The Honorable Anna Eshoo Chair, Health Subcommittee House Committee on Energy & Commerce 2125 Rayburn House Office Building Washington, D.C. 20515 The Honorable Michael Burgess Ranking Member, Health Subcommittee House Committee on Energy & Commerce 2125 Rayburn House Office Building Washington, D.C. 20515

Dear Chairwoman Eshoo and Ranking Member Burgess:

The undersigned organizations write to express our support for HR 1379, the Ensuring Lasting Smiles Act (ELSA). We appreciate your leadership in recognizing the importance of this bill by including it as part of the Health Subcommittee's Jan. 8 hearing entitled, "Legislation to Improve Americans' Health Care Coverage and Outcomes."

This legislation – with more than 260 bipartisan cosponsors – 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 members of your subcommittee to help advance this bill through the House.

Sincerely,

Academy of General Dentistry

American Academy of Neurology

American Academy of Pediatric Dentistry

American Association of Oral and Maxillofacial Surgeons

American Association of Orthodontists

American College of Surgeons

American Dental Association

American Society of Dentist Anesthesiologists

American Society of Plastic Surgeons

**Dermatology Nurses' Association** 

International Pemphigus and Pemphigoid Foundation

March of Dimes

National Foundation for Ectodermal Dysplasias

National Organization for Rare Disorders

Noah's Hope

Pathways for Rare and Orphan Studies