Bobby Scott
Chair, House Committee on Education and
Labor
2176 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Virginia Foxx
Ranking Member, House Committee on
Education and Labor
2176 Rayburn House Office Building
Washington, D.C. 20515

Dear Chairman Scott and Ranking Member Foxx:

The undersigned organizations write to express our strong support for HR 1379, the Ensuring Lasting Smiles Act (ELSA), which has more than 300 bipartisan cosponsors and passed the House Energy and Commerce Committee on Sept. 9.

As you are aware, your committee also has jurisdiction of this bill. Our organizations are concerned that time is running out to pass this important legislation in the 116th Congress. Therefore, we respectfully request that the House Education and Labor Committee quickly schedule a markup or waive jurisdiction of the bill so it can be brought to the House floor for passage as quickly as possible.

This legislation will have a direct impact on patients and will eliminate the existing burdens that prevent access to necessary diagnosis and treatment for those with congenital craniofacial anomalies, such as cleft lip and palate, skeletal and maxillofacial abnormalities, facial paralysis, microtia, hypodontia, and craniosynostosis. Specifically, if enacted, ELSA will ensure all group and individual health plans cover medically necessary services, including needed dental procedures such as orthodontic or prosthodontic support, as a result of a congenital anomaly. It would exclude coverage for cosmetic procedures or surgery on normal structures.

The Centers for Disease Control and Prevention (CDC) classifies birth defects as “common, costly, and critical” and reports that one in 33 newborns in the United States suffers from a congenital anomaly. Craniofacial anomalies, for example, can restrict a patient’s ability to breathe, eat, and speak in a normal manner. Therefore, highly personalized surgery to repair an anomaly helps the patient grow and function normally. Early intervention by a team of specialists, including plastic surgeons, oral and maxillofacial surgeons, pediatric dentists, orthodontists, dermatologists and speech therapists, is necessary to assess and oversee the patient’s treatment and development, sometimes over the course of several years.

Most private health plans provide coverage for the surgical treatment of congenital anomalies and many states require insurers to provide coverage of any health services related to congenital anomalies or birth defects. Despite this, health plans often deny claims and appeals for oral or dental-related procedures – like orthodontia and dental implants – or other procedures, which are often crucial to the overall success of treatment, claiming these services are cosmetic.

Severe dental anomalies are a common symptom of many craniofacial anomaly conditions requiring serious medical treatment that is outside the scope of procedures covered by dental plans. As a result, patients are forced to incur significant out-of-pocket costs on medically necessary reconstructive dental

care related to their disorder during their lifetime. When private insurance denies a child's reconstructive surgery, families many times end up turning to Medicaid, SCHIP, or other state-sponsored programs for coverage.

The Ensuring Lasting Smiles Act would address these coverage denials and ensure that all patients with birth defects or anomalies get the treatment they need.

For these reasons, we support the Ensuring Lasting Smiles Act and urge your committee to help advance this bill through the House.

Sincerely,